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## STATEMENT OF

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**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. Anderson for Congress 160 Louisville Road ADDRESS (number and street) (Check if address is changed) Grovetown 30813-4121 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@voteleeanderson.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.voteleeanderson.com (Check if address is changed) DATE 2012 C00502302 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. Mr. W. B. Kuhlke Jr. Type or Print Name of Treasurer Mr. W. B. Kuhlke Jr. [Electronically Filed] 09 2012 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 Only

Local 202-694-1100

1	FEC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>
		COMMITTEE	
Can	ndidate	e Committee:	
(a)	$\times$	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. (Compinformation below.)	lete the candidate
Nam Cand	e of didate	Lee I Anderson	
	didate / Affiliati	ion REP Office Sought: X House Senate President	State GA District 12
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Poli	tical A	action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	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 secommittee. (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 Func	draising 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.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

 FEC <b>Form 1</b> (Re	evised 02/2009)	Page <b>3</b>
Write or Type Committee	e Name	
Anderson fo	or Congress	
	ected Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
Young Guns 2012	2 Round 4	
Mailing Address	228 S Washington Street Suite 115	
	Alexandria VA 223	314-5404 
	CITY STATE	ZIP CODE
Relationship: Cor	nnected Organization Affiliated Committee X Joint Fundraising Representative	Leadership PAC Sponsor
<ul> <li>Custodian of Record books and records.</li> </ul>	ds: Identify by name, address (phone number optional) and position of the person i	n possession of committee
Mr. Full Name	. W. B. Kuhlke Jr.	
Mailing Address	824 Milledge Road	
	Augusta GA 309	904-4352
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	s Telephone number 706	-   364   -   2760
Treasurer: List the na any designated agent	ame and address (phone number optional) of the treasurer of the committee; and the (e.g., assistant treasurer).	ne name and address of
Full Name Mr. of Treasurer	W. B. Kuhlke Jr.	
Mailing Address	824 Milledge Road	
	Augusta GA 309	904-4352
Title or Position , Treasurer	CITY STATE	ZIP CODE
	Telephone number	

FEC <b>For</b>	rm 1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated	1	
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
	Depository, etc.    Queensborough National Bank & Trust Co.	
safety deposit b Name of Bank,	Depository, etc.  Queensborough National Bank & Trust Co.	
safety deposit b	Depository, etc.  Queensborough National Bank & Trust Co.	
safety deposit b Name of Bank,	Depository, etc.  Queensborough National Bank & Trust Co.  113 E Broad Street	4040
safety deposit b Name of Bank,	Depository, etc.  Queensborough National Bank & Trust Co.	-1619
safety deposit b Name of Bank,	Depository, etc.  Queensborough National Bank & Trust Co.  113 E Broad Street	-1619
safety deposit b Name of Bank, Mailing Address	Depository, etc.  Queensborough National Bank & Trust Co.  113 E Broad Street  Louisville  GA 30434	
safety deposit b Name of Bank, Mailing Address	Depository, etc.  Queensborough National Bank & Trust Co.  113 E Broad Street  Louisville  CITY  STATE  Depository, etc.	ZIP CODE
safety deposit b Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  Queensborough National Bank & Trust Co.  113 E Broad Street  Louisville  CITY  STATE  Depository, etc.  Suntrust Bank  PO Box 4418	ZIP CODE
safety deposit b Name of Bank, Mailing Address	Depository, etc.  Queensborough National Bank & Trust Co.  113 E Broad Street  Louisville  CITY  STATE  Depository, etc.  Suntrust Bank  PO Box 4418	ZIP CODE
safety deposit b Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  Queensborough National Bank & Trust Co.  113 E Broad Street  Louisville  CITY  STATE  Depository, etc.  Suntrust Bank  PO Box 4418	ZIP CODE
safety deposit b Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  Queensborough National Bank & Trust Co.  113 E Broad Street  Louisville  CITY  STATE  Depository, etc.  Suntrust Bank  PO Box 4418	ZIP CODE

## FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011) Page 5 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. IBB&T 1909 K Street NW Mailing Address 20006-1152 Washington DC CITY 🗖 ZIP CODE 🛕 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor **GA-12 Nominee Fund** 2470 Daniels Bridge Road Mailing Address Suite 121 GΑ 30606-6191 Athens **CITY** STATE 4 ZIP CODE Relationship: Joint Fundraising Representative Leadership PAC Sponsor Connected Organization Affiliated Committee [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ ADDITIONAL ] Joint Fundraiser Participant С FEC ID number