

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

08 MAY 14 PM 1:27 AD

Office use only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines

12FE4M5

North Carolina Federal Senate Committee

ADDRESS (number and street)

PO Box 75103

(Check if address is changed)

Washington

DC

20013

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

rjentgens@nrsc.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2026754730

2. DATE

MM / DD / YYYY 05 / 14 / 2008

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

X

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

Robert Jentgens

Signature of Treasurer

[Handwritten Signature]

Date

MM / DD / YYYY 05 / 14 / 2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2003)

28020234448

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 _____

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 _____

- (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

ELIZABETH DOLE COMMITTEE INC

Mailing Address PO BOX 2918

 RALEIGH NC 27602
 CITY ▲ STATE ▲ ZIP CODE ▲

Relationship JF Participant _____

Type of Connected Organization:

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

2802023449

Write or Type Committee Name

North Carolina Federal Senate Committee

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 **Robert Jentgens**

Mailing Address **PO BOX 75103**

Washington **DC** **20013**

Title or Position ▼ **Treasurer** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Telephone number **202** - **675** - **6000**

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 **Robert Jentgens**

Mailing Address **PO BOX 75103**

Washington **DC** **20013**

Title or Position ▼ **Treasurer** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Telephone number **202** - **675** - **6000**

Full Name of Designated Agent **William K Ozanus**

Mailing Address **PO BOX 75103**

Washington **DC** **20013**

Title or Position ▼ **Assistant Treasurer** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Telephone number **202** - **675** - **6000**

28020234450

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.

Wachoiva Bank

Mailing Address

1753 Pinnacle Dr

3rd Floor

McLean

VA

22102

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

28020234451

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.

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Mailing Address

425 SECOND STREET NE

WASHINGTON

DC

20002

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

JF Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

28020234452

Designated Agent

[ADDITIONAL]

Full Name |_____

Mailing Address _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

_____ Telephone number _____

28020234453

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

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DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

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Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 05-14-08

28020234454

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