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## **FEC** FORM 1

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## STATEMENT OF **ORGANIZATION**

2010 JUN 23 Aî1 9: 22

Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 **COMMITTEE** (in full) over the lines. is changed) Tennessee Malt Beverage Association Federal 1 404 James Robertson Parkway ADDRESS (number and street) (Check if address is changed) CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) 06 19 2010 DATE C00250449 FEC IDENTIFICATION NUMBER 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 Date Signature of Treasurer 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

Toli Free 800-424-9530

Local 202-694-1100

(Revised 02/2009)

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	COMMITTEE 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. (Compinformation below.)	lete the candidate		
Name of Candidate				
Candidate Party Affiliati	Office ion Sought: House Senate President	State District		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Con				
(d)	•	Democratic, epublican, etc.) Party.		
Political A	Action Committee (PAC):			
(e) <b>X</b>	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a:		
	Corporation Corporation w/o Capital Stock	Labor Organization		
	Membership Organization X Trade Association	Cooperative		
	In addition, this committee is a Lobbyist/Registrant PAC.			
<b>(f)</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
	In addition, this committee is a Lobbyist/Registrant PAC.			
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Joint Fund	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.	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.	or more political		
Com	nmittees Participating in Joint Fundraiser			
1.	FEC ID number C			
2.	FEC ID number C			
3.	FEC ID number C			
4.	FEC ID number C			

9.

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Full Name of Designated Agent				
Mailing Address				
		411111		
	СПУ	STATE	ZIP CODE	
Title or Position				
<u></u>		ephone numberi_	<u> </u>	
safety deposit boxes Name of Bank, Depo		·		
Mailing Address	13/15 Deaderick ST	Inection		
	Washville	TN	37201-	
	CITY	STATE	ZIP CODE	
Name of Bank, Depository, etc.				
L	<del>                                     </del>		<del></del>	
Mailing Address				
		<del> </del>		
		ليا ليا	<u> </u>	
	CITY	STATE	ZIP CODE	

(3/2005)

## **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. Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt 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 or Postmarked Other (Specify): **PREPARER** DATE PREPARED