FEC

Only

STATEMENT OF

PAGE 1 / 12 •

ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. North Carolina Republican Party 1506 Hillsborough St ADDRESS (number and street) (Check if address is changed) Raleigh 27605-1831 NC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address treasurer@ncgop.org is changed) Optional Second E-Mail Address greg.fornshell@ncgop.org COMMITTEE'S WEB PAGE ADDRESS (URL) www.ncgop.org (Check if address is changed) DATE 2024 C00038505 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT NEW (N) 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 Oakes, Martin, , Oakes, Martin, , , Date 05 80 2024 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

FE	C Form 1 (Revised 03/2022) Page 3	2
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	
	Candidate	ļ.
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	-
	Name of Candidate	
	Party Committee: (d) X This committee is a STA (National, State or subordinate) committee of the REP (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	on is a:
	Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association 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 pacommittee. (i.e., nonconnected committee)	arty
	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 (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, at least one of which is an authorized committee of a federal candidate.	ical
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, none of which is an authorized committee of a federal candidate.	ical
	Committees Participating in Joint Fundraiser	
	1	

ı	FEC Form 1 (F	Revised 02/2009)	Page 3
V	Vrite or Type Committe		
		lina Republican Party	
6.	-	nected Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
	11th Congress	sional District Republican Party	
	Mailing Address	PO Box 1913	
		Bryson City 2	8713-4913
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Co	onnected Organization X Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Record books and records.	ds: Identify by name, address (phone number optional) and position of the person in po	ossession of committee
	Full Name	ornshell, Gregory, , ,	
	Mailing Address	1506 Hillsborough St	
		Raleigh NC 2	7605-1831
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Custodian of Records	Telephone number	_ 828 6423
8.		name and address (phone number optional) of the treasurer of the committee; and nt (e.g., assistant treasurer).	the name and address of
		Dakes, Martin, , ,	
	of Treasurer	₁ 8057 Lucky Creek Ln	
	Mailing Address		
		Denver NC 2	8037-8004
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		077
	Treasurer	704 Telephone number	

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent	Oakes, Martin, , ,	
Mailing Address	8057 Lucky Creek Ln	
	Denver NC	28037-8004
Title or Position ▼	CITY ▲ STAT	E ▲ ZIP CODE ▲
Treasurer	Telephone number	704 - 277 - 3226
	Depositories: List all banks or other depositories in which the committee deposes or maintains funds.	osits funds, holds accounts, rents
Name of Bank, D	epository, etc.	
	First Citizens	
Mailing Address	2005 Clark Avenue	
	Raleigh	27605
	CITY ▲ STATE	E ▲ ZIP CODE ▲
Name of Bank, D	epository, etc.	
	First Citizens	<u> </u>
Mailing Address	2005 Clark Avenue	
	Raleigh	27605
	CITY ▲ STATE	E ▲ ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Spon
NC Republican Party			
Mailing Address	1506 Hillsborough St		
	Raleigh	, , , NC	27605-1831
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC S
Connected		Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization X Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	d Organization X Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify	Affiliated Committee Joint y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee Joint y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	Affiliated Committee Joint y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposition and the proposition of the	Affiliated Committee Joint y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:			
1.		FEC ID nu	mber	С
2.		FEC ID nu	mber	С
3.		FEC ID nu	mber	С
4.		FEC ID nu	mber	С
Budd NC Victory Fur	Organization, Affiliated Committee, Joint Fund 2028	ndraising Represe	entative,	or Leadership PAC Spon
Mailing Address	PO Box 97275			
	Raleigh		NC	27624-7275
Relationship:	CITY ▲	STA	ATE 🔺	ZIP CODE ▲
Connecte		oint Fundraising Rep	oresentat	ive Leadership PAC Sp
Connecte	d Organization Affiliated Committee X J		presentat	ive Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X J		presentat	ive Leadership PAC Sp
esignated Agent: Identi	d Organization Affiliated Committee X J		presentat	Leadership PAC Sp
esignated Agent: Identi	d Organization Affiliated Committee X J		presentat	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X J Ty by name, address (phone number – optional)			Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee X J Ty by name, address (phone number – optional)		Ē A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the content of t	Affiliated Committee y by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STAT Telephone Number	TE A	ZIP CODE A
esignated Agent: Identification of Bank, repository, etc.	Affiliated Committee X J Ty by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds.	STAT Telephone Number	TE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
Edwards Victory Fur	IQ 		
Mailing Address	PO Box 97275		
	Raleigh	NC	27624-7275
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	Affiliated Committee X Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Grow The Majority	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	ve, or Leadership PAC Spon
Mailing Address	228 S Washington Street		
	Suite 115		
	Alexandria	VA VA	22314-
Dalatianahina	OITV.	STATE A	ZIP CODE ▲
	CITY ▲ Organization Affiliated Committee Affiliated Committee by name, address (phone number – optional)	oint Fundraising Represen	tative Leadership PAC Sp
Connected	Organization Affiliated Committee X J	oint Fundraising Represen	Leadership PAC Sp
Connected esignated Agent: Identify	Organization Affiliated Committee X J	oint Fundraising Represen	Leadership PAC Sp
esignated Agent: Identify Full Name	Organization Affiliated Committee X J	oint Fundraising Represen	Leadership PAC Sp
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esignated Agent: Identify Full Name	Organization Affiliated Committee X John by name, address (phone number – optional)	oint Fundraising Represen	Leadership PAC Sp
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esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in whitintains funds. Bridge Bank	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Mailing Address	228 S Washington St		
	Ste 115	<u> </u>	<u> </u>
	Alexandria	VA	22314-5404
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joi	int Fundraising Represent	ative Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi		FEC ID number	С
1.		FEC ID number	С
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Protect The House 2			
	PO Box 30844		
Mailing Address			
	Bethesda	MD	20824-0844
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page	of	12
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h). Joint Fundrais	ing randipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
Trump 47 Committe	e 		
Mailing Address	PO Box 509		
Mailing Address			
	Arlington		22216 0500
	Arlington	VA	22216-0509
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Join	nt Fundraising Represent	Leadership PAC Sp
		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
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esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint F	Fundraising Representati	ve, or Leadership PAC Spons
Trump Victory			
Mailing Address	c/o Red Curve Solutions		
	138 Conant Street, 2nd Floor		
	Beverly	MA	01915-1666
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
coignated Agent. Identif	by name, address (phone number – option	al)	
Full Name	by name, address (phone number – option:	al)	
	by name, address (phone number – options	al)	
Full Name	by name, address (phone number – options	al)	
Full Name	CITY A	al) STATE	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main and the safety deposit	CITY A ries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	its funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY A ries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	its funds, holds accounts, rents