

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
FEC MAILCENTER

2024 AUG 7 AM 11:34
Office Use Only

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

12FE4M5

HELM FOR CONGRESS

ADDRESS (number and street)

PO Box 32

- ☐ (Check if address is changed)

Pfafftown

CITY ▲

NC

STATE ▲

27049

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

- ☐ (Check if address is changed)

info@helmforcongress.com

Optional Second E-Mail Address

helm@swissmail.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

- ☐ (Check if address is changed)

https://helmforcongress.com

2. DATE

07 / 31 / 2024

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

Marshall T. HELM

Signature of Treasurer

Marshall T. Helm

Date

07 / 31 / 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
Use
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

Todd Helm

Candidate Party Affiliation

CON

Office Sought:

☒ House☐ Senate☐ President

State

NC

District

10

- (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

1.

2.

C C

2024-08-07 10:04:29

HELM FOR CONGRESS

_____ - _____

ZIP CODE ▲

Marshall T. Helm

PO BOX 32

Pfafftown

Wc

|2|7|0|4|0|

ZIP CODE ▲

11-11-11

Marshall T Helm

Р о б о т 3 2

Pf aff fown

Wc

27040.

ZIP CODE ▲

Treasurer

336-582-8857

Full Name of
Designated
Agent

Karen Helm

Mailing Address

PO Box 32

Pfafftown

NC

27090

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Assistant Treasurer

Telephone number

336-653-1333

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.

TRUIST

Mailing Address

2080 VILLAGE LINK Road

Winston Salem

NC

27106

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

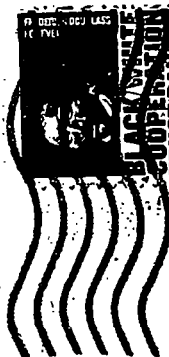
CITY ▲

STATE ▲

ZIP CODE ▲

HELMFORCONGRESS
P.O. Box 32
Pfafttown, NC 27040

GREENSBORO NC 270
PIEDMONT TRIAD AREA
1 AUG 2024 PM 5 L



**BLACK/WHITE:
COOPERATION/
TRUST/DANGER/
FLIGHT/FAITH/
COURAGE/RISK/
DEFIANCE/HOPE/
UNDERGROUND:
RAILROAD/USA**

RECEIVED
FEC MAIL CENTER
2024 AUG -7 AM 11:34

To : Federal Election Commission
1050 First Street, NE
Washington, DC 20463

山崎、

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 8/7/24
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	<div style="display: flex; justify-content: space-between;"> Shipping Date Date of Receipt </div> <div style="display: flex; justify-content: flex-end; align-items: center;"> Next Business Day Delivery <input type="checkbox"/> </div>
<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
PREPARER MP (4/2023)	8/7/24 DATE PREPARED

2024-08-07 PM 00:00:00