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04/07/2024 00 : 28

STATEMENT	OF
ORGANIZATI	ON

FEC FORM 1		STATEMEI ORGANIZ		Off	PAGE 1 / 4
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Rhea County		ocratic Party			
ADDRESS (number ar	nd street)	P.O. Box 845			
(Check if a is changed					
Ĵ	,	Dayton │ │ │ │ │ │ │ │ │ │ │ CITY ▲		TN 373.   STATE ▲	21 
COMMITTEE'S E-MA		SS			
× ◀ (Check if a is changed		agates39@yahoo.com			
		Optional Second E-Mail Ad corecauses@gmail.com	ldress		
COMMITTEE'S WEB	ddress	DRESS (URL)			
2. DATE 04		D / Y Y Y Y 2024			
3. FEC IDENTIFICATION NUMBER ► C C00765594					
4. IS THIS STATEM	IENT	NEW (N) OR	× AMENDED (A)		
I certify that I have e	examined th	is Statement and to the best	t of my knowledge and belief it	t is true, correct and	complete.
Type or Print Name of	of Treasurer	Gates, Ann, Elizabeth, ,			
Signature of Treasure	er Gates	, Ann, Elizabeth, ,		Date 04	07 / Y Y Y Y 2024
NOTE: Submission of	false, errone		may subject the person signing TION SHOULD BE REPORTED		penalties of 52 U.S.C. §30109
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FE	C Form 1	(Revised 03/2022)	Page <b>2</b>				
5.	TYPE O	F 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 t information below.)	he candidate				
	Name Candid						
	Candid Party A	late Office Affiliation Sought: House Senate President	State				
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District				
	(0)						
	Name of Candidate						
	Party C	Committee:					
	<sup>(d)</sup> X	This committee is a SUB (National, State DEM (Democrat	iic, n, etc.) Party				
	Political Action Committee (PAC):						
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is a:				
		Corporation Corporation w/o Capital Stock	Organization				
		Membership Organization Trade Association Coope	rative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregat committee. (i.e., nonconnected committee)	ed 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 (Hybrid R	PAC).				

## Joint Fundraising Representative:

(i) 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.
(j) 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.
2.

In addition, this committee is a Lobbyist/Registrant PAC.

	FEC Form 1 (Revised 02	2/2009)						Page <b>3</b>
V	Vrite or Type Committee Name							
	Rhea County De	mocrat	ic Pa	rty				
6.	Name of Any Connected Or	ganization,	Affiliated	I Commi	ittee, Joint	Fundraising Re	presentative, or Le	eadership PAC Sponsor
	Mailing Address							
				CITY	<b></b>		STATE ▲	ZIP CODE

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee

Joint Fundraising Representative

Leadership PAC Sponsor

Affiliated Organization

books and records.

Connected Organization

Relationship:

Gates, Ann	Elizabeth, ,
Full Name	
Mailing Address	239 Channel Pointe
	Dayton     TN     37321       -     -     -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
RCDP Treasurer	1 1 1 1 1 1 1 1 1 5760   1 1 1 1 1 1 1 1 1 1 1

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	Gates, Ann, Elizabeth, ,
Mailing Address	239 Channel Pointe
	Dayton TN 37321
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	<b>7</b>
RCDP Treasurer	1 1

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Full Name of Designated Agent	JONES, SHERI, Lyn, ,	
Mailing Address	141 FAIRMONT DR	
	DAYTON TN 37321	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position	·	
Chairman	Image: Telephone number 423 - 331 - 3932	

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.

	South East Bank		
Mailing Address	3995 Rhea County Hwy		
	Dayton	TN 3732	1
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, [	Depository, etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE