



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-1

September 27, 2012

SUSAN C. RAGLAND, TREASURER  
LIVEFREEWS  
310 ARBOR ROAD  
WINSTON-SALEM, NC 27104

**Response Due Date**  
**11/01/2012**

IDENTIFICATION NUMBER: C00527960

REFERENCE: STATEMENT OF ORGANIZATION

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following 3 item(s):

- ✓ 1. Your committee failed to select a type of committee on Line 5. For further guidance on the question of type of committees, please refer to 11 CFR §100.5. Please amend your Statement of Organization to clarify this discrepancy. *PAC e No connected organization - several individuals have joined together*
- ✓ 2. Any affiliated or connected organization must be identified on your Statement of Organization. For further guidance on affiliated committees and connected organizations, please refer to 11 CFR §§100.5(g) and 100.6. If there are no other committees or organizations with which you share control or financing, please indicate "None" on Line 6. If you do share control or financing with other committees or organizations, please indicate their names, addresses, and relationships on Line 6. (11 CFR §102.2) *NONE*
- 3. Your committee failed to designate a campaign depository on Line 9. Please be advised that each registered political committee must designate a campaign depository or depositories. The committee must maintain at least one checking account or transaction account at one of the depositories. Please amend your Statement of Organization (FEC Form 1) to disclose the committee's depository. (11 CFR § 102.2(a)(1)(vi) and 11 CFR §103.2) *WELLS FARGO*

**Please note, you will not receive an additional notice from the Commission on this matter.** Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action

12030900259

c

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED Office Use Only

2012 OCT 10 PM 4:51  
12FE4MS  
FEC MAIL CENTER

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

LIVE FREE WS

ADDRESS (number and street)

C/O SUSAN C RAGLAND

(Check if address is changed)

310 ARBOR RD

WINSTON-SALEM

CITY

NC

STATE

27104

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

LIVEFREEWS@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

10 / 06 / 2012

3. FEC IDENTIFICATION NUMBER

000527960

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

SUSAN C. RAGLAND

Signature of Treasurer

*Susan C. Ragland*

Date

10 / 06 / 2012

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 Only

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

FEC FORM 1  
(Revised 06/2012)

12030900260

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

NO CONNECTED ORGANIZATION; SEVERAL INDIVIDUALS HAVE JOINED TOGETHER

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

12030900261

C

Write or Type Committee Name

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

NONE

Mailing Address

Grid for 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

Grid for full name

Mailing Address

Grid for mailing address

Title or Position

CITY

STATE

ZIP CODE

Grid for title or position

Telephone number

Grid for telephone number

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

SUSAN C RAGLAND

Mailing Address

310 ARBOR ROAD

WINSTON-SALEM

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

336-725-2264

12030900262

C

C

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

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.

WELLS FARGO BANK

Mailing Address

418 S STRATFORD ROAD

[Grid for Mailing Address Line 2]

WINSTON-SALEM NC 27103

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

12030900263

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

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Ex Ground* Shipping Date  
10/8/12  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

  
 PREPARER

*10/11/12*  
 DATE PREPARED

12030900264