FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION	
	(See instructions)	Office use only
NAME OF COMMITTEE (in	(Check if name Example: If typying, to some standard over the lines)	type 12FE4M5
WedgePAC		
ADDRESS (number and	PO Box 680063	
(Check if adding is changed)	Iress Franklin	
COMMITTEE'S E-MA	CITY▲ AIL ADDRESS	STATE▲ ZIP CODE ▲
info@fecfina	ncial.com	
1		
COMMITTEE'S WEE	B PAGE ADDRESS (URL)	
www.wedge	pac.org	
1		
COMMITTEE'S FAX	NIIMPED	
I I I .	NOMBER	
2. DATE <b>0</b>	M	
3. <b>FEC IDENTIFIC</b>	ATION NUMBER C C00409276	
4. IS THIS STATE	MENT X NEW (N) OR AMENDED	D (A)
I certify that I have exar	nined this Statement and to the best of my knowledge and belief it is true,	correct and complete
	Mr. Coorgo M. Johnson	
Type or Print Name o	f Treasurer Mr. George M Johnson	
Signature of Treasure	Electronically Filed by Mr. George M Johnson	Date 03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of f	alse, erroneous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPO	
Office Use Only	For further info Federal Election Toll Free 800-42 Local 202-694-1	24-9530 (Revised 12/2007)

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5. TYPE OF COMMIT Candidate Commit		
(a) This	s committee is a principal campaign committee. (Complete the candidate information below.)	
(-)	s committee is an authorized committee, and is NOT a principal campaign committee. (Complete the rmation below.)	candidate
Name of Candidate		
Candidate Party Affiliation	Office Sought: House Senate President	State District
(c) This	committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committee:		
(d) This		Democratic, epublican,etc.) Party.
Political Action Co	ommittee (PAC):	
(e) This	committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	organization is a:
	Corporation Corporation w/o Capital Stock Labor	r Organization
	Membership Organization Trade Association Coop	perative
	committee supports/opposes more than one Federal candidate, and is NOT a separate segregated funittee. (i.e., nonconnected committee)	und or party
x	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising	Representative:	
	committee collects contributions, pays fundraising expenses and disburses net proceeds for two or n nittees/organizations, at least one of which is an authorized committee of a federal candidate.	nore political
	committee collects contributions, pays fundraising expenses and disburses net proceeds for two or nittees/organizations, none of which is an authorized committee of a federal candidate.	nore political
Committees	Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	
5	FEC ID number C	

2007)			Page <b>3</b>
anization, Affiliated Committee, L	eadership PAC Sponsor or	Joint Fundrais	sing Representative
	<u> </u>		
PO Box 680063			
Franklin		T <sub>N</sub> _	37068 _ 0063
CITY▲	s	TATE 🛦	ZIP CODE
Affiliated Committee	X Leadership PAC Sponso	r Join	t Fundraising Representative
pooks and records.		position of the	he person in
Brentwood		TN	37027 _ 4944
CITY A		045	ZIP CODE A
		of the comm	ittee; and the
orge M Johnson			
215 High Lea Ro	pad		
Brentwood		TN_	37027 _ 4944
CITY 🛦	\$	STATE <b>A</b>	ZIP CODE A
	Telephone numb	615	_ 373 _ 2054
	PO Box 680063  PO Box 680063  Franklin  CITY  Affiliated Committee  Affiliated Committee  Affiliated Committee  Tooks and records.  Tranklin  Affiliated Committee  Tooks and records.  Tranklin  CITY  Affiliated Committee  Affiliated Committee  Tooks and records.  Tranklin  CITY  Affiliated Committee  Affiliated Committee  Tooks and records.  Tranklin  CITY  Affiliated Committee  Affiliated Committee  Affiliated Committee  Tooks and records.  Tranklin  Affiliated Committee  Affiliated Committee  Tooks and records.  Tranklin  Affiliated Committee  Affiliated Committee  Tooks and records.  Tranklin  Affiliated Committee	Affiliated Committee, Leadership PAC Sponsor or A PO Box 680063  Franklin  CITY A S Affiliated Committee X Leadership PAC Sponso  Intify by name, address, (phone number optional), and books and records.  Intify By name, address, (phone number optional), and books and records.  Intify By name, address, (phone number optional) and books and records.  Intify By name, address, (phone number optional) of the treasurer of designated agent (e.g., assistant treasurer).  Intify By name, address, (phone number optional) of the treasurer of designated agent (e.g., assistant treasurer).  Intify By name, address, (phone number optional) of the treasurer of designated agent (e.g., assistant treasurer).  Intify By name, address, (phone number optional) of the treasurer of designated agent (e.g., assistant treasurer).  Intify By name, address, (phone number optional) of the treasurer of designated agent (e.g., assistant treasurer).	PO Box 680063  PO Box 680063  Franklin  CITYA  STATE A  Affiliated Committee  X Leadership PAC Sponsor  Join  ontify by name, address, (phone number optional), and position of the spooks and records.  orge M Johnson  215 High Lea Road  Brentwood  TN  CITY A  STATE A  Telephone number  615  and address (phone number optional) of the treasurer of the comm designated agent (e.g., assistant treasurer).  orge M Johnson  215 High Lea Road  Brentwood  TN  CITY A  STATE A  Telephone number  615  Torge M Johnson  215 High Lea Road

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Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY A	STATE A	ZIP CODE A
	Tele	phone number	
9. Banks or Other Depos safety deposit boxes or Name of Bank, Deposit	maintains funds.	committee deposits funds, hol	ds accounts, rents
Mailing Address	231 S Royal Oaks Boulevard		
	Franklin	ŢN _	37064 _ 8973
	CITY 🗖	STATE <b>△</b>	ZIP CODE 🛕
Name of Bank, Deposit	ory, etc.		
Mailing Address			
	CITY 🙇	STATE.▲	ZIP CODE 🛕