FEC FORM 1	STATEMENT OF ORGANIZATION	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name Example: If is changed) over the line	
George Rouco	for Congress	
ADDRESS (number and street	PO Box 97275	
(Check if address		
is changed)	Raleigh	NC 27624
		STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADD	RESS	
(Check if address is changed)	GRFC@cmandco.com	
	Optional Second E-Mail Address	
(Check if address is changed)	www.georgerouco.com	
2. DATE 02	02 / Y Y Y Y 02 2017	
3. FEC IDENTIFICATION	NUMBER ► C C00583369	
4. IS THIS STATEMENT	NEW (N) OR AN	IENDED (A)
I certify that I have examined	d this Statement and to the best of my knowled	ge and belief it is true, correct and complete.
Type or Print Name of Treas	urer McMichael, Collin, , ,	
Signature of Treasurer	cMichael, Collin, , , [Electro	nically Filed] Date 02 02 2017
NOTE: Submission of false, er	oneous, or incomplete information may subject the ANY CHANGE IN INFORMATION SHOULD BE	person signing this Statement to the penalties of 2 U.S.C. §437g E REPORTED WITHIN 10 DAYS.
Office Use Only	Federal Toll Free	her information contact: Election Commission 9 800-424-9530 12-694-1100 Election Commission (Revised 06/2012)

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	FI	EC For	<b>m 1</b> (Revised 02/2009)	Page <b>2</b>
	TYPE	OF C	MMITTEE	-
	Cand	lidate	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. (Compl information below.)	ete the candidate
	Name Candio	• ·	Rouco, George, , ,	
	Candio Party	date Affiliatio	on REP Office Sought: K House Senate President	State NC District 13
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candic			
	Party	/ Com	mittee:	
	(d)			emocratic, epublican, etc.) Party.
	Politi	ical A	ction Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected 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 segmentative. (i.e., nonconnected committee)	regated 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	raising 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.	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
		Com	nittees Participating in Joint Fundraiser	
		1.	FEC ID number	
		2.	FEC ID number	
		3.	FEC ID number	
		4.		

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919

Telephone number

889

Write or Type Committee Name

-

Treasurer

## George Rouco for Congress

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

Mailing Address					
			STATE	ZIP CODE	
Relationship: Con	nected Organization	Affiliated Committee	Joint Fundrais	ing Representative	Leadership PAC Sponsor
				<b>.</b>	
					in possession of committee
7. Custodian of Records books and records.					in possession of committee
<ol> <li>Custodian of Records books and records.</li> </ol>	Lidentify by name, addre				in possession of committee
7. Custodian of Records books and records.	: Identify by name, addre				in possession of committee
7. Custodian of Records books and records. McM Full Name	Lidentify by name, addre			sition of the person	
7. Custodian of Records books and records. McM Full Name	Lidentify by name, addre			sition of the person	in possession of committee

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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	McMichael, Collin, , ,
Mailing Address	PO Box 97275
	Raleigh         NC         27624
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																					1							
Mailing Address			l																									
			l																									
			l																								1	
	CITY																STA	λΤΕ			ZI	ΡC	DE					
Title or Position																												
															Tele	eph	one	e ni	umt	ber								

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																							
Mailing Address		6659 Fa	alls of	Neus	e Ro	k 															1			
		Raleigh	<b>)</b> 										N	IC	]	2	2761	5			- [			
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Name of Bank, D	Depository, e	tc.																						
Mailing Address																								
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						CIT	Y					ç	STA	ΤE					ZIF	Р С(	DDE	-		