Only

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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. Deplorables For Lee A Brian 95 Smiths Creek Dr ADDRESS (number and street) (Check if address is changed) Clayton 27520-5858 NC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS leeabrian@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00651802 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. Brian, Lee, Andrea, Ms., Type or Print Name of Treasurer Brian, Lee, Andrea, Ms., [Electronically Filed] 07 28 2017 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

Local 202-694-1100

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TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below	<i>i.</i>)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Corinformation below.)	mplete the candidate
Name of Candidate Brian, Lee, Andrea, Ms.,	
Candidate Party Affiliation REP Office Sought: House Senate President	State NC District 04
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(Mational, 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 co	onnected 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 s committee. (i.e., nonconnected committee)	segregated 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 Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundraiser	
1. FEC ID number	
2. FEC ID number	
3. FEC ID number	
4.	

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Write or Type Committee Name		y -
Deplorables For	r Lee A Brian	
•	rganization, Affiliated Committee, Joint Fundraising Representative, or Lo	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Identi books and records.	tify by name, address (phone number optional) and position of the person	in possession of committee
Brian, Lee,	Andrea, Ms.,	
Mailing Address	95 Smiths Creek Dr	
	Clayton NC 2	7520-5858
Title or Position	CITY STATE	ZIP CODE
Candidate	Telephone number	
. Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and ssistant treasurer).	the name and address of
Full Name Brian, Lee, of Treasurer	Andrea, Ms.,	
Mailing Address	95 Smiths Creek Dr	
		7520-5858
Title or Position Candidate	CITY STATE 919 Telephone number	ZIP CODE

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Full Name of Designated Agent	Brian, Lee, Andrea, Ms.,	
Mailing Address	95 Smiths Creek Dr	
	Clayton NC 2 CITY STATE	7520-5858 ZIP CODE
Title or Position Candidate	Telephone number 919	
Banks or Other safety deposit bo Name of Bank, D		s, holds accounts, rents
	PNC	
Mailing Address	,1135 Kildaire Farm Rd	
Mailing Address	1135 Kildaire Farm Rd	7511
Mailing Address	1135 Kildaire Farm Rd	7511
Mailing Address Name of Bank, D	1135 Kildaire Farm Rd Cary CITY STATE	
	1135 Kildaire Farm Rd Cary CITY STATE	
	Cary CITY STATE Depository, etc.	
Name of Bank, D	Cary CITY STATE Depository, etc.	
Name of Bank, D	Cary CITY STATE Depository, etc.	