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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. David Rouzer for Congress PO Box 3142 ADDRESS (number and street) (Check if address is changed) Wilmington 28406 NC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Heather.Ford@TFFirm.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.davidrouzer.com (Check if address is changed) DATE 05 2020 C00501643 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. Ford, Heather, , , Type or Print Name of Treasurer Ford, Heather, , , [Electronically Filed] 09 05 2020 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: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

FEC Fo	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	
	e 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. (Corinformation below.)	mplete the candidate
Name of Candidate	Rouzer, David, Cheston, ,	
Candidate	Office	State
Party Affiliat	ion REP Sought: X House Senate President	District 07
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	nmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action 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)	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.)	
Joint Fund	draising 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	•
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number C	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name	. ago C
David Rouzer for Congress	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
Rouzer Congressional Trust	
PO Box 377	
Mailing Address	
Wake Forest NC 27588	
Wake Forest NC 27588	
CITY STATE Z	IP CODE
Relationship: Connected Organization Affiliated Committee X Joint Fundraising Representative Lead	ership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in posses books and records.	ession of committee
Full Name	
Mailing Address	
Title or Position CITY STATE Z	P CODE
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	e and address of
Full Name Ford, Heather, , ,	
of Treasurer	
Mailing Address PO Box 377	
Wake Forest NC 27588	
Title or Position	P CODE
Treasurer	0 2100

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Full Name of Designated Agent Waters, S	Sarah, , ,		
Mailing Address	1711 Center Rd		
	Raleigh	STATE 2760	ZIP CODE
Title or Position			
	<u> </u>	none number	
Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds.	committee deposits funds, he	olds accounts, rents
Name of Bank, Depository,	etc.		
First C	Citizens Bank		
Mailing Address	PO Box 27131		
	Raleigh	NC 2761	1
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Wells	Fargo Bank		
Mailing Address	8302 Woodmont Avenue		
Mailing Address			
	Bethesda	MD 2081	1
	Boundary	2001	
	CITY	STATE	ZIP CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g)	or(h). Joint Fundraisin	g Participant:		
(0)	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Americans for Spi	ring Training 2020		
	Mailing Address	824 S. Milledge Avenue		
		Suite 101		
		Athens	GA GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number – optional)		
8.	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION	CITY A	ephone Number	
	Full Name Mailing Address TITLE OR POSITION	CITY CITY Teles: List all banks or other depositories in which t	ephone Number	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or maintains.	CITY CITY Teles: List all banks or other depositories in which t	ephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Caden	CITY CITY Tel ries: List all banks or other depositories in which taintains funds.	ephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Tel ries: List all banks or other depositories in which taintains funds. ace Bank	ephone Number	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Tel ries: List all banks or other depositories in which taintains funds. ace Bank	ephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected Securing Our Silv	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
Mailing Address	c/o Emory Rogers		
	1909 K Street NW 12th Floor		
	Washington	DC	20006
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		nt Fundraising Representa	Leadership PAC Sp
	y by name, address (phone number – optional)	it rundraising ricpresente	LeaderShip FAC S
esignated Agent: Identi			LeaderShip FAC S
esignated Agent: Identi			LeaderShip FAC S
esignated Agent: Identi			Leadership FAC S
esignated Agent: Identi	y by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identing Full Name Mailing Address	by by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name Mailing Address	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, Bank	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the content of t	y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds. Of America	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds. Of America	STATE A	ZIP CODE A

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1				C
3. 4. 4.			FEC ID number	С
4.			FEC ID number	С
			FEC ID number	С
GT Farm Team III)rganization, Affiliated C	ommittee, Joint Fundr	aising Representativ	e, or Leadership PAC Spon
Mailing Address	PO Box 30844			
	Bethesda	<u> </u>	MD	20824
Relationship:	(CITY A	STATE A	ZIP CODE ▲
Full Name				
Mailing Address				
TITLE OR POSITION 1	▼ CI	TY ▲	STATE ▲	ZIP CODE ▲
			lephone Number	
		r depositories in which	the committee deposi	ts funds, holds accounts, ren
		r depositories in which	the committee deposi	ts funds, holds accounts, ren
afety deposit boxes or mair ame of Bank,		r depositories in which	the committee deposi	ts funds, holds accounts, ren
afety deposit boxes or mair ame of Bank,		r depositories in which	the committee deposi	ts funds, holds accounts, ren
afety deposit boxes or mair ame of Bank, epository, etc.		r depositories in which	the committee deposi	ts funds, holds accounts, ren