PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) DEFENDING AND INVESTING IN AMERICA'S NEW ENDEAVORS PAC (DIANE PAC) PO BOX 1437 ADDRESS (number and street) (Check if address is changed) **GALLATIN** 37066 TN CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS compliance@complianceconsultingva.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2013 C00499996 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. TOMMY WHITTAKER Type or Print Name of Treasurer TOMMY WHITTAKER [Electronically Filed] 02 20 2013 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:
 Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	i aye £
Car	ndidate	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. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated 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 Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Nam	e	
DEFENDING AND	INVESTING IN AMERICA'S NEW ENDEAVORS PAC (I	DIANE PAC)
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
REP DIANE L BLACK	<	
Mailing Address	819 PLANTATION BOULEVARD	
	GALLETON TN 37066	-
	CITY STATE ZII	P CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative X Leader	ership PAC Sponsor
 Custodian of Records: Ide books and records. 	ntify by name, address (phone number optional) and position of the person in posse	ssion of committee
CABELL	HOBBS	
Full Name	,819 PLANTATION BLVD	
Mailing Address		
	GALLATIN TN 37066	
Title or Position	CITY STATE ZIE	P CODE
ASSISTANT TREASURER	Telephone number	
8. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
Full Name TOMMY Volume	WHITTAKER	
Mailing Address	819 PLANTATION BLVD	
	GALLATIN TN 37066	-
	CITY STATE ZIF	P CODE
Title or Position TREASURER		7990

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Full Name of Designated Agent CABI	ELL HOBBS	
Mailing Address	819 PLANTATION BLVD	
	GALLATIN TN CITY STATE	37066 ZIP CODE
Title or Position ASSISTANT TREASUR	RER Telephone number	
Name of Bank, Deposit	tory, etc.	
	ENUE BANK 111 10TH AVE S STE 400	
AVI	ENUE BANK	
AVI	ENUE BANK	37023
AVI	ENUE BANK 111 10TH AVE S STE 400	37023 ZIP CODE
AVI	ENUE BANK 111 10TH AVE S STE 400 NASHVILLE CITY STATE	
AVI Mailing Address	ENUE BANK 111 10TH AVE S STE 400 NASHVILLE CITY STATE	
Mailing Address Name of Bank, Deposit	ENUE BANK 111 10TH AVE S STE 400 NASHVILLE CITY STATE	
AVI Mailing Address	ENUE BANK 111 10TH AVE S STE 400 NASHVILLE CITY STATE	
Mailing Address Name of Bank, Deposit	ENUE BANK 111 10TH AVE S STE 400 NASHVILLE CITY STATE	
Mailing Address Name of Bank, Deposit	ENUE BANK 111 10TH AVE S STE 400 NASHVILLE CITY STATE	

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. Mailing Address ZIP CODE 🛕 CITY 🗖 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor REED BLACK VICTORY FUND 228 S WASHIINGTON STREET Mailing Address **STE 115 ALEXANDRIA** 22314 **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