Only

PAGE 1 / 4

STATEMENT OF **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. Committee for Byron Bush US Senate 8011 Brooks Chapel Rd ADDRESS (number and street) Unit 987 (Check if address is changed) **Brentwood** ΤN 37027 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS troy@politicalfinancialmanagement.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.abettertennessee.com (Check if address is changed) DATE 05 2019 C00725846 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. Mahan, Garland, , , Type or Print Name of Treasurer Mahan, Garland, , , [Electronically Filed] 2019 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

FEC Form 1 (Revised 02/2009)	Page 2				
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 information below.)	e. (Complete the candidate				
Name of Candidate Bush, Byron, , ,					
Candidate	State				
Party Affiliation REP Sought: House Senate President	dent District 00				
(c) This committee supports/opposes only one candidate, and is NOT an authorized commi					
Name of					
Candidate Candidate					
Party Committee:	(0)				
(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 sepacommittee. (i.e., nonconnected committee)	arate segregated 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.)					
Joint Fundraising Representative:					
(g) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, at least one of which is an authorized committee of a federal can					
(h) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.					
Committees Participating in Joint Fundraiser					
. C					
2. FEC ID number					
3. FEC ID number C					
4. FEC ID number C					

FEC Form 1 (Revised 0)2/2009)		Page 3
Write or Type Committee Name			. 3
Committee for E	Byron Bush US Senate		
	Organization, Affiliated Committee, Joint Fundraising R	epresentative	e, or Leadership PAC Sponsor
NONE			
_	<u> </u>		<u> </u>
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundrais	sing Represent	tative Leadership PAC Sponso
. Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and po	osition of the p	person in possession of committe
Bush, Kelly	1, , ,		
Mailing Address	5601 Cloverland Dr		
Maining Address			
	Brentwood	TN	37027
Title or Position	CITY	STATE	ZIP CODE
Custodian	Telephone r	number	615 - 601 - 7146
. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of assistant treasurer).	the committee	e; and the name and address of
Full Name Mahan, Ga	rland, , ,		
Mailing Address	2531 Park Dr		
	Suite C		
	Nashville	TN	37214
Title or Position	CITY	STATE	ZIP CODE
Treasurer	Telephone n	number	615 - 883 - 7800

FEC Form	1 (Revised 02/2009)	Page 4		
Full Name of Designated Agent	Mahan, Garland, , ,			
Mailing Address	2531 Park Dr			
	Suite C			
	Nashville TN 37214 CITY STATE ZIF	P CODE		
Title or Position Treasurer		3 _ - 7800		
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.				
	Volunteer State Bank			
Mailing Address	215 Centerview Dr			
	Building 3			
	Brentwood TN 37027			
	CITY STATE ZIF	P CODE		
Name of Bank, D	Depository, etc.			
Mailing Address				
	CITY STATE ZIF	P CODE		