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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Truth and Justice Fund Company 1209 Essex Drive ADDRESS (number and street) (Check if address is changed) Wilmington 28403 NC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS reporting@capcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 31 2022 C00734657 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT 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. Merritt, John, , , Type or Print Name of Treasurer Merritt, John, , , [Electronically Filed] 01 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected 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.	
(5)			areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

		- 0
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Write or Type Committee Name		
	ce Fund Company	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
NONE		
Mailing Address		
Mailing Address		
	CITY STATE ZIF	CODE
	CITY STATE ZIF	CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Leader	ship PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number optional) and position of the person in posses	sion of committee
Merritt, Jol	hn.	
Full Name		
Mailing Address	1209 Essex Drive	
	Wilmington NC 28403	-
Title or Position	CITY STATE ZIP	CODE
Title of Position	CITY STATE ZIP	CODE
Treasurer	Telephone number	
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
Full Name Merritt, Joh		
of Treasurer		
Mailing Address	1209 Essex Drive	
	Wilmington	
Title or Decition	CITY STATE ZIP	CODE
Title or Position Treasurer		-
	receptione number	

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE Z	ZIP CODE
Title or Position		1 1
	Telephone number	
safety deposit bo Name of Bank, I		
safety deposit bo	oxes or maintains funds.	
safety deposit bo Name of Bank, I	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington DC 20005	
safety deposit bo Name of Bank, I	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington CITY STATE	ZIP CODE
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington CITY STATE	
Name of Bank, I	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington CITY STATE	
Name of Bank, I	Depository, etc. Amalgamated Bank 1825 K Street, NW Washington CITY STATE	