Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Duty Honor Victory PAC PO BOX 97275 ADDRESS (number and street) (Check if address is changed) **RALEIGH** 27624 NC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address DHVPAC@cmandco.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00874560 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 McMichael, Collin,, McMichael, Collin, , , Date 03 27 2024 Signature of Treasurer 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

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	TYPE OF COMMITTEE:				
	Candidate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate information below.)					
	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	Name of Candidate				
	Candidate Office State Party Affiliation Sought: House Senate President District	_			
	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 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	3 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 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.)				
	This committee is an independent expenditure-only political committee (Super PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.					
	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 politic committees/organizations, none of which is an authorized committee of a federal candidate.					
	Committees Participating in Joint Fundraiser				
	1C				
	2. C				

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W	rite or Type Committee Name				
	Duty Honor Victo	ry PAC			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor HARRIGAN, PAT, , ,				
	Mailing Address	PO BOX 97275			
		RALEIGH NC 2	27624		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative	X Leadership PAC Sponso		
·.	Custodian of Records: Identi books and records.	ry by name, address (phone number optional) and position of the person in po	ossession of committee		
	McMichael,	Collin, , ,			
	Full Name				
	Mailing Address	PO Box 97275			
		Raleigh NC	27624		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number			
3.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and ssistant treasurer).	the name and address of		
	Full Name McMichael,	Collin, , ,			
	of Treasurer	PO Day 07075			
	Mailing Address	PO Box 97275			
		Raleigh NC	27624		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	919 Telephone number			

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Full Name of Designated Agent	<u>.</u> 1				
Mailing Address					
. J					
		1			
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲			
	Telephone number				
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, D	epository, etc.				
	Truist Bank	1			
Mailing Address	9111 Litchford Rd				
Ü					
	Raleigh	27615			
	CITY ▲ STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲ STATE ▲	ZIP CODE ▲			