Image#	2024053096488031	76

FEC

05/30/2024 15 : 31

PAGE 1 / 13 -

STATEMEN <sup>-</sup>	Γ OF
<b>ORGANIZA</b>	ΓΙΟΝ

FORM 1		ORGANIZ		<b>N</b>							
1. NAME OF		(Check if name	Exam	ple:If typing, type	10	TTT 4 M		ice Use	Only		
COMMITTEE (in	full)	is changed)		the lines.		FE4M	5				
North Carolir	na Repu	blican Party									
ADDRESS (number ar	nd street)	1506 Hillsborough St									
(Check if a	ddress				1 1		1 1	1 1	1 1		
is changed	)	Raleigh 			STA		276	05-183	1 – ZIP C0		
COMMITTEE'S E-MA											
(Check if a is changed	ddress	treasurer@ncgop.org									
Ĵ		Optional Second E-Mail Add greg.fornshell@ncgop.org	dress		_   _		_   _	_   _		<u>     </u>	
COMMITTEE'S WEB	ddress	RESS (URL) www.ncgop.org									
2. DATE 05		2024									
3. FEC IDENTIFIC	ATION NUM		:00038505								
4. IS THIS STATEM		NEW (N) OR	×	AMENDED (A)							
I certify that I have e	xamined this	Statement and to the best	t of my kr	nowledge and belief	it is true	e, corre	ct and	compl	ete.		
Type or Print Name of	of Treasurer	Oakes, Martin, , ,									
Signature of Treasure	r Oakes,	Martin, , ,			Date	C	5 /	30		2024	Y Y 1
NOTE: Submission of t		us, or incomplete information ANY CHANGE IN INFORMA						penaltie	es of 52	U.S.C.	§30109
Office Use Only			-	For further information Federal Election Commi Toll Free 800-424-9530 Local 202-694-1100				-	FOR sed 06/2		

FEC Form 1 (Revised 03/2022)	Page <b>2</b>
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 information below.)	NOT a principal campaign committee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought:	Iouse Senate President
(c) This committee supports/opposes only one candidate	te, and is NOT an authorized committee.
Name of Candidate	
Party Committee:       (National, Stational, Sta	te (Democratic, e) committee of the REP Republican, etc.) Party
Political Action Committee (PAC):         (e)       This committee is a separate segregated fund. (Ide	ntify connected organization on line 6.) Its connected organization is a:
Corporation	poration w/o Capital Stock
Membership Organization Tra	de Association Cooperative
In addition, this committee is a Lobbyist/	Registrant PAC.
(f) This committee supports/opposes more than one F committee. (i.e., nonconnected committee)	ederal candidate, and is NOT a separate segregated fund or party
In addition, this committee is a Lobbyist/	Registrant PAC.
In addition, this committee is a Leadersh	p 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/F	Registrant PAC.
(h) This committee is a political committee with both c	ontribution and non-contribution accounts (Hybrid PAC).

## Joint Fundraising Representative:

In addition, this committee is a Lobbyist/Registrant PAC.

	FEC Form 1 (Revised 02	2/2009)																				Pa	ge (	3	
N	Vrite or Type Committee Name																								
	North Carolina R	epublican	Pa	rty																					
6.	Name of Any Connected Or	ganization, Affil	iated	Com	nmitt	ee, J	Join	t Fi	undı	ais	ing	Rep	ores	sen	tativ	/e, (	or L	ea	der	shi	рF	PAC	Sp	on	sor
	11th Congressional D	District Reput	olica	n Pa	arty	, 																			
	Mailing Address	PO Box 1014		1 1	I	1 1	I	I	1 1	I	1		I	1			1	1			I	I	1		

Mailing Address			
	Horse Shoe		28742-1014
	CITY 🔺	STATE 🔺	ZIP CODE
Relationship: Connected	Organization X Affiliated Organization	Joint Fundraising Representative	e 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.

