Only

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STATEMENT OF **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. Ryan Mayberry for Congress 134 Wittenburg Springs Dr ADDRESS (number and street) (Check if address is changed) Taylorsville NC 28681 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address ryanmayberryforcongress@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00859587 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 Taylor, Donald,, 12 07 2023 Signature of Treasurer Taylor, Donald, , , Date 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

EC 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.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Comple information below.)	ete the candidate
Name of Candidate Mayberry, Ryan, , ,	
Candidate Party Affiliation REP Office Sought: X House Senate President	State NC District 05
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	210.1101
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Repub	ocratic, olican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a:
Corporation Corporation w/o Capital Stock Lab	bor Organization
Membership Organization Trade Association Cod	operative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated 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 accounts (Hybridian Committee)	rid 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 t 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundraiser	
1	

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V	rite or Type Committee Name			
	Ryan Mayberry f			him DAO Occurrence
).	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising R	epresentative, or Leaders	nip PAC Sponsor
	Mailing Address			
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundra	ising Representative	_eadership PAC Sponsor
	<del></del>			
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and positi	on of the person in possessi	on of committee
	Taylor, Dor	nald, , ,		
	Full Name	526 Twins Cove Road		
	Mailing Address	320 FWIIIS GOVE ROAU		
		Taylorsville	NC 28681	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephone	number 828	638 5406
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of assistant treasurer).	the committee; and the na	me and address of
	Full Name Taylor, Dor	nald, , ,		
		<sub>1</sub> 526 Twins Cove Road		
	Mailing Address			
		Taylorsville	NC 28681	
		CITY A	STATE ▲	ZIP CODE ▲
	Title or Position ▼		202	000
	Treasurer	Telephone	number 828	638 5406

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Full Name of Designated Agent	Taylor, Marie, , ,	
Mailing Address	526 Twin Coves Road	
	Taylorsville	NC 28681
Title or Position	CITY ▲	STATE ▲ ZIP CODE ▲
Asst Treasurer	Telephone	e number 828 - 638 - 5407
	<b>Depositories:</b> List all banks or other depositories in which the corresponding to the corres	nmittee deposits funds, holds accounts, rents
Name of Bank, D	epository, etc.	
	First Citizens	
Mailing Address	239 Fayetteville Street	
	Raleigh	NC 27601 -   -
	CITY ▲	STATE ▲ ZIP CODE ▲
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY ▲	STATE ▲ ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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(h). <b>Joint Fundraisin</b>	g Participant:			
1.		FEC ID	number	С
2.		FEC ID	number	С
3.		FEC ID	number	С
4.		FEC ID	number	С
Name of Any Connected	Organization, Affiliated Committee, Jo	oint Fundraising Repr	esentative,	, or Leadership PAC Sponso
Mailing Address				
Relationship:	CITY ▲	:	STATE A	ZIP CODE ▲
	Organization Affiliated Committee  by name, address (phone number – or	Joint Fundraising	nepresentat	Leadership FAC 3pc
Designated Agent: Identify	_		Hepreseritat	tive Leadership PAC Spo
Designated Agent: Identify  Mayberry	by name, address (phone number - o		nepreseritat	Leadership FAC 3po
Designated Agent: Identify  Mayberry  Full Name	by name, address (phone number – o		nepreseritat	Leadership FAC 3po
Designated Agent: Identify  Mayberry  Full Name	by name, address (phone number – o		NC NC	28681
Designated Agent: Identify  Mayberry  Full Name	by name, address (phone number – of Ryan, , , )  134 Wittenburg Springs Dr  Taylorsville	ptional)		
Designated Agent: Identify  Mayberry  Full Name  Mailing Address	by name, address (phone number – of Ryan, , , )  134 Wittenburg Springs Dr  Taylorsville	ptional)	NC TATE A	28681
Designated Agent: Identify  Mayberry Full Name  Mailing Address  TITLE OR POSITION Candidate  Candidate  Banks or Other Depositor	by name, address (phone number – op, Ryan, , ,  134 Wittenburg Springs Dr  Taylorsville  CITY   ies: List all banks or other depositories	ptional)  ST  Telephone Nur	NC   TATE A	28681
Pesignated Agent: Identify  Mayberry Full Name  Mailing Address  TITLE OR POSITION Candidate Candidate Banks or Other Depositor Eafety deposit boxes or mail	by name, address (phone number – op, Ryan, , ,  134 Wittenburg Springs Dr  Taylorsville  CITY   ies: List all banks or other depositories	ptional)  ST  Telephone Nur	NC   TATE A	28681
Designated Agent: Identify  Mayberry Full Name  Mailing Address  TITLE OR POSITION Candidate  Candidate  Banks or Other Depositor	by name, address (phone number – op, Ryan, , ,  134 Wittenburg Springs Dr  Taylorsville  CITY   ies: List all banks or other depositories	ptional)  ST  Telephone Nur	NC   TATE A	28681
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Designated Agent: Identify  Mayberry Full Name  Mailing Address  TITLE OR POSITION Candidate  Candidate  Banks or Other Depositors afety deposit boxes or mails after the compository, etc.	by name, address (phone number – op, Ryan, , ,  134 Wittenburg Springs Dr  Taylorsville  CITY   ies: List all banks or other depositories	ptional)  ST  Telephone Nur	NC   TATE A	28681
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