## 13031142096

FEC FORM 1

## STATEMENT OF **ORGANIZATION**

RECEIVED

				2013 05	flice Use ONLY 8: 38	
NAME OF COMMITTEE (in full)		(Check if name is changed)	Example: If typing, type over the lines.	12FE4M\$C	MAIL CENTER	
Berger for	1C101	ngress,				
				<u></u>		
ADDRESS (number and street)	Po	BOX 3	1.1.7	<u> </u>		
(Check if address is changed)		1 1 1 1 1				
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COMMITTEE'S E-MAIL ADDRES	SS					
(Check if address is changed)	io,h	1,1, <b>Θ</b> ,ρ,h,1,	1, fo, r, ng. , gom			
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COMMITTEE'S WEB PAGE ADD  (Check-if-address is changed)	PESS'(	1,1,4,0,C,N	Communication of the contract	Message Congress		
2. DATE 1112	5 / 13	L.0 13				
3. FEC IDENTIFICATION NUMBER ▶ C						
4. IS THIS STATEMENT	NE	W (N) OR	AMENDED (A)			
I certify that I have examined th	is Stater	nent and to the be	st of my knowledge and belief	it is true, correct and	d complete.	
Type or Print Name of Treasurer		Amy B.	Ellis			
Signature of Treasurer	4	Balla	<b>0</b>	Date	28/2013	
NOTE: Submission of false, errone			n may subject the person signing		penalties of 2 U.S.C. §437g.	
Office Use Only	-4 xe-:		For further Information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)	

FE	EC For	rm 1 (Revised 02/2009)	Page 2						
–		COMMITTEE							
	lidate X	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 information below.)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name Candid		Phillip Edward Berger Jr	<del> </del>						
Candid Party	date Affiliatio		State N.C						
		SALTON CONTRACTOR TO THE SALTON CONTRACTOR SALTO	District D6						
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.							
Name Candid									
Party	Com	nmittee:	THE COLUMN POINT PARTIES OF THE COLUMN PERSONS ASSESSED.						
(d)	7224		ocratic, blican, etc.) Party.						
Politi	cal A	Action Committee (PAC):							
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a						
		Corporation Wo Capital Stock Lat	or Organization						
		Membership Organization Trade Association Co	operative						
		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	Fund	draising Representative:							
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political						
(h)	2001	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political						
	Com	nmittees Participating in Joint Fundraiser	;						
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FEC Form 1 (Revised 02/2009) Page 3 Write or Type Committee Name Berger for Congress Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address ZIP CODE CITY Connected Organization Affiliated Committee Joint Fundralsing Representative Leadership PAC Sponsor Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records. Amy B 51,1,1,5 Full Name Mailing Address ZIP CODE Title or Position CITY STATE Telephone number 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 Grassy Greek Pl Mailing Address ZIP CODE Title or Position Mirelasiu reir i i i i i i i i i i i Telephone number

FEC Form 1 (Revise	ed 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position		ı	
		Telephone number	
	<del></del>	<del></del>	<del></del>
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in wlaintains funds.	nich the committee deposits fu	nds, holds accounts, rents
Name of Bank, Depository,	, etc.		
nen	Bridge Bank		
Mailing Address	18,0,1, S. Van Bure		
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	Eden	120	27288-
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	, etc.		
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		1 1 1 1 1 1 1 1 1	<del>                                      </del>
Mailing Address			
			<u> </u>
	CITY	STATE	ZIP CODE

16809 Grassy Creek Place Raleigh, NC 27614 Anny BEIlis

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FEC MAIL CENTER 3013 OEC -S WH 8: 38 **BECEINED** 

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Washington, DC

(8/2013)

## **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** 11/27/13 Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail Postmarked USPS Priority Mail Express** 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): DATE PREPARED PREPARER