Fornshell,	Gregory, , ,
Full Name	
Mailing Address	1506 Hillsborough St
	Raleigh       NC       27605-1831         -       -       -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Custodian of Records	Telephone number     919     828     6423

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	Oakes, Martin, , ,
Mailing Address	8057 Lucky Creek Ln
	Denver         NC         28037-8004
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	<b>7</b>
Treasurer	Telephone number     704     277     3226

FEC Form 1	(Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent	Oakes, Martin, , ,	
Mailing Address	8057 Lucky Creek Ln	
	Denver NC 28037-80	
		ZIP CODE
Title or Position		277 3226

## 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.

Fi	rst Citizens		
Mailing Address	2005 Clark Avenue		
	Raleigh │	NC 27605	
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Depo	ository, etc.		
Fi	irst Citizens		
Mailing Address	2005 Clark Avenue		
	Raleigh 	NC 27605	
	CITY 🔺	STATE A	ZIP CODE ▲

1.						
			FEC II	D number	С	
2.			FEC II	D number	С	
3.			FEC II	D number	С	
4.			FEC II	D number	С	
Name of Any Connected	Organization, Affiliated C	ommittee, Joint Fund	traising Re	presentative	e, or Leadership PA	C Spons
	1506 Hillsborough St					
Mailing Address						
	Raleigh				27605 1921	
					27605-1831	-
	(		nt Fundraisin	STATE ▲ g Representa	ZIP CO	
Connecte	d Organization	d Committee	nt Fundraisin			
Connecte Designated Agent: Identif	d Organization	d Committee				
Connecte Designated Agent: Identif Full Name	d Organization	d Committee	nt Fundraisin			
Connecte Designated Agent: Identif Full Name	d Organization	d Committee	nt Fundraisin			
Connecte Cesignated Agent: Identif Full Name	d Organization X Affiliated	d Committee Join		g Representa	ative Leadership	• PAC Spo
Connecte Designated Agent: Identif Full Name	d Organization X Affiliated	d Committee		g Representa		• PAC Spo

(g) or (h).	Joint Fundraising	Participant:			
1.				FEC ID number	C
2.				FEC ID number	C
3.				FEC ID number	C
4.				FEC ID number	C
. Name	of Any Connected	Organization, Affiliated C	ommittee, Joint Fund	Iraising Representative	e, or Leadership PAC Sponsor
	dd NC Victory Fund		, 		· · ·
Ν	Mailing Address	PO Box 97275			
		Raleigh			27624-7275
F	Relationship:	(		STATE A	
	Connected	Organization Affiliate	d Committee X Joir	nt Fundraising Representa	ative Leadership PAC Sponsor
. Design	nated Agent: Identify	by name, address (phone	number – optional)		
	nated Agent: Identify	by name, address (phone	e number – optional)		
Ful		by name, address (phone	e number – optional)		
Ful	II Name	by name, address (phone	• number – optional)		
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Ful Ma TI Banks safety Name o Deposi	II Name		· · · · · · · · · · · · · · · · · · ·	Felephone Number	

5(g) or (h).	Joint Fundraising	Participant:			
1	1			FEC ID number	C
2	2.			FEC ID number	С
3	3.			FEC ID number	С
2	4			FEC ID number	C
6. <b>Nam</b>	ne of Any Connected (	Organization. Affiliate	d Committee. Joint Fund	raising Representativ	ve, or Leadership PAC Sponsor
	dwards Victory Fund	· · · · · · · · · · · · ·			
	Mailing Address	PO Box 97275			
		Raleigh			27624-7275
	Relationship:				
	Connected	Organization Affil	iated Committee	t Fundraising Represen	tative Leadership PAC Sponsor
	ignated Agent: Identify	by name, address (ph	one number – optional)		
I		by name, address (ph	one number - optional)		
I	Full Name	by name, address (ph	one number - optional)		
I	Full Name	by name, address (ph	one number - optional)		
I	Full Name		one number – optional)		
I	Full Name				ZIP CODE A
9. <b>Ban</b> l	Full Name			elephone Number	I       I
9. <b>Ban</b> i safei Nam	Full Name	es: List all banks or contains funds.		elephone Number	
9. <b>Ban</b> i safei Nam	Full Name          Mailing Address         TITLE OR POSITION         ks or Other Depositori         ty deposit boxes or mail	es: List all banks or contains funds.		elephone Number	
9. <b>Ban</b> i safei Nam	Full Name          Mailing Address         TITLE OR POSITION         ks or Other Depositori         ty deposit boxes or mail         ne of Bank, ository, etc.	es: List all banks or contains funds.		elephone Number	
9. <b>Ban</b> i safei Nam	Full Name          Mailing Address         TITLE OR POSITION         ks or Other Depositori         ty deposit boxes or mail         ne of Bank, ository, etc.	es: List all banks or contains funds.		elephone Number	

