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Please Note that the Democratic Women of Guilford County are Subordinate to the State Party and  
the State Democratic Women only as specified for all subordinate committees in the state  
Principles of Organization.

2024 NOV 27 AM 10:43

I have filed the appropriate report and terminated the Committee as far as Federal Elections are concerned.

I hope this answers all questions.

Linda Archer, Treasurer

*Linda Archer*

2024-11-27 09:00:49 2024-11-27 09:00:49

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

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Office Use Only

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

12FE4M5

Democratic Women of Guilford County

ADDRESS (number and street)

2300 W Meadowview RD

(Check if address is changed)

Suite 110

Greensboro

CITY ▲

NC

27407

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

LILARCHER@GMAIL.COM

Optional Second E-Mail Address

DEMWGC@GMAIL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 11 / 18/24 / 2024

3. FEC IDENTIFICATION NUMBER ►

C 00888008

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 LINDA ARCHER

Signature of Treasurer Linda Archer

Date

11 / 18 / 2024

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  
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Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 03/2022)

## 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

Candidate Party Affiliation  Office Sought:  House  Senate  President State   
District

(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.)

(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 accounts (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 proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(j)  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

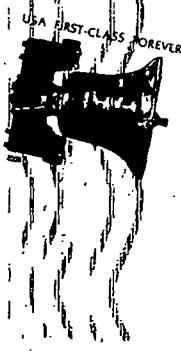
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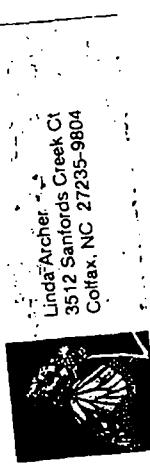
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Washington, DC 20460

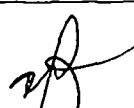
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## Federal Election Commission

**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/>	Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/>	USPS First Class Mail	Date of Receipt 11/27/24
<input type="checkbox"/>	USPS Registered/Certified	Postmarked (R/C)
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<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Overnight Delivery Service (Specify):	Shipping Date      Date of Receipt Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/>	Received via FAX	Date of Receipt
<input type="checkbox"/>	Received via Email	Date of Receipt
<input type="checkbox"/>	Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/>	Other (Specify):	Date of Receipt or Postmarked
		11/27/24
PREPARER (4/2023)		DATE PREPARED

2024-11-27-03:0049-1209