FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. North Carolina Republican Party 1506 Hillsborough St ADDRESS (number and street) (Check if address is changed) Raleigh 27605-1831 NC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address treasurer@ncgop.org is changed) Optional Second E-Mail Address greg.fornshell@ncgop.org COMMITTEE'S WEB PAGE ADDRESS (URL) www.ncgop.org (Check if address is changed) DATE 2024 C00038505 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 Oakes, Martin, , Oakes, Martin, , , Date 04 04 2024 Signature of Treasurer 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 information	n below.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee information below.)	ee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized comm	mittee.
Name of Candidate	
Party Committee:	
(d) This committee is a STA (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 sep committee. (i.e., nonconnected committee)	parate 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.)	
(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-contribution acc	counts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, at least one of which is an authorized committee of a federal	
(j) This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, none of which is an authorized committee of a federal candi	
Committees Participating in Joint Fundraiser	
1	C
	<u> </u>

	FEC Form 1 (Revised 0	2/2009)			Page 3
V	Vrite or Type Committee Name North Carolina R	enublican Party			
6.		rganization, Affiliated Committee, Joint	Fundraising Represent	ative, or Le	eadership PAC Sponsor
		District Republican Party	3 4	,	
	Mailing Address	PO Box 1913			
		Bryson City	, , , , , , , NC	2 2	8713-4913
		CITY ▲	STAT	L L	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization	Joint Fundraising Repr	resentative	Leadership PAC Sponso
	Tieldicholip.	Organization X / miniated Organization	Contractions Hope	Coomanyo	Leadership 17to opened
7.	Custodian of Records: Idention books and records.	ify by name, address (phone number option	onal) and position of the p	person in po	ssession of committee
	Fornshell, 0	Gregory, , ,			
	Full Name				
	Mailing Address	1506 Hillsborough St			
		Raleigh	, NO	2 2	7605-1831
		CITY ▲	STAT		ZIP CODE ▲
	Title or Position ▼				
	Custodian of Records		Telephone number	919	6423
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	he treasurer of the comi	mittee; and	the name and address of
	Full Name Oakes, Ma	rtin, , ,			
		₁ 8057 Lucky Creek Ln			
	Mailing Address				
		Denver	N		8037-8004
		CITY ▲	STAT	ſE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone number	704	3226

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent	Oakes, Martin, , ,	
Mailing Address	8057 Lucky Creek Ln	
	Denver NC	28037-8004
Title or Position ▼	CITY ▲ STAT	E ▲ ZIP CODE ▲
Treasurer	Telephone number	704 - 277 - 3226
	Depositories: List all banks or other depositories in which the committee deposes or maintains funds.	osits funds, holds accounts, rents
Name of Bank, D	epository, etc.	
	First Citizens	
Mailing Address	2005 Clark Avenue	
	Raleigh	27605
	CITY ▲ STATE	E ▲ ZIP CODE ▲
Name of Bank, D	epository, etc.	
	First Citizens	<u> </u>
Mailing Address	2005 Clark Avenue	
	Raleigh	27605
	CITY ▲ STATE	E ▲ ZIP CODE ▲

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

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h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Spon
NC Republican Party			
Mailing Address	1506 Hillsborough St		
	Raleigh	, , , NC	27605-1831
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC S
Connected		Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	d Organization X Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name	Affiliated Committee Joint y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee Joint y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	Affiliated Committee Joint y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposition and the proposition of the	Affiliated Committee Joint y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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

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(h). Joint Fundraisi	ng Participant:			
1.		FEC ID nu	mber	С
2.		FEC ID nu	mber	С
3.		FEC ID nu	mber	С
4.		FEC ID nu	mber	С
Budd NC Victory Fur	Organization, Affiliated Committee, Joint Fund 2028	ndraising Represe	entative,	or Leadership PAC Spon
Mailing Address	PO Box 97275			
	Raleigh		NC	27624-7275
Relationship:	CITY ▲	STA	ATE 🔺	ZIP CODE ▲
Connecte		oint Fundraising Rep	oresentat	ive Leadership PAC Sp
Connecte	d Organization Affiliated Committee X J		presentat	ive Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X J		presentat	ive Leadership PAC Sp
esignated Agent: Identi	d Organization Affiliated Committee X J		presentat	Leadership PAC Sp
esignated Agent: Identi	d Organization Affiliated Committee X J		presentat	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X J Ty by name, address (phone number – optional)			Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee X J Ty by name, address (phone number – optional)		Ē A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the content of t	Affiliated Committee y by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STAT Telephone Number	TE A	ZIP CODE A
esignated Agent: Identification of Bank, repository, etc.	Affiliated Committee X J Ty by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds.	STAT Telephone Number	TE A	ZIP CODE A

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

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
Edwards Victory Fur	IQ 		
Mailing Address	PO Box 97275		
	Raleigh	NC	27624-7275
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee X Joint fly by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the control	Affiliated Committee X Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	Affiliated Committee X Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A

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

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	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spon
<u> </u>			
	228 S Washington Street		
Mailing Address	Suite 115		
	Alexandria	VA	22314-
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
			ative Leadership PAC S
esignated Agent: Identi	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name		STATE A	
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, First C	CITY A pries: List all banks or other depositories in which	Telephone Number	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY ▲ CITY ▲ pries: List all banks or other depositories in which aintains funds.	Telephone Number	ZIP CODE A

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

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h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Mailing Address	228 S Washington St		
	Ste 115	<u> </u>	<u> </u>
	Alexandria	VA	22314-5404
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joi	int Fundraising Represent	ative Leadership PAC Sp
Connecte		int Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Joi	int Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identif	d Organization Affiliated Committee X Joi	int Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Joint J	STATE A Telephone Number	ZIP CODE A

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

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h). Joint Fundraisi		FEC ID number	С
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2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Protect The House 2			
	PO Box 30844		
Mailing Address			
	Bethesda	MD	20824-0844
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundrais	ing randipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
Trump 47 Committe	e 		
Mailing Address	PO Box 509		
Mailing Address			
	Arlington		22216 0500
	Arlington	VA	22216-0509
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Join	nt Fundraising Represent	Leadership PAC Sp
		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint F	Fundraising Representati	ve, or Leadership PAC Spons
Trump Victory			
Mailing Address	c/o Red Curve Solutions		
	138 Conant Street, 2nd Floor		
	Beverly	MA	01915-1666
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
coignated Agent. Identif	by name, address (phone number – option	al)	
Full Name	by name, address (phone number – option:	al)	
	by name, address (phone number – options	al)	
Full Name	by name, address (phone number – options	al)	
Full Name	CITY A	al) STATE	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main and the safety deposit	CITY A ries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	its funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY A ries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	its funds, holds accounts, rents