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FEC  
FORM 1

# STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

Committee To Elect J. Chris Vaughn

ADDRESS (number and street)

2890-A GA Highway 212 #214

(Check if address is changed)

Conyers

GA

30094

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

campaign@chrisvaughnforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.chrisvaughnforcongress.com

2. DATE

05 / 13 / 2012

3. FEC IDENTIFICATION NUMBER

C TO BE ASSIGNED

4. 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.

Type or Print Name of Treasurer

Lisa L. Vaughn

Signature of Treasurer

Date

05 / 13 / 2012

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.

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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2009)

12030810992

5. TYPE OF COMMITTEE

Candidate Committee:

- (a)  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. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation:  REP  DEM  IND  OTH

Office Sought:  House  Senate  President

State:  AL  AK  AZ  CA  CO  CT  DC  DE  FL  GA  HI  IA  IL  IN  KS  KY  LA  MA  MD  ME  MI  MN  MO  MS  MT  NC  ND  NH  NJ  NM  NV  NY  OH  OK  OR  PA  RI  SC  SD  TN  TX  UT  VT  WA  WI  WY

District:  01  02  03  04  05  06  07  08  09  10  11  12  13  14  15  16  17  18  19  20  21  22  23  24  25

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

Party Committee:

- (d)  This committee is a \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

|    |       |               |                                  |
|----|-------|---------------|----------------------------------|
| 1. | _____ | FEC ID number | <input type="checkbox"/> C _____ |
| 2. | _____ | FEC ID number | <input type="checkbox"/> C _____ |
| 3. | _____ | FEC ID number | <input type="checkbox"/> C _____ |
| 4. | _____ | FEC ID number | <input type="checkbox"/> C _____ |

12030810993



Full Name of Designated Agent

Elizabeth Mathis

Mailing Address

1000 Elliot Road

McDonough

GA

30252

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

12030810995

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank Of North Georgia

Mailing Address

1981 Highway 138 Southeast

Conyers

GA

30094

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

Federal Election Commission  
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

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Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked  
5/14/12

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*JMS*  
PREPARER

5/15/12  
DATE PREPARED

12030810996