

2002 JUN -5 A 10:22

**FEC  
FORM 1**

**STATEMENT OF  
ORGANIZATION**

(See instructions)

Office Use Only

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

Graham South Carolina Victory Committee Inc.

ADDRESS (number and street)

P.O. Box 11579



(Check if address  
is changed)

Columbia SC 29211

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE

05 24 2002

3. FEC IDENTIFICATION NUMBER ▶

C

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 Clarence Davis

Signature of Treasurer

*Clarence Davis*

Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-8530  
Local 202-684-1100

**FEC FORM 1**  
(Revised 1/01)

5. TYPE OF COMMITTEE (Check One)

- (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 \_\_\_\_\_

(d)  This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

(e)  This committee is a separate segregated fund.

(f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee (See attachment for additional joint fundraising participant)

Lindsay Graham for Senate \_\_\_\_\_

Mailing Address P.O. Box 1455  
337 By Pass 123  
Seep SC 29679

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Joint Fundraising Participant \_\_\_\_\_

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

Write or Type Committee Name

Graham South Carolina Victory Committee, Inc.

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 Allen Haywood

Mailing Address 3904 Barrett Dr  
Suite 205  
Raleigh NC 27609

Title or Position Assistant Treasurer CITY RALEIGH STATE NC ZIP CODE 27609

Telephone number 919-571-8773

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 Clarence Davis

Mailing Address 1330 Lady Street  
Keenan Building Third Floor  
Columbia SC 29201

Title or Position Treasurer CITY COLUMBIA STATE SC ZIP CODE 29201

Telephone number 803-255-9583

Full Name of Designated Agent Allen Haywood

Mailing Address PO Box 17826  
Raleigh NC 27619

Title or Position Assistant Treasurer CITY RALEIGH STATE NC ZIP CODE 27619

Telephone number 919-571-8773

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.

B a n k o f A m e r i c a

Mailing Address

1 3 0 G e r v a i s S t r e e t

C o l u m b i a S C 2 9 2 0 1

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

**Statement of Organization  
Attachment**

South Carolina Republican Party  
1508 Lady Street  
P.O. Box 21765  
Columbia, SC 29201

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 6-5-02
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JL1</i> PREPARER	6-5-02 DATE PREPARED