Only

# STATEMENT OF

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**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. AURIE BUCKHOUT FOR CONGRESS PO Box 97275 ADDRESS (number and street) (Check if address is changed) Raleigh NC 27624-7275 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address lbfc@cmandco.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.lauriebuckhoutforcongress.com/ (Check if address is changed) DATE 2024 C00853499 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. Type or Print Name of Treasurer McMichael, Collin,, McMichael, Collin, , , Date 07 16 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

E	Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) X This committee is a principal campaign committee. (Complete the candidate information below.)	
	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	candidate
	Name of Candidate Buckhout, Laurie, , ,	
	Candidate Party Affiliation REP Office Sought: X House Senate President	State NC District 01
	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 Republican,	
	Political Action Committee (PAC):	
	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	Corporation Corporation w/o Capital Stock Labor Or	ganization
	Membership Organization Trade Association Cooperat	ive
	In addition, this committee is a Lobbyist/Registrant PAC.	
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	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.)	
	This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAG	C).
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1	

Treasurer

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I	FEC <b>Form 1</b> (Revis	sed 02/2009)	l Page <b>3</b>
٧	Vrite or Type Committee N	,	. 290 -
	LAURIE BUC	KHOUT FOR CONGRESS	
6.		ed Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
	BUCKHOUT FOR	R CONGRESS-GTM NF NC01	
	Mailing Address	228 S WASHINGTON ST	
		STE 115	
		ALEXANDRIA	22314-
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Conne	ected Organization X Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
	riolationip.	7 / Illinated Organization	Loadereling 17to openios
7.	Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the person in p	ossession of committee
	McMi	ichael, Collin, , ,	
	Full Name		
	Mailing Address	PO Box 97275	
		Raleigh	27624-7275
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Custodian of Records	Telephone number	
8.		ne and address (phone number optional) of the treasurer of the committee; and e.g., assistant treasurer).	the name and address of
	Full Name McMi of Treasurer	ichael, Collin, , ,	
	Mailing Address	PO Box 97275	
		Raleigh	27624-7275
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		

Telephone number

1817

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Full Name of Designated Agent		
Mailing Address		
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
	<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, hole are or maintains funds.	lds accounts, rents
Name of Bank, D	pepository, etc.	
Mailing Address	Truist 9111 Litchford Rd	
	Raleigh NC 27615	
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲

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

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nittee X Joint er – optional)	FEC ID numb  FEC ID numb  FEC ID numb  FEC ID numb  aising Representation  VA  STATE  Fundraising Representation	er C er C ative, or L	eadership PAC Spons  22314-5404  ZIP CODE  Leadership PAC Sp
nittee X Joint er – optional)	FEC ID numb  FEC ID numb  aising Representation  VA  STATE	er C er C	22314-5404 ZIP CODE <b>A</b>
nittee X Joint er – optional)	FEC ID numb	ative, or L	22314-5404 ZIP CODE <b>A</b>
nittee X Joint er – optional)	aising Representa	ative, or L	22314-5404 ZIP CODE <b>A</b>
nittee X Joint er – optional)	VA		22314-5404 ZIP CODE <b>A</b>
er – optional)	STATE	_	ZIP CODE A
er – optional)	STATE	_	ZIP CODE A
er – optional)	STATE	_	ZIP CODE A
er – optional)	STATE	_	ZIP CODE A
er – optional)			
er – optional)	Fundraising Repres	entative	Leadership PAC Sp
ı			
1	STATE A	<b>A</b>	ZIP CODE ▲
Te	elephone Number		-
sito		Telephone Number	STATE   Telephone Number  pries in which the committee deposits funds

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

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1						
				FEC II	) number	С
1				FEC II	) number	С
3. 🖳				FEC II	) number	С
4.				FEC II	) number	C
				· <del></del>		
Name of /	Any Connected (	Organization, Affili	iated Committee, Joint	Fundraising Rep	oresentative	e, or Leadership PAC Spons
SCALIS	SE LEADERSH	IP FUND 2024		1 1 1 1 1		
Maili	ing Address	320 1st St SE				
		Washington		, , , , <b>1</b>	DC	20003-1838
Rela	tionship:		CITY A		STATE A	ZIP CODE ▲
Designate	d Agent: Identily	by name, address	(phone number - option	iai)		
Full Na	ame   , , ,					
Full Na		<u> </u>				
	ame LIII					
						7ID CODE 1
Mailing			CITY A		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	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
GOP WINNING WO	MEN 2024 		
Mailing Address	228 S Washington St		
	Ste 115		
	Alexandria	VA	22314-5404
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Affiliated Committee X	loint Fundraising Represent	Leadership TAO Sp
			ative Leadership PAC Sp
esignated Agent: Identi			Leadership TAO Sp
esignated Agent: Identi			Leadership TAO Sp
esignated Agent: Identi			
esignated Agent: Identi	fy by name, address (phone number – optional		ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional CITY A  CITY A  pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional CITY A  CITY A  pries: List all banks or other depositories in what intains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional CITY A  CITY A  pries: List all banks or other depositories in what intains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional CITY A  CITY A  pries: List all banks or other depositories in what intains funds.	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). <b>Joint Fundraisi</b>	ng 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	d Organization, Affiliated Committee, Joint Fo	ındraising Representativ	e, or Leadership PAC Spons
E-PAC MAJORITY	MAKERS		
Mailing Address	PO Box 500		
	Glens Falls	NY	12801-0500
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X	Joint Fundraising Represent	tative Leadership PAC Sp
Connecto			Leadership PAC Sp
Connecte esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	ify by name, address (phone number – optiona		Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optiona		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	ories: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank, epository, etc.	ories: List all banks or other depositories in whaintains funds.	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). <b>Joint Fundraisi</b>	ng Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
-	I Organization, Affiliated Committee, Joint Fundra		e, or Leadership PAC Spons
Mailing Address	PO Box 97275		
Relationship:	Raleigh CITY ▲	NC NC	27624-7275
	0111 =	01/1122	211 0002 2
	ed Organization Affiliated Committee X Joint  fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Spo
		Fundraising Represent	Leadership PAC Spo
esignated Agent: Identi		Fundraising Represent	Leadership PAC Spo
esignated Agent: Identi		Fundraising Represent	Leadership PAC Spo
esignated Agent: Identi		Fundraising Represent	Leadership PAC Spo
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te  pries: List all banks or other depositories in which to	STATE A lephone Number	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or manage of Bank, repository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which the paintains funds.	STATE A lephone Number	ZIP CODE A