**FEC** 

Only

# STATEMENT OF

PAGE 1 / 11 -

**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) North Carolina Democratic Party - Federal PO Box 1926 ADDRESS (number and street) (Check if address is changed) Raleigh 27602 NC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address compliance@ncdp.org is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00165688 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 Chaney, Deniese, , Date 80 28 2023 Signature of Treasurer Chaney, Deniese, , , 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

FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the cand	didate information below.)
(b) This committee is an authorized committee, and is NOT a principal calinformation below.)	mpaign committee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Se	State MN enate President District
(c) This committee supports/opposes only one candidate, and is NOT an	authorized committee.
Name of Candidate	
Party Committee:	
(d) X This committee is a STA (National, State or subordinate) committee of the	DEM (Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected orga	anization on line 6.) Its connected organization is as
Corporation Corporation w/o Capita	I 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, are committee. (i.e., nonconnected committee)	nd is NOT a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify spo	onsor 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 committees/organizations, at least one of which is an authorized comm	•
(j) This committee collects contributions, pays fundraising expenses and committees/organizations, none of which is an authorized committee of	
Committees Participating in Joint Fundraiser	
1.	C
	C

1	FEC Form 1 (Revised 0	2/2009)		Page <b>3</b>
٧	/rite or Type Committee Name		- 1	
		emocratic Party - Federa		
6.	-	rganization, Affiliated Committee, Joint I	Fundraising Representative, or L	eadership PAC Sponsor
	NC State Party Victor	'y Fund 		
	Mailing Address	430 S. Capitol Street, SE		
		Washington	DC   2	20003
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization X Affiliated Organization	Joint Fundraising Representative	Leadership PAC Spons
7.	Custodian of Records: Identi	ify by name, address (phone number option	onal) and position of the person in po	ossession of committee
	Chaney, De	eniese, , ,		
	Full Name	,P.O. Box 1926		
	Mailing Address			
		Raleigh	NC 2	7602
		CITY A	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number 919	_ 821 2777
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	he treasurer of the committee; and	the name and address of
	Full Name Chaney, De	eniese, , ,		
	of Treasurer	<sub>1</sub> P.O. Box 1926		
	Mailing Address			
		Raleigh	NC 2	7602
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number 919	_ 821 _ 2777

FEC Form	I (Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent	Jackson, Sue, , ,		
Mailing Address	PO Box 1926		
	Raleigh	NC L	27602
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Asst, Treasurer		one number 919	
	<b>Depositories:</b> List all banks or other depositories in which the exes or maintains funds.	committee deposits fund	s, holds accounts, rents
Name of Bank, [	Depository, etc.		
	North State Bank		
Mailing Address	6200 Falls of Neuse Road		
	Raleigh	NC NC	27609
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, [	Depository, etc.		
	Amalgamated Bank		
Mailing Address	275 Seventh Avenue		
	New York	NY NY	10011
	CITY ▲	STATE ▲	ZIP CODE ▲

	- 11	
Page	of 11	

h). <b>Joint Fundraisir</b>	ig i di licipani.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Dollars for Democrat	Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	430 S. Capitol Street, SE		
	Washington 	DC DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	d Organization X Affiliated Committee Joy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
		oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	sint Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Tries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Tries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

D	11 ء۔	
Page	of ''	

1. 2. 3. 4. Name of Any Connected Organ  Democratic Grassroots Vice	nization, Affiliated Committee, Joint Fettory Fund	FEC ID number  FEC ID number  FEC ID number  FEC ID number  FEC ID number	C C C c, or Leadership PAC Sponsor
3. 4. Name of Any Connected Organ		FEC ID number	C
A. Name of Any Connected Organ		FEC ID number	С
Name of Any Connected Organ			
Name of Any Connected Organ		undraising Representative	, or Leadership PAC Sponsor
		undraising Representative	, or Leadership PAC Sponsor
Democratic Grassroots Vic	tory Fund		
Mailing Address	0 South Capitol Street, SE		
Wa	ashington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected Organ	nization Affiliated Committee X	Joint Fundraising Representa	ative Leadership PAC Spons
Full Name			
Mailing Address			
L			
TITLE OR POSITION ▼	CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	-   -

