

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

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

12FE4M5

KUSTOFF FOR CONGRESS 2002

ADDRESS (number and street) 1661 AARON BRENNER DRIVE
 (Check if address is changed) SUITE 300
MEMPHIS TN 38120-1466
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) kenna@wucpas.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 02 / 09 / 2016

3. FEC IDENTIFICATION NUMBER C C00376244

4. 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 WILLIAM H WATKINS JR

Signature of Treasurer WILLIAM H WATKINS JR [Electronically Filed] Date 04 / 14 / 2016

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.

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 **DAVID KUSTOFF**

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.

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 C
2. FEC ID number C
3. FEC ID number C
4. FEC ID number C

Write or Type Committee Name

KUSTOFF FOR CONGRESS 2002

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 KENNA CAGLE

Mailing Address 1661 AARON BRENNER DRIVE

SUITE 300

MEMPHIS TN 38120

Title or Position CITY STATE ZIP CODE

ASST 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 WILLIAM H WATKINS JR

Mailing Address 1661 AARON BRENNER DR

SUITE 300

MEMPHIS TN 38120

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number

Full Name of Designated Agent

[Empty form line]

Mailing Address

[Empty form line]

[Empty form line]

[Empty form line]

CITY

STATE

ZIP CODE

Title or Position

[Empty form line]

Telephone number

[Empty form line]

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.

METROPOLITAN BANK

[Empty form line]

Mailing Address

1661 AARON BRENNER DRIVE

SUITE 100

MEMPHIS TN 38120

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty form line]

Mailing Address

[Empty form line]

[Empty form line]

[Empty form line]

CITY

STATE

ZIP CODE

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1A

Transaction ID :

Kustoff for Congress was administratively terminated in 2006. On October 24, 2006, we wrote a letter requesting that the termination be rescinded. All quarterly reports have been filed timely since that date.

Form/Schedule:

Transaction ID: