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FEC Form 1 (Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 JOHN ROSS HENDRIX

Candidate Party Affiliation _____ Office Sought: House ☒ Senate _____ President _____ State NC District _____

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) ☐ This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.
- (e) ☐ This committee is a separate segregated fund.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

Corporation Corporation w/o Capital Stock Labor Organization
Membership Organization Trade Association Cooperative

Write or Type Committee Name

Hendrix For Senate Campaign

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

John Ross Hendrix

Mailing Address

301 E Cornwall RdCaryNC27511

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

919-815-1522

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 TreasurerJohn Ross Hendrix

Mailing Address

301 E Cornwall RdCaryNC27511

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

919-815-1522Full Name of
Designated
Agent

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

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.

NONE at this time

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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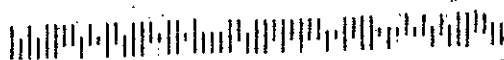
ZIP



(420) 22301

Secretary of the Senate
Office of Public Records
Box 5109

Alexandria, Va 22301-0109



NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7118
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

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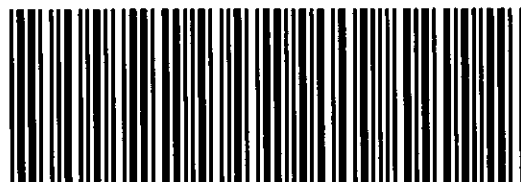
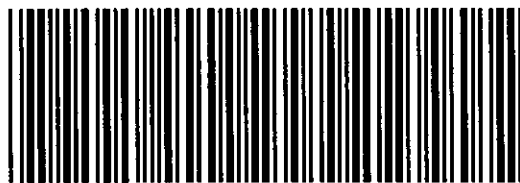
PREPARER

RD

DATE PREPARED

11-06-07

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