

FEC
FORM 1

STATEMENT OF
ORGANIZATION

SECRETARY OF THE SENATE

10 OCT 18 PM 12:57

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

THE ELAINE MARSHALL COMMITTEE

ADDRESS (number and street)

324 SOUTH WILMINGTON STREET

(Check if address
is changed)

RALEIGH

NC

27601

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address
is changed)

INFO@ELAINEMARSHALL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

WWW.ELAINEMARSHALL.COM

2. DATE

10 / 09 / 2010

3. FEC IDENTIFICATION NUMBER

C00466763

4. 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.

Type or Print Name of Treasurer THOMAS MILLS

Signature of Treasurer

Thomas Mills

Date

10 / 09 / 2010

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
Use
Only

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

FEC FORM 1
(Revised 02/2009)

10020784651

5. TYPE OF COMMITTEE

Candidate Committee:

- (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

ELAINE FOLK MARSHALL

Candidate Party Affiliation

DEM.

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

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 6.) Its connected organization is a:
 - Corporation
 - Membership Organization
 - Corporation w/o Capital Stock
 - Trade Association
 - Labor Organization
 - Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

- 1. **CONWAY FOR SENATE** FEC ID number **C00460766**
- 2. **ELAINE MARSHALL COMMITTEE** FEC ID number **C00466763**
- 3. FEC ID number **C**
- 4. FEC ID number **C**

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Write or Type Committee Name

THE ELAINE MARSHALL COMMITTEE

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

KENTUCKY/NORTH CAROLINA VICTORY

Mailing Address

426 C ST. NE

WASHINGTON

DC

20002

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

SHOAIB JILLANI

Mailing Address

2550 GLENWOOD AVENUE

RALEIGH

NC

27601

Title or Position

CITY

STATE

ZIP CODE

DEPUTY TREASURER

Telephone number

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

THOMAS MILLS

Mailing Address

1301 N. GREENSBORO ST.

CARRBORO

NC

27510

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

10020784653

Full Name of Designated Agent

SHOAIB JILLANI

Mailing Address

2550 GLENWOOD AVENUE

RALEIGH

CITY

NC

STATE

27608

ZIP CODE

Title or Position

DEPUTY TREASURER

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.

WACHOVIA BANK

Mailing Address

150 FAYETTEVILLE ST.

RALEIGH

CITY

NC

STATE

27601

ZIP CODE

Name of Bank, Depository, etc.

BANK OF AMERICA

Mailing Address

730 15TH STREET, NW

WASHINGTON

CITY

DC

STATE

20005

ZIP CODE

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NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
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United States Senate

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