39520497 270

FORM 1

STATEMENT OF **ORGANIZATION**

FECTIAL DERTER

2007 SEP 5 101 9:39

			<u> </u>	JIRCH USH ONLY
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
CommitTEE :	Tion FlierCT J	joih minigi iJi iCA	RITER:	
<u> </u>		<u> </u>		
ADDRESS (number and street)	136 019 BiliRid	isong Court		
(Check if address is changed)	Summer.F.1.e	P.L.d.	WC 2	7358 - 7222
COMMITTEE'S E-MAIL ADDRE		CITY ▲	STATE A	ZIP CODE ▲
CACAISISIOICIEY,	4 h 10101 COM			
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
<u> </u>		1-		
			<u> </u>	
COMMITTEE'S FAX NUMBER	8 2007			
3. FEC IDENTIFICATION N	UMBER ► C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined to Type or Print Name of Treasure Signature of Treasurer		t of my knowledge and belief it T. CARTER		d complete.
NOTE: Submission of false, error	•	may subject the person signing to		e penalties of 2 U.S.C. §437g.
Office Use Only		For further Information of Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2003)

•	FEC Form	1 (Revised 02/2003)				Page 2
5.	TYPE OF CO	MMITTEE (Check Or	ne)				
	(a) V	This committee is a	principal campaig	n committee. (Con	nplete the candida	ite information belov	v.)
	• •		authorized comm	nittee, and is NOT	a principal campa	aign committee. (Co	mplete the candidate
	Name of Candidate	Johnny	Jeff	RIEIGI CAI	RITER .		1111111
	Candidate Party Affiliation	DEM	Office Sought:	House	Senate	President	State N C
	(c)	This committee supp	orts/opposes only	y one candidate, a	and is NOT an aut	horized committee.	
	Name of Candidate	Johnny	Jeff	<u>e.∈141 CA1</u>	R _I T _I E _I R _I	11111	
	(d)	This committee is a					(Democratic, Republican, etc.) Party.
	(e) V	This committee is a	separate segrega	ited fund.			
			orts/opposes moi	re than one Feder	al candidate, and	is NOT a separate :	segregated fund or party
6.	Name of Any	Connected Organiz	ation or Affiliate	d Committee		· · · · · · · · · · · · · · · · · · ·	
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		<u> </u>	 		 		
		L_				ليا ليا	<u> </u>
				CITY A		STATE A	ZIP CODE A
	Relationship	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.) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) This committee supports/opposes only one candidate, and is NOT an authorized committee. This committee is a principal campaign committee of the Republican, etc.) Part This committee is a separate segregated fund. This committee is a separate segregated fund. This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or pert committee. CITY A STATE A ZIP CODE A					
	Type of Conne	cted Organization:					
	Corpo	ration	C	corporation w/o Ca	pital Stock	Labor Orga	anization
	Memb	ership Organization	Т	rade Association		Cooperative	e
_					_	 	

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1	FEC Form 1 (Revised 0	2/2003)		Page 3
٧	Vrite or Type Committee Name			
	CommiTTE	TO ELECT John	ny J. CARTI	ER
7.	Custodian of Records: Identification books and records.	ify by name, address (phone number - o		
	Full Name Uohin	INIG JEIFFIRIEIGI CAIR		
	Mailing Address	13,6,69, BiliRidsoniqu	COURT	
			 	
		Summer fileLd	IIII WC	27358-722
	Title or Position▼	CITY A	STATE ▲	ZIP CODE A
	CAN DI CLAITIE		Telephone number 33	16-643-2955
8.	Treasurer: List the name and any designated agent (e.g., a	l address (phone number – optional) of the ssistant treasurer).	e treasurer of the committee	and the name and address of
	Full Name of Treasurer	INIG JEIGFIRELY CAL	PITIER	ليبيبينا
	Mailing Address	136091 BijiRidsioniq	COLLETI	ليبيبي
		Summer FileLid	WC WC	27358-722
	Title or Position▼	CITY ▲	STATE ▲	Z!P CODE ▲
	CANDI CATE		Telephone number 3	341-16431-12,955
	Full Name of Designated Agent	ing JeififiriEigi iCA	R.T.E.R.	
	Mailing Address	13609 Bij rdsong	CIONIRITI	
		Summerfield.	we we	27358 - 7222
	Title or Position▼	CITY ▲	STATE ▲	ZIP CODE ▲
	CHINDI INDITIE		Telephone number 2	36]-16431-12955

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE OF (check only one)

11a 11b 11c 11d 11d 13b 14

		12 13a 13b 14 15
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may not be sold or used by any sing the name and address of any political committed	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
	D ELECT Johnny J.	CARTER
Full Name (Last, First, Middle Initial) A CARTER, Johnny,	J	Date of Receipt
Mailing Address Birdsong Co	XLVI	08 27 2007
Summer field	State Zip Code NC 27358	
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer W. Skiams Plumsing Heati,	Occupation ng + Air General Manager	, 5,000,00
Receipt For: Primary	Election Cycle-to-Date 5,000.00	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)
Full Name (Last, First, Middle Initial)		Date of Receipt
B. Mailing Address	(1 M(, 0 D , Y Y Y Y	
City	State Zip Code	<u> </u>
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	7
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)
Full Name (Last, First, Middle Initial)		Photo of Marian
C. Mailing Address		Date of Receipt
City	State Zip Code	
FEC ID number of contributing federal political committee.	C .	Amount of Each Receipt this Period
Name of Employer	Occupation	5 5
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)
	umber only)	5,000,00
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ZIP CODE A

STATE A

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, Depos	itory, etc.																		
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			CITY	^					S	ATE .	A			Z	PC	COD	E 🔺	1	
Name of Bank, Depos	itory, etc.																		
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CITY A

(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked USPS First Class Mail **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked** USPS Express Mail Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** 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 or Postmarked Other (Specify):

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