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**FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

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2025 SEP 12 AM 11:51

			Office Use Only
NAME OF     COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
Barge Design Şolutions, Inc	cլ, Federal Politiqal Actioդ	Gommittee	
ADDRESS (number and street)	615 3rd Avenue South,	Suite 700	
☐ ◀ (Check if address is changed)			
	Nashville		TN 37210 1 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
COMMITTEE'S E-MAIL ADDRES	ss		
☐			
	Optional Second E-Mail Add	ress	
Check if address is changed)			
2. DATE 09 09.	2025		
3. FEC IDENTIFICATION NUMBER ► C 00417360			
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 Junethon F. Childs			
Signature of Treasurer	fmitelle		Date 09 11 2025
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.			
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

EC Form 1 (Revised 03/2022)	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. (Complete the information below.)	e candidate
Name of  Candidate	
Candidate Office House Senate President	State District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate (	<del></del>
Party Committee:  (d) This committee is a (National, State or subordinate) committee of the Republican,	c. , etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
Corporation Corporation w/o Capital Stock Labor O	Organization
Membership Organization Trade Association Coopera	_
In addition, this committee is a Lobbyist/Registrant PAC.	····· <del>-</del>
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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.)	
projection of the control of the con	
(g) This committee is an independent expenditure-only political committee (Super PAC).  In addition, this committee is a Lobbyist/Registrant PAC.	
Sank	<b>^</b> ^\
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid P/	-Oj.
Joint Fundraising Representative:	
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.	or more political
This committee collects contributions, pays fundralsing expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Committees Participating in Joint Fundraiser	
1. [ , , , , , , , , , , , , , , , , ] C	
2.	

FEC Form 1 (Revised 03/2022)  Page 3  Write or Type Committee Name  large Design Solutions, Inc., Federal Political Action Committee  Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor  Mailing Address  Mailing Address  CITY A STATE A ZIP CODE A  Relationship: □ Connected Organization □ Affiliated Organization □ Joint Fundraising Representative □ Leadership PAC Sponsor  Custodian of Records: Identify by name, address (phone number ·· optional) and position of the person in possession of committee books and records.  Full Name  Mailing Address  CITY A STATE A ZIP CODE A  Title or Position ▼  Telephone number □ JoingthaniChilds  Mailing Address  G15 3rd Avenue South, Suite 700  LITY A STATE A ZIP CODE A  Title or Position ▼  CITY A STATE A ZIP CODE A  Title or Position ▼  CITY A STATE A ZIP CODE A  Title or Position ▼  CITY A STATE A ZIP CODE A  Title or Position ▼  CITY A STATE A ZIP CODE A  Title or Position ▼  CITY A STATE A ZIP CODE A  Title or Position ▼  CITY A STATE A ZIP CODE A  Title or Position ▼  CITY A STATE A ZIP CODE A  Title or Position ▼  CITY A STATE A ZIP CODE A  Title or Position ▼  Trelephone number □ JoingthaniChilds  A ZIP CODE A  Title or Position ▼  Trelephone number □ STATE A ZIP CODE A  Title or Position ▼  Trelephone number □ STATE A ZIP CODE A			
Name of Any Connected Organization, Affiliated Committee  Name of Any Connected Organization, Affiliated Committee, Joint Fundratising Representative, or Leadership PAC Sponsor  CITY A STATE A ZIP CODE A  Polistionship: Connected Organization Affiliated Organization Joint Fundratising Representative Leadership PAC Sponsor  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Full Name  Mailing Address  CITY A STATE A ZIP CODE A  Trile or Position   Tressurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Jenathan Childs  Mailing Address  Sins Sird Avenue South, Suite 700.  CITY A STATE A ZIP CODE A  Title or Position   CITY A STATE A ZIP CODE A  Title or Position   CITY A STATE A ZIP CODE A  Title or Position   CITY A STATE A ZIP CODE A  Title or Position   CITY A STATE A ZIP CODE A  Title or Position   CITY A STATE A ZIP CODE A  Title or Position   CITY A STATE A ZIP CODE A	FEC Form 1 (Revi	sed 03/2022)	Page 3
Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor  OTTY	Write or Type Committee I	Name	
Mailing Address  CITY A STATE A ZIP CODE A  Relationship: Connected Organization Alfiliated Organization Joint Fundraising Representative Leadership PAC Sport  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Full Name  Mailing Address  CITY A STATE A ZIP CODE A  Tritle or Position   Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  JenathaniChilds  Mailing Address  6;15;3;4; Avenue South, Suite 700;  Nashville TN 37210 ] IN 3721			
CITY A STATE A ZIP CODE A  Relationship: Connected Organization Afhiliated Organization Joint Fundraising Representative Leadership PAC Sport  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Full Name  Mailing Address  CITY A STATE A ZIP CODE A  Title or Position   Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Jengthan, Childs  Nashville  Nashville  Title or Position   Title or Position   STATE A ZIP CODE A  Title or Position   ZIP CODE A  Treasurer  STATE A ZIP CODE A  Title or Position   ZIP CODE A  Title or Position   ZIP CODE A	Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundralsing Representative, o	or Leadership PAC Sponsor
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Relationship:  Connected Organization	Mailing Address		
Relationship:  Connected Organization			
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Full Name  Mailing Address  CiTY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  JonathaniChilds  Mailing Address  615 3rd Avenue South, Suite 700  Nashville:  Treasurer  Treasurer  JonathaniChilds  Nashville:  Nashville:  Treasurer  State ▲ ZIP CODE ▲	Relationship: Conn	ected Organization Affiliated Organization Joint Fundraising Representati	ve Leadership PAC Spons
Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Telephone number — Telephone number of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer Jonathan Childs  Mailing Address  615 3rd Avenue South Suite 700  Nashville	· · · · · · · · · · · · · · · · · · ·	Identify by name, address (phone number optional) and position of the person	in possession of committee
CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer	Full Name		111111
Title or Position ▼  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  JonathaniChilds  Mailing Address  615 βrd Avenue South, Swite 700  Nashville  Title or Position ▼  Title or Position ▼	Mailing Address		
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any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  JonathaniChilds  6i15 βrd Avenue Southi Suite 700  Nashville  CITY ▲  STATE ▲  ZIP CODE ▲  Title or Position ▼	LIIIII	Telephone number	
of Treasurer Jonathan Childs   Jonathan Childs			
Nashville TN 37210 — IN STATE ▲ ZIP CODE ▲  Title or Position ▼		athaniChilous;	
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼	Mailing Address	615 3rd Avenue South, Suite 700	
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼			<u> </u>
Title or Position ▼		Nashville TN	37210     -
		CITY A STATE A	ZIP CODE A
Sr. Vice Rresident/Director                   Telephone number 615   - 254   - 1500	Title or Position ▼		
	Sr. Vice President/	Director	5   - 254   - 1500

