Only

STATEMENT OF

PAGE 1 / 4

FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Blackburn Victory Fund 4916 Thoroughbred Ln ADDRESS (number and street) (Check if address is changed) Brentwood 37207 TN CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS les@leswilliamson.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00632877 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Williamson, Les, , , Type or Print Name of Treasurer Williamson, Les,,, [Electronically Filed] 12 16 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

l	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Can	ididate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate / Affiliation	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	DISTRICT
Name Cand	e of lidate		
Par	ty Con	nmittee:	
(d)			(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	Making a Responsible Stand for Households in American PAC	409276
	2.	Marsha for Senate C C003	376939
	3.	NRCC FEC ID number C C000	075820
	4.		

FEC Form 1 (Revise	ed 02/2009)	Page 3
Write or Type Committee Na	ame	
Blackburn Vic	tory Fund	
	d Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of the perso	on in possession of committee
	son, Les, , ,	
Full Name	14916 Thoroughbred Lane	
Mailing Address		
	Brentwood	37027
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	_ - 676 - 7442
. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; and	d the name and address of
Full Name Williams of Treasurer	son, Les, , ,	
Mailing Address	4916 Thoroughbred Lane	
	Brentwood TN	37027
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 214	676 7442

FEC Form	1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE ZI	P CODE
Title or Position		
	Telephone number	
safety deposit bo		accounts, rents
safety deposit bo	xes or maintains funds.	accounts, rents
safety deposit bo Name of Bank, D	pepository, etc. Franklin Synergy Bank 722 Columbia Ave Franklin TN 37064	IP CODE
safety deposit bo Name of Bank, D	res or maintains funds. Depository, etc. Franklin Synergy Bank 722 Columbia Ave Franklin Franklin CITY STATE ZI	
safety deposit bo Name of Bank, E Mailing Address	res or maintains funds. Depository, etc. Franklin Synergy Bank 722 Columbia Ave Franklin Franklin CITY STATE ZI	
safety deposit bo Name of Bank, E Mailing Address	res or maintains funds. Depository, etc. Franklin Synergy Bank 722 Columbia Ave Franklin Franklin CITY STATE ZI	
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	res or maintains funds. Depository, etc. Franklin Synergy Bank 722 Columbia Ave Franklin Franklin CITY STATE ZI	
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	res or maintains funds. Depository, etc. Franklin Synergy Bank 722 Columbia Ave Franklin Franklin CITY STATE ZI	