

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

13 APR 30 AM 11:55
Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

B r a n n o n , f o r U . S . S e n a t e

ADDRESS (number and street)

5 3 0 N e w W a v e r l y P l a c e , S u i t e 3 0 1

(Check if address
is changed)

C a r y , N C 2 7 5 1 8
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

A d m i n @ g r e g b r a n n o n . c o m

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

w w w . G r e g B r a n n o n . c o m

2. DATE

0 2 / 0 5 / 2 0 1 3

3. FEC IDENTIFICATION NUMBER ▶

C

4. 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.

Type or Print Name of Treasurer John Finocchiaro

Signature of Treasurer

Date

0 2 / 0 5 / 2 0 1 3

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 Use Only				
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

13020233030

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: G r e g o r y , J o s e p h , B r a n n o n

Candidate Party Affiliation: REP Office Sought: House Senate President State: NC
 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:
 - 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 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.	_____	FEC ID number	C _____
2.	_____	FEC ID number	C _____
3.	_____	FEC ID number	C _____
4.	_____	FEC ID number	C _____

13020233031

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Grid for Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

Grid for 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

J o h n F i n o c c h i a r o

Mailing Address

P . O . B o x 1 0 8 5 3

R a l e i g h N C 2 7 6 0 5

Title or Position

CITY

STATE

ZIP CODE

T r e a s u r e r

Telephone number

Grid for Telephone number

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

J o h n F i n o c c h i a r o

Mailing Address

P . O . B o x 1 0 8 5 3

R a l e i g h N C 2 7 6 0 5

Title or Position

CITY

STATE

ZIP CODE

T r e a s u r e r

Telephone number

Grid for Telephone number

13020233032

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.

W e l l s , F a r g o

Mailing Address

6 0 1 O b e r l i n R o a d

[Grid for Mailing Address Line 2]

R a l e i g h N C 2 7 6 0 5

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

13020233033

PRIORITY

Flat Rate Envelope

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Secretary of the Senate
 Office of Public Records
 P.O. Box 2517
 Alexandria, VA 22301

2. Article Number
(transfer from service label)

7012 0470 0001 6333 1323

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes



Visit us at usps.com

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Postal Service, January 2011; All rights reserved



Please Recycle



This package is the property of the U.S. Postal Service. It is provided solely for use in sending Priority Mail. It is not for use in violation of federal law. This package is not for



PS00001000064



UNITED STATES POSTAL SERVICE



7012 0470 0001 6333 1333



1024



22301

U.S. POSTAGE
PAID
HARLEIGH, NC
27609-13
FEB 08 2011
AMOUNT

\$11.25
00053022-07



- Not Deliverable As Addressed
- Unable To Forward
- Insufficient Address
- Moved, Left No Address
- Undelivered - Attempted
- No Such Street
- Refused
- Vacant
- No Mail Receipts
- Box Closed - No Order
- Returned For Better Address
- Postage Due



- Not Deliverable As Addressed
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- Insufficient Address
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- Undelivered - Attempted
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- Box Closed - No Order
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- Postage Due

EP14H JAN 2011 Outer Dimension: 10 x 5

13020233036

FedEx NEW Package
Express US Airbill

FedEx Tracking Number 8026 3189 4370

1 From Date 4/15/2013

Sender's Name Reilly C Neal
Company Brannon for U.S. Senate
Address 3121 Georgian Terrace
City Raleigh State NC ZIP 27607

2 Your Internal Billing Reference

3 To Recipient's Name U.S. Senate
Company Office of Public Records
Address 230 Hart Building
City Washington State DC ZIP 20510

Address Use this line for the HOLD location address or for continuation of your shipping address.
City Washington State DC ZIP 20510



8026 3189 4370

4 Express Package Service
NOTE: Service order has changed. Please select carefully.

Next Business Day
FedEx First Overnight
FedEx Priority Overnight
FedEx Standard Overnight

5 Packaging
FedEx Envelope
FedEx Pak

6 Special Handling and Delivery Signaling Options
SATURDAY Delivery
Direct Signature
Indirect Signature

7 Payment Bill to:
Sender
Recipient
Third Party
Credit Card
Cash/Check

Total Packages Total Weight
644

RECEIVED
APR 15 2013
FedEx Express Freight US Airmail

3-03 Business Days
FedEx 2 Day AM
FedEx 2 Day
FedEx Express Saver

8 Special Handling and Delivery Signaling Options
SATURDAY Delivery
Direct Signature
Indirect Signature

9 Payment Bill to:
Sender
Recipient
Third Party
Credit Card
Cash/Check

Total Packages Total Weight
644

Insert shipping document here

fedex.com 1800.GoFedEx 1.800.463.3339

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7118
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	<u>4/15/13</u>	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

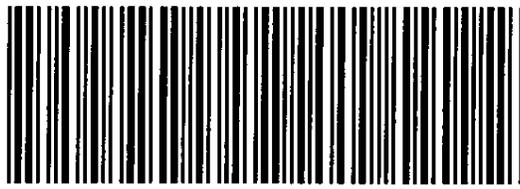
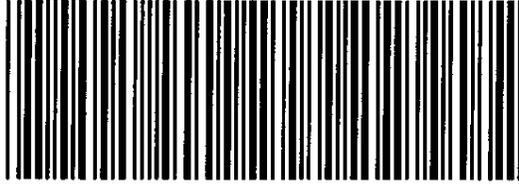
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 4/30/13

13020233037



13020233038