	-		
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	Full Name of Designated Agent		
	Mailing Address		
			<u> </u>
	Title or Position		TE ▲ ZIP CODE A
		Telephone number	L
9.	Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committee de	posits funds, holds accounts, rents
	Name of Bank, D	epository, etc.	
		Rinnaçle Financial Rartners	
	Mailing Address	150 <sub>1</sub> 3rd Avenue South	
		Nashvjile	N 37201
		CITY ▲ STA	TE ▲ ZIP CODE ▲
	Name of Bank, D	epository, etc.	
	Mailing Address		
		CITY ▲ STA	TE ▲ ZIP CODE ▲

	FEC Form 1S (Revised 03/2022)	Optional Supplemental Information for Lines 5(I) or (j), 6, 8 and/or 9	Page of
5(i)	or(j). Joint Fundraising Partic	elpant:	:( 1.
	1.	FEC ID number	C
	2.	FEC ID number	C
	3.	FEC ID number	C
	4.	FEC ID number	C
6.	Name of Any Connected Organiz	zation, Affiliated Committee, Joint Fundralsing Representative,	or Leadership PAC Sponsor
		<u> </u>	
	Mailing Address		
	L		
	Relationship:	CITY ▲ STATE ▲	ZIP CODE ▲
	Connected Organiz	Emit fund	
8.	Designated Agent: Identify by nan	ne, address (phone number – optional)	
	Full Name		
	Mailing Address		
	L	<u> </u>	
	1.		1
	TITLE OR POSITION ▼	CITY ▲ STATE ▲	ZIP CODE A
		Telephone Number	
9.	Banks or Other Depositories: Lis safety deposit boxes or maintains	st all banks or other depositories in which the committee deposits funds.	funds, holds accounts, rents
	Name of Bank, Depository, etc.		
	Malling Address		
	ـــــــا		
		CITY ▲ STATE ▲	ZIP CODE ▲

FEDERAL ELECTION COMMISSION 1050 FIRST STREET, NE 10 FEDERAL ELECTION COMMISSION

WASHINGTON DC 20002 (202) 894-1128 (202) 844-1128

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PREPARER (4/2023)	DATE PREPARED		
(4/2023)			