FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVEN

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FEC MAIL CENTER

				Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Spence Campbe	ell for Congress	<u> </u>	<u> </u>	
		<u> </u>	<u> </u>	
ADDRESS (number and street)	PO Box 2583			ليسيسنين
(Check if address is changed)	Hendersonville		NG 2	8793
	(CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one e-	mail address)	•	•
(Check if address is changed)	spen150@bel	llsouth net		
COMMITTEE'S WEB PAGE AD	DRESS (URL)	Cid. is 1983's the first course you	otto 20 e. t	والمسهور والمحادث والمحادث والمحادث والمحادث
(Check if address is changed)	www.spencec	ampbell com	t de la	
2. DATE 08" / #	2011, 1 oca		· ;	
3. FEC IDENTIFICATION N	UMBER C			TALL MICH.
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	·	
I certify that I have examined to	his Statement and to the best	of tny knowledge and belief it	is true, correct an	d complete.
Type or Print Name of Treasure	Louis Lunard	oni		·
Signature of Treasurer	Som Luma	~ Chan	Date 08	04° (2011)
NOTE: Submission of false, erron	eous, or incomplete information of			penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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		COMMITTEE	
	didate	re Committee: This committee is a principal campaign committee. (Complete the candidate information below.)	
(a)			
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	e the candidate
Name Cand		Charles Spencer Campbell Jr.	
Cand	lidate	Office	State NC
Party	Affiliati	tion Rep Sought: X House Senate President	District 11
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	jeg e ^{eee} in € inseed:
Name Cand	-		
Part	y Con	mmittee:	
(d)			nocratic, ublican, etc.) Party.
Polit	ical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
		Corporation . Corporation w/o Capital Stock	bor Organization
		Membership Organization . Trade Association Co	operative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregormittee. (i.e., nonconnected committee)	gated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Com	nmittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number C	

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FEC FORM I (NEVIS	sed 02/2009)	rage 3				
Write or Type Committee N	lame					
Spence Camp	Spence Campbell for Congress					
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor				
Mailing Address						
	CITY STATE	ZIP CODE				
		¬				
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor				
	Identify by name, address (phone number - optional) and position of the person in	n possession of committee				
books and records.						
Full Name	ıiş Lunardoni					
Mailing Address	PO Box 2583					
Walling Address		· · · · · · · · · · · · · · · · · · ·				
	Handersonville	- 				
	Hendersonville NC 28	,,,95 - -				
Title or Position	CITY STATE	ZIP CODE				
₁Treasurer	. 1828 1	1606 12791				
i jeasulei	Telephone number 828,	_ [696,				
8. Treasurer: List the name	and address (phone number optional) of the treasurer of the committee; and the	o name and address of				
any designated agent (e.g		e name and address of				
Full Name	is Lunardoni					
of Treasurer						
Mailing Address	PO Box 2583					
		ليبينين				
	Hendersonville NC 28	793				
Till a Barto	CITY STATE	ZIP CODE				
Title or Position		. 696 - 278 1				
	Telephone number					

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		_	
Full Name of Designated Agent			
Mailing Address			
			
	CITY	STATE	ZIP CODE
Title or Position		phone number	J-LJ-L
Banks or Other Depos safety deposit boxes or Name of Bank, Deposito		e committee deposits fund	s, holds accounts, rents
Firs	st Citizens Bank		1-1-1-1-1-1-1-1-
Mailing Address	PO Box 749		
	Hendersonville	NC 2	8793 0749 _
	[Hendersonville	NC 2	28793
Name of Bank, Deposito	CITY	ے سے سے	
Name of Bank, Deposito	CITY	ے سے سے	
Name of Bank, Deposito	CITY	ے سے سے	
ليا	CITY	ے سے سے	
لبا	CITY	ے سے سے	

(3/2005)

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