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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 2267 ADDRESS (number and street) (Check if address is changed) Smithfield 27577 NC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Heather.Ford@TheFordFirmNC.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 2015 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. Ms. Heather Ford Type or Print Name of Treasurer Ms. Heather Ford [Electronically Filed] 80 26 2015 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	Form 1 (Revised 02/2009)	Page 2		
	F COMMITTEE			
	ate 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 Candidat	Mr. David Cheston Rouzer			
Candidat	e Office	State		
Party Aff		District 07		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District		
Name of				
Candidate				
Party C	Committee:			
(d)		Democratic, epublican, etc.) Party.		
Politica	Il Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organizat			
	Corporation Corporation w/o Capital Stock	Labor Organization		
	Membership Organization Trade Association	Cooperative		
	In addition, this committee is a Lobbyist/Registrant PAC.			
(f)	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fun 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 Fu	undraising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political		
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political		
С	ommittees Participating in Joint Fundraiser			
1.				
2	. [         FEC ID number			
3	.             FEC ID number			
4				

FEC Form 1 (Revised 02/2009)	Page 3					
Write or Type Committee Name						
David Rouzer for Congress						
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor						
Freshman Agricultural Republican Members Trust (FARM Trust)						
PO Box 30844  Mailing Address						
Walling Address						
Bethesda MD 2	20824					
CITY STATE	7ID CODE					
CITY STATE	ZIP CODE					
Relationship: Connected Organization Affiliated Committee X Joint Fundraising Representative	Leadership PAC Sponsor					
Custodian of Records: Identify by name, address (phone number optional) and position of the perso books and records.	n in possession of committee					
Ms. Heather Ford						
Full Name PO Box 701						
Mailing Address						
Clayton	27528					
Title or Position CITY STATE	ZIP CODE					
Treasurer 919						
3. <b>Treasurer:</b> List the name and address (phone number optional) of the treasurer of the committee; and any designated agent (e.g., assistant treasurer).	I the name and address of					
Full Name Ms. Heather Ford  of Treasurer						
PO Box 701						
Mailing Address						
L Cloutes	27520					
	27528 					
CITY STATE  Title or Position  Treasurer  919  Telephone number	ZIP CODE					

FEC <b>For</b> n	n 1 (Revised 02/2009)	Page <b>4</b>		
Full Name of Designated Agent	Sarah Waters			
Mailing Address	PO Box 2267			
	Smithfield	NC 27577 - L		
Tiste on Desister	CITY S	TATE ZIP CODE		
Title or Position Finance Directo	r 	er 919 - 757 - 1799		
	<b>Depositories:</b> List all banks or other depositories in which the committee oxes or maintains funds.	deposits funds, holds accounts, rents		
Name of Bank, I	Depository, etc.			
	First Citizens Bank			
Mailing Address	409 East Main Street			
	Smithfield	NC 27577		
	CITY	TATE ZIP CODE		
Name of Bank, Depository, etc.				
	Wells Fargo Bank			
Mailing Address	7901 Wisconsin Avenue			
ag / taa. eee	#MD101			
	Bethesda	MD 20814		
	CITY	TATE ZIP CODE		

## FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. ı ŞuņTruşt Bank PO Box 4418 Mailing Address 30302 GΑ Atlanta CITY 🗖 ZIP CODE 🛕 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Rouzer Congressional Trust PO Box 701 Mailing Address NC 27528 Clayton **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ ADDITIONAL ] Joint Fundraiser Participant С FEC ID number

## FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 6 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor East West Leadership Fund 824 S Milledge Avenue Mailing Address Suite 101 GΑ 30605 Athens **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ ADDITIONAL ] Joint Fundraiser Participant С FEC ID number