Image# 201912119166179368				
FEC FORM 1	STATEME ORGANIZ			PAGE 1 / 4 🗕
			Off	ice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Chad Wilson 20	20			
ADDRESS (number and street)	342 E. Main Street			
(Check if address				
is changed)	Auburntown		TN 370 <sup>2</sup>	16
			L_⊥_ L⊥_ STATE ▲	
COMMITTEE'S E-MAIL ADDR	IFSS			
(Check if address	votechad2020@gmail.	com		
is changed)				
	Optional Second E-Mail Ac	ldress		
<ul><li>(Check if address is changed)</li></ul>				
	11 Y Y Y Y 2019			
3. FEC IDENTIFICATION N		000730739		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
			a ta anna 1999 - 1999 - 1999	
certity that I have examined	this Statement and to the best	t of my knowledge and belief i	it is true, correct and	complete.
Type or Print Name of Treasu	rer Wilson, Chad, , ,			
Signature of Treasurer <i>Wil</i>	son, Chad, , ,	[Electronically Filed]	Date 12	11 / Y Y Y Y Y 2019
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMAT	may subject the person signing		penalties of 2 U.S.C. §437
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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		COMMITTEE	
Car	ndidate	e 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 candid information below.)	ate
Nam Cano	ne of didate	Wilson, Chad, Anthony, ,	
	didate y Affiliati	tion GRE Office Sought: House Senate President District	
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	ne of didate		
Par	ty Con	mmittee:	
(d)		This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.)	) Party.
Poli	itical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	tion is a:
		Corporation Corporation w/o Capital Stock Labor Organiz	ation
		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 o committee. (i.e., nonconnected committee)	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	nt Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, at least one of which is an authorized committee of a federal candidate.	al
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, none of which is an authorized committee of a federal candidate.	al
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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Write or Type Committee Name

## Chad Wilson 2020

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N																																											
	Mailing Address																																										
					L																																						
					L																																	] –	L				
													C	IT	Y												S	TA	ΤE						Z	ΊP	С	00	)E				
	Relationship:	Con	neo	ctec	l Oi	rga	niza	atio	n		Af	filia	ateo	d C	Con	nm	itte	e	C	J	loin	nt F	un	dra	aisir	ng	Re	pre	se	nta	tive	e		Le	ead	ler	shi	ip F	⊃A(	0 5	Spc	onso	or
7.	Custodian of Red books and records		5: I	den	ıtify	y by	/ na	ame	e, a	dd	res	is (	(ph	on	e r	nur	nb	er	(	ppt	ion	al)	ar	nd	pos	sitic	on	of	the	e pe	ers	on	in	рс	SS	es	sio	n o	of d	cor	nm	itte	e
		Wils	on,	Ch	nad	, , ,																																					
	Full Name																																										
	Mailing Address				3	42	EN	/air	n St	tre	et 																																
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Title or Position	CITY	STATE	ZIP CODE
1	1	I 6	15   210   0976

Telephone number

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	Wilson, Chad, , ,
of Treasurer	
Mailing Address	342 E Main Street
	Auburntown
	CITY STATE ZIP CODE
Title or Position	$\begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 $

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Full Name of Designated Agent																		1	1									
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							CI				 									L		71						
Title or Position							CI	ΙΥ									517	41 E				ZI	P	JUL	JE			
												Tele	eph	one	e ni	umt	ber											

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.

First N	ational Bank		
Mailing Address	801 W Main Street		
	Woodbury	TN 37190	
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE