Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Kustoff for Congress PO Box 58823 ADDRESS (number and street) (Check if address is changed) Nashville 37205 ΤN CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address whitney@watchtowercompliance.com is changed) Optional Second E-Mail Address taylor@southlandadvantage.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00614826 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 Watkins, William, H,, Jr Watkins, William, H., Jr Date 09 25 2023 Signature of Treasurer 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

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TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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. (Complinformation below.)	ete the candidate
Name of Candidate Kustoff, David, , ,	
Candidate Party Affiliation  REP  Office Sought:  House  Senate  President	State TN  District 08
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State (Dem	ocratic, blican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a:
Corporation Corporation w/o Capital Stock La	abor Organization
	ooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee)	regated 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybridian committee)	orid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	•
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundraiser	
1 C	
2.	

I	FEC Form 1 (Revised 0)	2/2009)			l Page <b>3</b>
۷	Vrite or Type Committee Name	roop			
6.	Kustoff for Congress  Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor KUSTOFF VICTORY FUND				
	Mailing Address	PO BOX 58823			
		NASHVILLE		TN 372	205
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	ation X Joint Fundraisin	g Representative	Leadership PAC Sponso
<ol> <li>Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of conbooks and records.</li> </ol>					
	Phillips, Wh				
	Mailing Address	PO Box 58823			
		Nashville		TN 372	205
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Bookkeeper		Telephone nui	mber	
8.	<b>Treasurer:</b> 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 Watkins, W	illiam, H, , Jr			
	Mailing Address	1661 Aaron Brenner Drive			
		Suite 300			
		Memphis		TN 381	20
	Title or Desition	CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼    Treasurer				
	i leasulei		Telephone nui	mber	-

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Full Name of Designated Agent					
Mailing Address					
Title or Position <b>▼</b>	CITY ▲	STATE ▲	ZIP CODE ▲		
Title of Fosition V	Telephone nu	ımber			
Banks or Other Depositoric safety deposit boxes or main	es: List all banks or other depositories in which the commit tains funds.	tee deposits funds, hold	ds accounts, rents		
Name of Bank, Depository, e	tc.				
Pinnacle	Bank				
Mailing Address	150 Third Avenue South				
	Suite 900				
	Nashville	TN 37201			
	CITY A	STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.					
First Ho	izon Bank				
Mailing Address	23 White Bridge Rd				
	Nashville	TN 37205			
	CITY A	STATE ▲	ZIP CODE ▲		