Coble – Ellmers Majority Committee

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2012 JUL 17 AM II: 59 FEC MAIL CENTER

July 12, 2012

Federal Election Commission 999 E Street, NW Washington, DC 20463

Reference: FORM1 – Coble – Ellmers Majority Committee

The Coble – Ellmers Majority Committee takes great care to ensure that all reporting requirements are met.

Please accept this replacement filing of the Coble – Ellmers Majority Committee's FORM 1. After contacting the Federal Election Commission in regards to the original FORM 1 that was mailed by certified mail on June 26th 2012 and was recorded as delivered on July 2nd 2012 but never processed, the Coble – Ellmers Majority Committee was advised to resubmit the enclosed FORM 1.

If you have any questions, please feel free to contact me at (919) 889-1817.

Sincerely

Collin McMichael

Treasurer

Coble – Ellmers Majority Committee

Post Office Box 97275

Raleigh, North Carolina 27624

FEC FORM 1

STATEMENT OF ORGANIZATION

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FORM 1		ORGANIZATION			FEC Mindelline CFNTER			
NAME OF COMMITTEE (in	ı full)	(Check i			ple:If typing, type he lines.	12FE4M	many in the same of a many is	
COBLE - E	LLME	RS MAJ	ORITY	CO	MMITTEE	1 1 1 1 1		لـــا
	<u> </u>					1 1 1 1 1		Ш
ADDRESS (number a	nd street)	PO BOX 97275	1111					لـــا
(Check if a					<u> </u>	<u> </u>		Ш
is changed)		RALEIGH				NC	27624	Ш
			C	CITY		STATE	ZIP CODE	
COMMITTEE'S E-MA (Check if is change	address	S (Please provide CEJFC@cman	-	-mail addr	ess)			L L
COMMITTEE'S WEB	PAGE ADD							
(Check if is change		NONE			<u> </u>			
2. DATE 0	K i	2012						
3. FEC IDENTIFIC	CATION NU	MBER	C.	osaaganoogan				
4. IS THIS STATE	MENT 💥	NEW (N)	OR		AMENDED (A)			
I certify that I have of	examined thi	s Statement and	to the best	of my kr	nowledge and belief	it is true, corre	ect and complete.	
Type or Print Name	of Treasurer	Collin A McMic	hael	7				
Signature of Treasure	er <u>C</u>		· M	e_			22 2012	¥ .
NOTE: Submission of	•	•			ect the person signing		to the penalties of 2 U.S.C. §43	37g.
Office Use Only				F	For further information Federal Election Commiss Foll Free 800-424-9530 Focal 202-694-1100		FEC FORM 1 (Revised 02/2009)	

5.

		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 Cand	e of lidate	
	lidate Affiliati	Office State on Sought: House Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Cand	e of lidate	
Pari	y Con	nmittee:
(d)		This committee is a (National, State (Democratic, Republican, etc.) Party.
Poli	tical A	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.)
Join	t Func	draising 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.
	Com	mittees Participating in Joint Fundraiser
	1.	COBLE FOR CONGRESS FEC ID number C C00198796
	2.	RENEE ELLMERS FOR CONGRESS COMMITTEE FEC ID number C C00471896
	3.	FEC ID number C
	4.	FEC ID number C

Write or Type Committee Nam	е
COBLE - ELLM	MERS MAJORITY COMMITTEE
6. Name of Any Connected	Organizacion, Affiliated Committee, Joint Fundrasing Representative, or Leadership PAC Sponsor
NONE	
Mailing Address	
	CITY STATE ZIP CODE
Relationship: Connected	ed Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
 Custodian of Records: Ide books and records. 	entify by name, address (phone number optional) and position of the person in possession of committee
1	//cMichael
Full Name L_1_i	PO Box 97275
Mailing Address	
	Raleigh : NC 27624
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 919 - 889 - 1817
 Treasurer: List the name ar any designated agent (e.g., 	nd address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).
Full Name Collin A M	IcMichael
Mailing Address	PO Box 97275
	Raleigh NC 27624 - I STATE ZIP CODE
Title or Position Treasurer	Telephone number 919 - 889 - 1817

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
			<u> </u>
	CITY	STATE	ZIP CODE
Title or Position	To To	elephone number	J- <u> </u>
9. Banks or Other Department Safety deposit boxes Name of Bank, Department Name of Bank, Department 9. Banks or Other Department Safety deposit boxes		the committee deposits funds	s, holds accounts, rents
B	B&T		
Mailing Address	6659 Falls of Neuse Rd		
	Raleigh	NC 2	7615
	CITY	STATE	ZIP CODE
Name of Bank, Depo	ository, etc.		
L		<u> </u>	<u> </u>
Mailing Address			
			<u> </u>
	CITY	STATE	ZIP CODE

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate it	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirm	nation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received-from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
EN	7/17/12
(3/2005)	DATE PREPARED