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FEC FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full) [ ] (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

SECOND CONGRESSIONAL DISTRICT REPUBLICAN EXEC CMTE

ADDRESS (number and street) 2616 DARTMOUTH DRIVE

[ ] (Check if address is changed) FAYETTEVILLE NC 28304 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) [ ] (Check if address is changed) lindev@aol.com

COMMITTEE'S WEB PAGE ADDRESS (URL) [ ] (Check if address is changed) www.ncgop2

2. DATE 12 6 2012

3. FEC IDENTIFICATION NUMBER C 00528539

4. IS THIS STATEMENT [ ] NEW (N) OR [X] 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 S DEVORE

Signature of Treasurer [Handwritten Signature] Date 12 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.

12030980273

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 **SUB** (National, State or subordinate) committee of the **REP** (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

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Write or Type Committee Name

SECOND CONGRESSIONAL DISTRICT REPUBLICAN EXEC CMTE

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

NONE

Mailing Address

Grid for mailing address, city, state, and zip code.

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 JOYCE COTTEN

Mailing Address 1221N PEA RIDGE RD

Grid for address, city, state, and zip code.

PITTSBORO

NC

27312

Title or Position

CITY

STATE

ZIP CODE

PRESIDENT

Telephone number 919-542-4709

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 LINDA S DEVORE

Mailing Address 2616 DARTMOUTH DRIVE

Grid for address, city, state, and zip code.

FAYETTEVILLE

NC

28304

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 910-484-8948

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Full Name of Designated Agent

[ ]

Mailing Address

[ ]

[ ]

[ ]

CITY

STATE

ZIP CODE

Title or Position

[ ]

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.

BRANCH BANKING & TRUST COMPANY

Mailing Address

5137 COLLEGE CENTER

[ ]

FAYETTEVILLE

NC

28311

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[ ]

Mailing Address

[ ]

[ ]

[ ]

CITY

STATE

ZIP CODE

12030980276

Federal Election Commission  
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*[Signature]*  
 PREPARER  
 (3/2005)

12/11/12  
 DATE PREPARED

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