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FEC MAIL CENTER

Enclosed is the revised Form 1 for:

Candidate: Robert E. Groce

Committee: GROCE FOR CONGRESS

FEC I.D. #: C00489120

Specific revision from original: inclusion of treasurer signature

Date of FEC receipt of original: 09/20/2010

10030480185

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FEC MAIL CENTER

FEC
FORM 1STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (in full)☐ (Check if name
is changed)Example: If typing, type
over the lines.

12FE4M5

GROCE FOR CONGRESS

ADDRESS (number and street)

1585 Central Avenue

C-5, #160

☐ (Check if address
is changed)

Summerville

SC

29483

- 5587

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐ (Check if address
is changed)

rob@groceforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address
is changed)

www.groceforcongress.com

2. DATE

10th ' 22nd ' 2010th ' Y

3. FEC IDENTIFICATION NUMBER

C 00489120

4. IS THIS STATEMENT

☐

NEW (N)

OR

☒

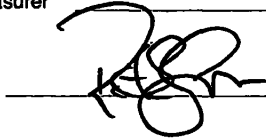
AMENDED (A)

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

Robert E. Groce

Signature of Treasurer



Date

10th ' 22nd ' 2010th ' Y

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100FEC FORM 1
(Revised 02/2009)

10030480186

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 NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Robert E. Groce

Candidate
Party Affiliation

WFP

Office
Sought:

House



Senate



President

State

SC

District

01

- (c) ☐ 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 _____ (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 separate segregated fund or party committee. (i.e., nonconnected committee)



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 two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.

FEC ID number C

2.

FEC ID number C

3.

FEC ID number C

4.

FEC ID number C

10030480187

Write or Type Committee Name

GROCE FOR CONGRESS

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

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ 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.

Full Name

Robert E. Groce

Mailing Address

1585 Central Avenue

C-5, #160

Summerville

SC

29483

- 5587

Title or Position

CITY

STATE

ZIP CODE

candidate

Telephone number

843

- 475

- 5070

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

Robert E. Groce

Mailing Address

1585 Central Avenue

C-5, #160

Summerville

SC

29483

- 5587

Title or Position

CITY

STATE

ZIP CODE

candidate

Telephone number

843

- 475

- 5070

Full Name of
Designated
Agent

Deborah F. Mortellaro

Mailing Address

113 Antebellum Way

Summerville

CITY

SC

STATE

29483

- 8145

ZIP CODE

Title or Position

administrative assistant

Telephone number

843

- 486

- 6577

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.

First National Bank of South Carolina

Mailing Address

415 N Main Street

Summerville

CITY

SC

STATE

29483

- 6419

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

10030480189

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
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☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked

Am D

PREPARER

(3/2005)

10/27/10

DATE PREPARED

10030480190