Only

STATEMENT OF

PAGE 1/6

FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Dan Bishop Victory Committee 236 Summerhouse Point ADDRESS (number and street) (Check if address is changed) Norwood 28128 NC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS jinger@votedanbishop.com (Check if address is changed) Optional Second E-Mail Address dan@votedanbishop.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00708560 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. Kelley, Jinger, , , Type or Print Name of Treasurer Kelley, Jinger, , , [Electronically Filed] 07 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2
. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate in	nformation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign information below.)	committee. (Complete the candidate
Name of Candidate	
Candidate Party Affiliation Office Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorize	zed 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	n 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 No committee. (i.e., nonconnected committee)	OT a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor or	n line 6.)
(g) This committee is an independent expenditure-only political committee (Super	PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribu	ution accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburse committees/organizations, at least one of which is an authorized committee of	•
(j) This committee collects contributions, pays fundraising expenses and disburse committees/organizations, none of which is an authorized committee of a federal	·
Committees Participating in Joint Fundraiser	
NRCC	C C00075820
Tar Heel Prosperity PAC	C . C00737064

I FEC Form 1 (Revised 0	2/2009)	Page 3
Write or Type Committee Name		
Dan Bishop Vid	ctory Committee	
6. Name of Any Connected On NONE	rganization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
Mailing Address		
	1	
	1	I I I_I
_	CITY ▲ STAT	E ▲ ZIP CODE ▲
Relationship: Connected	Organization Affiliated Organization Joint Fundraising Repre	esentative Leadership PAC Sponso
 Custodian of Records: Identi books and records. 	ify by name, address (phone number optional) and position of the p	person in possession of committee
Kelley, Jing	er, , ,	
Full Name		
Mailing Address	236 Summerhouse Point	
G		
	Norwood	28128
	CITY ▲ STATE	E ▲ ZIP CODE ▲
Title or Position ▼		
Treasurer	Telephone number	828 - 776 - 2774
8. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the commassistant treasurer).	nittee; and the name and address of
Full Name Kelley, Jing	er, , ,	
of Treasurer		
Mailing Address	236 Summerhouse Point	
	Norwood	C 28128
	CITY ▲ STATI	E ▲ ZIP CODE ▲
Title or Position ▼		

FEC Form 1 (Rev	rised 02/2009)		Page 4
Full Name of Kelling Designated Agent	ey, Jinger, , ,		
Mailing Address	236 Summerhouse Point		
	Norwood	NC NC	28128
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
Treasurer		Telephone number 828	3 - 776 - 2774
Banks or Other Depo safety deposit boxes o	sitories: List all banks or other depositories in r maintains funds.	which the committee deposits fur	nds, holds accounts, rents
Name of Bank, Depos	itory, etc.		
Firs	st Citizens Bank		
Mailing Address	9650 Falls of Neuse		
	Raleigh	NC NC	27615
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Deposi	itory, etc.		
L			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' + H9 A = N5 H+ CB

Form/Schedule: F1A Transaction ID:

Amended to reflect change of address

Form/Schedule: Transaction ID:

FEC Form 1S (Revised 02/2017)

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

Page ____ **of** ____

h). Joint Fundraising Bishop For Cong			C C00699660
1.	91000	FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected (Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spon
Mailing Address			
	1		
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee Jo	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify	Organization Affiliated Committee Jobs by name, address (phone number – optional)		ative Leadership PAC Sp
esignated Agent: Identify Full Name			ative Leadership PAC Sp
esignated Agent: Identify			ative Leadership PAC Sp
esignated Agent: Identify Full Name			ative Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A