RECEIVED FEC MAILCENTER 2024 APR 22 AM 11: 13

Yellow Dog PAC 13301 Pine Harbor Rd. Charlotte, NC 28278

April 12, 2024

Federal Election Commission 1050 First Street, NE Washington, DC 20463

To whom it may concern:

Please find enclosed an amended FEC Form 1 for the Yellow Dog Political Action Committee (FED ID. # C00552919). This replaces the PAC treasurer. Although the entity normally files electronically, this is being provided in paper form because the original Form 1 filing was done via paper and is not available in our FECFile database.

Sincerely,

**Brent Caldwell** 

B. Colsh

Treasurer

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**FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

FEC MAILCENTER 2024 APR 22 AMII: 13

				O	flice Use Only
NAME OF     COMMITTEE (in full)	(Check if n is changed		cample: If typing, type er the lines.	12FE4M5	
YELLOW 306					
<u> </u>		111	<u> </u>		
ADDRESS (number and street)	13301	PINE	HARBOR R	$\mathfrak{d}$	
(Check if address is changed)					
is sharges,	CITY A	$\mathcal{T}_{i}\mathcal{T}_{i}\mathcal{E}_{i-1}$		STATE A	8,2,7,8,
COMMITTEE'S E-MAIL ADDRE	SS				
(Check if address is changed)	ye//00	ن الار والح	151/21918912	1/16019	
	Optional Second E	-Mail Address	<b>9</b>		
COMMITTEE'S WEB PAGE ADI	DRESS (URL)				
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		1 1 1			
2. DATE 34 /	1 2024	]			
3. FEC IDENTIFICATION NU	JMBER ▶	Cool	52919		
4. IS THIS STATEMENT	NEW (N)	OR J	AMENDED (A)		
I certify that I have examined th	nis Statement and to	the best of my	y knowledge and belief it	is true, correct and	I complete.
Type or Print Name of Treasure	· Brent	_ Co	-Buell		
Signature of Treasurer	5 Carlo	4		Date 0 4	71° 2024
NOTE: Submission of false, errone			subject the person signing t		penalties of 52 U.S.C. §30109.
Office Use Only			For further information of Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 03/2022)

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	n below.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee information below.)	ee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	President State District
(c) 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	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line	e 6.) Its connected organization is a
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	Cooperative
(f) This committee supports/opposes more than one Federal candidate, and is NOT a se committee. (i.e., nonconnected committee)	parate segregated 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.)	)
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts	counts (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 procommittees/organizations, at least one of which is an authorized committee of a feder	
(j) This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, none of which is an authorized committee of a federal cand	·
Committees Participating in Joint Fundraiser	
1. [	C
	C

FEC Form 1 (Revised 03/2022)

Write o	or Type Committee Name				
S. Nan	ne of Any Connected O	rganization, Affiliated Committee, Join	t Fundraising Represe	entative, or l	Leadership PAC Sponsor
L					
لــا					
Mail	ling Address				
		CITY ▲		TATE ▲	ZIP CODE ▲
Rela	ationship: Connected	Organization Affiliated Organization	Joint Fundraising R		- Harris
	stodian of Records: Iden ks and records.	ify by name, address (phone number op	otional) and position of t	he person in	possession of committee
Full	Name BRE	YT CALDUELL	111111	LLL	
Mail	ling Address	13701 PZNE HA	1, R 90, R, R)		
		CHARGO TTE		M'c	26,27,6]-
		CITY ▲	S	TATE ▲	ZIP CODE ▲
Title	or Position ▼ REASURER		Telephone numbe	er L	J-L
	asurer: List the name ar designated agent (e.g.,	d address (phone number optional) of assistant treasurer).	f the treasurer of the c	ommittee; an	d the name and address of
	Name Treasurer	NT MICHARIC CAL	-DNELL		
Mail	ling Address	1/3301 PINE HI	4.R.BOR RD		
		CHARLOTTE		W <sub>C</sub>	28,2,78,-
Titla	e or Position ▼	CITY ▲	S	TATE ▲	ZIP CODE ▲
	REASURER	`	Telephone numb	er 221	31-4241-5789

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FEC Form 1	(Revised 03/2022)	Page 4
Full Name of Designated Agent		
Mailing Address	1	1 1 1 1 1 1 1 1 1
		!-!
		710 0005 4
Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
	Telephone number	-
safety deposit box	Depositories: List all banks or other depositories in which the committee deposits funds, es or maintains funds.	holds accounts, rents
Name of Bank, De	epository, etc.	
ř	WELLS PARGO	
Mailing Address	420 MONT60MERY ST	
	SAN FRANCISCO KA 19	4104-
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, De	pository, etc.	
1		
Mailing Address		
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		<u>, , , ]-</u> ] <u>, , ,</u> ,
	CITY ▲ · STATE ▲	ZIP CODE ▲

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FFC	Form	15	(Revised	03/2022

## Optional Supplemental Information for Lines 5(i) or (j), 6, 8 and/or 9

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or(j). Joint Fundrais	ing Participant:		
 I	mg raiticipant.	FEC ID number	С
1.		FEC ID number	
2.			
3.		FEC ID number	
4.		FEC ID number	C
Name of Any Connecte	d Organization, Affiliated Committee, Joint	Fundraising Representative	e, or Leadership PAC Sponsor
L			
Mailing Address			
Relationship:	CITY ▲	. STATE A	ZIP CODE ▲
	ted Organization Affiliated Committee	Joint Fundraising Represent	<del>) - 1</del>
	tify by name, address (phone number – optic		
Designated Agent: Iden	tify by name, address (phone number – optic		
	tify by name, address (phone number – optic		
Full Name	tify by name, address (phone number – optic		
Full Name	tify by name, address (phone number – optic		
Full Name	CITY	nal)	
Full Name	CITY	nal)	
Full Name Mailing Address  TITLE OR POSITIO	CITY ▲  ctories: List all banks or other depositories in	nal)  STATE   Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposit	CITY ▲  ctories: List all banks or other depositories in	nal)  STATE   Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositions and deposit boxes or Name of Bank,	CITY ▲  ctories: List all banks or other depositories in	nal)  STATE   Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositions and Bank, Depository, etc.	CITY ▲  ctories: List all banks or other depositories in	nal)  STATE   Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositions and Bank, Depository, etc.	CITY ▲  ctories: List all banks or other depositories in	nal)  STATE   Telephone Number	ZIP CODE A

fed Elector commerces, NE 1050 FAME Street, NE Washington, DC 20463



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