

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2013 JAN 11 AM 11:31
FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

Office Use Only 12FE4M5

JIM TRACY FOR CONGRESS

ADDRESS (number and street) PO BOX 332490

(Check if address is changed) MURFREESBORO TN 37133

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) COMPLIANCE@COMPLIANCECONSULTINGVA.COM

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL) WWW.TRACYFORTN.COM

(Check if address is changed)

2. DATE 01 / 10 / 2013

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT [X] 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 SHANE REEVES

Signature of Treasurer SHANE REEVES [Signature] Date 01 / 10 / 2013

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.

13031002758

5. TYPE OF COMMITTEE

Candidate 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 candidate information below.)

Name of Candidate JIM TRACY

Candidate Party Affiliation REP House Senate President State TN District 04

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

Name of Candidate _____

Party Committee:

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

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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) 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 Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number: <u>C</u>
2.	_____	FEC ID number: <u>C</u>
3.	_____	FEC ID number: <u>C</u>
4.	_____	FEC ID number: <u>C</u>

13031002759

Write or Type Committee Name

JIM TRACY FOR CONGRESS

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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 MELODIE JOHNSON

Mailing Address PO BOX 332490

MURFREESBORO

TN

37133

Title or Position

CITY

STATE

ZIP CODE

ASSISTANT TREASURER

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 of Treasurer SHANE REEVES

Mailing Address PO BOX 332490

MURFREESBORO

TN

37133

Title or Position TREASURER

CITY

STATE

ZIP CODE

Telephone number

615-278-3146

13031002760

Full Name of Designated Agent MELODIE JOHNSON

Mailing Address PO BOX 332490 MURFREESBORO TN 37133 CITY STATE ZIP CODE

Title or Position ASSISTANT TREASURER Telephone number

13031002761

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.

FIRSTBANK

Mailing Address 615 MEMORIAL BLVD MURFREESBORO TN 37129 CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

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

USPS Express Mail Postmarked
1/10/13

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
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

Jac 10
PREPARER

1/11/13
DATE PREPARED