_		11	
Page	of		

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
_	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
BIDEN VICTORY FU	JND 		
Mailing Address	430 SOUTH CAPITOL STREET SE		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Jo  fy by name, address (phone number – optional)	int Fundraising Representa	ative Leadership PAC Sp
		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY    pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY    pries: List all banks or other depositories in which aintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY    pries: List all banks or other depositories in which aintains funds.	STATE A  Telephone Number	ZIP CODE A

D	11 ء۔	
Page	of ''	

(h). <b>Joint Fundraising</b>	Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected (	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
BATTLEGROUND SO	UTH		
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
	WASHINGTON	l DC l	20003
Relationship:	CITY ▲	STATE A	ZIP CODE A
			211 0002 2
	Organization Affiliated Committee X Joby name, address (phone number – optional)	int Fundraising Representa	Leadership PAC Spor
		int Fundraising Representa	Leadership PAC Spor
Designated Agent: Identify		int Fundraising Representa	Leadership PAC Spor
Designated Agent: Identify  Full Name   _   _   _		int Fundraising Representa	Leadership PAC Spor
Designated Agent: Identify  Full Name   _   _   _		int Fundraising Representa	Leadership PAC Spor
Designated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)	sint Fundraising Representation	Leadership PAC Spor
Designated Agent: Identify  Full Name   _   _   _	by name, address (phone number – optional)		

	4.4	
Page	of ''	

h). <b>Joint Fundrais</b> i	3		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
FRIENDS OF STAT	E DEMOCRATIC PARTIES		
Mailing Address	114 BEAUCHAMP LANE		
	LAFAYETTE	LA LA	70506
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X June of the state of	oint Fundraising Represent	ative Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Ident			Leadership PAC Sp
esignated Agent: Ident			Leadership PAC Sp
esignated Agent: Ident			Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white inintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white inintains funds.	STATE A  Telephone Number	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white inintains funds.	STATE A  Telephone Number	ZIP CODE A

	4.4	
Page	of <sup>11</sup>	

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
JEFF JACKSON VIC	TORY FUND		
Mailing Address	611 PENNSYLVANIA AVE SE		
	NUM 143		
	WASHINGTON	DC	20003
Datationality	CITY A	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Join	at Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Join	at Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee X Join fy by name, address (phone number – optional)	st Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Join fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee X Join fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee X Join fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A

		4.4	
Page	of	11	

5(g) or (h).	Joint Fundraising	Participant:			
1.			FE0	C ID number	C
2.			FE0	C ID number	C
3.			FE	C ID number	C
4.			FE0	C ID number	C
6. <b>Name</b>	of Any Connected C	Prganization, Affiliated Committee, Join	t Fundraising	Ponrocontative	or Leadership BAC Spansor
	OH PA VICTORY		t i unuiaising	пергезептатіч	, or Leadership PAO Oponsor
	Mailing Address	600 PENNSYLVANIA AVE SE			
		#15180			
		WASHINGTON		DC	20003
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	X Joint Fundra	ising Representa	Leadership PAC Sponsor
8. Desig	nated Agent: Identify	by name, address (phone number – opti	onal)		
Fu	ıll Name				
	ıll Name				
M	ailing Address	CITY A		STATE A	ZIP CODE A
M		CITY A	Telephon	STATE A e Number	ZIP CODE <b>A</b>
М Т 	ailing Address			e Number	
M. T	ailing Address	es: List all banks or other depositories in		e Number	
9. Banks safety Name	ailing Address  TITLE OR POSITION  s or Other Depositori	es: List all banks or other depositories in		e Number	
9. Banks safety Name	ailing Address  TITLE OR POSITION  s or Other Depositori deposit boxes or main of Bank, sitory, etc.	es: List all banks or other depositories in		e Number	
9. Banks safety Name	ailing Address  TILE OR POSITION  s or Other Depositori deposit boxes or main of Bank,	es: List all banks or other depositories in		e Number	
9. Banks safety Name	ailing Address  TITLE OR POSITION  s or Other Depositori deposit boxes or main of Bank, sitory, etc.	es: List all banks or other depositories in		e Number	