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FEC
FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

The Constitutional Republic

ADDRESS (number and street)

10716 Sugar Point Dr NW

(Check if address
is changed)

Federal Dam

CITY ▲

MD

STATE ▲

56691

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

Patrick7denniss87@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

2. DATE

04/04/2026

3. FEC IDENTIFICATION NUMBER ▶

C00829796

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

Samuel L Smith

Signature of Treasurer

Date

06/24/2026

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
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Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530

FEC FORM 1
(Revised 03/2022)

2025 RELEASE UNDER E.O. 14176

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

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. _____

C _____

2. _____

C _____

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Write or Type Committee Name

The Constitutional Republic Party

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization 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

[Empty grid lines for full name]

Mailing Address

[Empty grid lines for mailing address]

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

[Empty grid lines for title or position]

Telephone number

[Empty grid lines 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

Samuel L Smith

Mailing Address

115 Riverside Dr

Sebeka

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

218-298-4120

NONDISCRIMINATION NOTICE

Full Name of Designated Agent

Patrick Dennis

Mailing Address

10216 Sugar Point Dr NW

Federal Dam

MA

56641

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Vice Chair

Telephone number

218-537-7871

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.

Old National Bank

Mailing Address

PO Box 718

Evansville

IN

47705

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

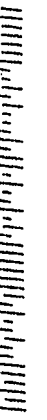
Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

NON-PROFIT ORGANIZATION



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1050 First Street N.E.
Washington D.C.
20463

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FEDERAL ELECTION COMMISSION

NONPROFIT ORGANIZATION

UNIVERSITY MICROFILMS INTERNATIONAL

Federal Election Commission		
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