

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL Committee to Elect Lewis Carter	☐ (Check if name is changed)	2. DATE 5-23-96
(b) Number and Street Address 904 Homestead RD #3	☐ (Check if address is changed)	3. FEC Identification Number
(c) City, State and ZIP Code Chapel Hill, NC 27516		4. Is This Report An Amendment? ☐ YES ☒ NO

FEDERAL ELECTION COMMISSION
Mar 28 9 02 AM '96

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
Lewis Suiter Carter | Candidate Party Affiliation
Gov's Party | Office Sought
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 _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- ☐ (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 a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Type of Connected Organization ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative		

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	Mailing Address	Title or Position
Lewis Suiter Carter	904 Homestead RD #3	Custodian of Records

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	Mailing Address	Title or Position
Lewis Suiter Carter	904 Homestead RD #3	Treasurer

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.	Mailing Address and ZIP Code
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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 Lewis Suiter Carter	SIGNATURE OF TREASURER Lewis Suiter Carter	DATE 5-23-96
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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.

For further information contact:
Federal Election Commission
1-800-424-9530
Local 202-219-3420

FESAN045

FEC FORM 1
(revised 1/87)

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

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☒ First Class Mail

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and Registration

DATE OF RECEIPT

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Records

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☐ Other (Specify):

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and/or DATE OF RECEIPT

Jess

PREPARER

5-24-96

DATE PREPARED