

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2014 JUN -9 AM 11:34
FEC OFFICE CENTER

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

The Richard Hudson North Carolina Victory Committee

ADDRESS (number and street) PO Box 97275
(Check if address is changed)
Raleigh NC 27624
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS
(Check if address is changed) RHNCVC@cmandco.com
Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)
(Check if address is changed)

2. DATE 06 04 2014

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 Collin McMichael

Signature of Treasurer [Signature] Date 06 04 2014

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.

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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 _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State
					District

- (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:

<input type="checkbox"/>	Corporation	<input type="checkbox"/>	Corporation w/o Capital Stock	<input type="checkbox"/>	Labor Organization
<input type="checkbox"/>	Membership Organization	<input type="checkbox"/>	Trade Association	<input type="checkbox"/>	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. | HUDSON FOR CONGRESS | FEC ID number | C | C00504522 |
| 2. | NORTH CAROLINA REPUBLICAN PARTY | FEC ID number | C | C00038505 |
| 3. | _____ | FEC ID number | C | |
| 4. | _____ | FEC ID number | C | |

14031243695

Write or Type Committee Name

The Richard Hudson North Carolina Victory Committee

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 Collin McMichael

Mailing Address PO Box 97275

Raleigh

NC

27624

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

919

889

1817

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 Collin McMichael

Mailing Address PO Box 97275

Raleigh

NC

27624

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

919

889

1817

14031243696

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

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.

BB&T

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

Raleigh

NC

27615

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

14031243697

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Other (Specify): Date of Receipt or Postmarked

BR 6/9/14
 PREPARER DATE PREPARED
 (8/2013)

14031243699