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FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

The Committee to Elect Larry Waters

ADDRESS (number and street)

PO Box 4177

(Check if address  
is changed)

Sevierville

TN

37864-4177

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

Gerbyrjohns@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.votewaters.com

COMMITTEE'S FAX NUMBER

-

2. DATE

05 / 18 / 2006

3. FEC IDENTIFICATION NUMBER ▶

C00423038

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

Mike Fishman

Signature of Treasurer

*[Signature]*

Date

05 / 18 / 2006

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  
Use  
Only

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

FEC FORM 1  
(Revised 02/2003)

26039090307

5. TYPE OF COMMITTEE (Check One)

- (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 James Larry Waters

Candidate Party Affiliation Rep Office Sought:  House  Senate  President State TN District 01

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

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

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

- (e)  This committee is a separate segregated fund.

- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

- Corporation  Corporation w/o Capital Stock  Labor Organization
- Membership Organization  Trade Association  Cooperative

26039090308

Write or Type Committee Name

The Committee to Elect Larry Waters

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Terri McGarter Waters

Mailing Address 432 Bebb Road

PO Box 594

Gatlinburg TN 37738 0594

Title or Position CITY STATE ZIP CODE

Custodian of Records Telephone number 865 436 4796

8. 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 Robert Michael Fishman

Mailing Address 4984 Bridle Path

Morristown TN 37814 8003

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 865 436 4796

Full Name of Designated Agent James Larry Waters

Mailing Address 432 Bebb Road

PO Box 594

Gatlinburg TN 37738 0594

Title or Position CITY STATE ZIP CODE

Assistant Treasurer Telephone number 865 436 4796

2603900300

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.

Citizens National Bank

Mailing Address

200 Forks of the River Parkway

Sevierville TN 37862

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

26039090310

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.

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USPS First Class Mail Postmarked

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USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

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No Postmark

Overnight Delivery Service (Specify): *UPS* Shipping Date  
*5-24-06*  
 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

*JMN* *5-25-06*  
 PREPARER DATE PREPARED

2005090311