5(g) or (h	n). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	C
6. <b>Na</b>	ame of Any Connected	Organization, Affiliated Committee, Joint Fundrai	sing Representative	, or Leadership PAC Sponsor
L	Grow The Majority			
l				
	Mailing Address	228 S Washington Street		
		Suite 115		
		Alexandria		22314-
	Relationship:		STATE ▲	
			undraising Representa	
8. <b>De</b>	esignated Agent: Identify	by name, address (phone number - optional)		
8. <b>De</b>		by name, address (phone number - optional)		
8. <b>De</b>	Full Name	by name, address (phone number - optional)		
8. <b>De</b>	Full Name	by name, address (phone number - optional)		
8. De	Full Name			
8. De	Full Name	CITY A		
8. De	Full Name			
9. <b>B</b> a	Full Name		phone Number	
9. <b>Ba</b> sat	Full Name Mailing Address TITLE OR POSITION		phone Number	
9. <b>Ba</b> sa' Na	Full Name Mailing Address TITLE OR POSITION		phone Number	
9. <b>Ba</b> sa' Na	Full Name		phone Number	
9. <b>Ba</b> sa' Na	Full Name          Mailing Address         TITLE OR POSITION            anks or Other Depositor         fety deposit boxes or ma         ame of Bank,       First Cit         epository, etc.	CITY A CITY A Tele ies: List all banks or other depositories in which th intains funds.	phone Number	
9. <b>Ba</b> sa' Na	Full Name          Mailing Address         TITLE OR POSITION            anks or Other Depositor         fety deposit boxes or ma         ame of Bank,       First Cit         epository, etc.	CITY A CITY A Tele ies: List all banks or other depositories in which th intains funds.	phone Number	

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

ZIP CODE

STATE 🔺

1.		Participa	int:																						
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2.						I			I			FE	EC II	D r	num	oer	С	)							
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NRSC	C Victory		1 1	1 1		I	I		1	I	1		I	I		1		I		1	I	1	1	I	1
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CITY

(g) or (h).	Joint Fundraising	Failicipani.		
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Z	4. 🔄 🖂 🖂 🖂		FEC ID number	С
	-	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
P	Pit Crew Fund			
		824 Milledge Cir		
	Mailing Address	Ste 101		
		Athens	GA	30606-
	Relationship:	CITY A	STATE A	ZIP CODE
Desi	ignated Agent: Identify	by name, address (phone number – optional)		
	ignated Agent: Identify Full Name	by name, address (phone number – optional)		
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I	Full Name			
Ban safet	Full Name	CITY ▲ CITY ▲ Tel Es: List all banks or other depositories in which the tentains funds.	ephone Number	
Ban safet	Full Name	CITY ▲ CITY ▲ Tel Es: List all banks or other depositories in which the tentains funds.	ephone Number	
Ban safet	Full Name	CITY ▲ CITY ▲ CITY ▲ Tel es: List all banks or other depositories in which th tains funds. ZENS	ephone Number	
Ban safet	Full Name	CITY ▲ CITY ▲ CITY ▲ Tel es: List all banks or other depositories in which th tains funds. ZENS	ephone Number	
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5(g) o	or (h). Joint Fundraising	g Participant:		
	1		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4		FEC ID number	С
6.	-	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Protect The House 20	24		
	Mailing Address	PO Box 30844		
		Bethesda	MD	20824-0844
	Relationship:	CITY 🔺	STATE A	ZIP CODE
	Connected	Organization Affiliated Committee X Joint I	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify	by name, address (phone number – optional)		
8.		by name, address (phone number - optional)		
8.	Full Name	by name, address (phone number - optional)		
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9.	Full Name          Mailing Address         TITLE OR POSITION            Banks or Other Depositor         safety deposit boxes or mail         Name of Bank,         Depository, etc.		ephone Number	

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5(g) or	r(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
6. <b>I</b>		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	Trump 47 Committee			
	Mailing Address	PO Box 509		
		Arlington		22216-0509
	Relationship:		STATE A	ZIP CODE
_	Connected	I Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8. <b>E</b>	Designated Agent: Identify	by name, address (phone number - optional)		
8. <b>C</b>	Designated Agent: Identify	by name, address (phone number – optional)		
8. <b>C</b>		by name, address (phone number – optional)		
8. <b>[</b>	Full Name	by name, address (phone number – optional)		
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	g Participant:				
1			) number	С	
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4.			) number	С	
lame of Any Connected	Organization, Affiliated Committee, Joint F	undraising Rep	oresentativo	e, or Leadership PAC	Sponso
	1 c/o Red Curve Solutions				
Mailing Address	138 Conant Street, 2nd Floor				
			MA	01915-1666	
				ZIP CODE	
	CITY A I Organization Affiliated Committee X r by name, address (phone number – optiona	Joint Fundraising	STATE		
Connected	Organization Affiliated Committee				
Esignated Agent: Identify	Organization Affiliated Committee				
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