FEC

Only

STATEMENT OF

PAGE 1 / 4

ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) 11TH CONGRESSIONAL DISTRICT REPUBLICAN PARTY PO Box 1042 ADDRESS (number and street) (Check if address is changed) horse shoe 28742 NC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address wally.booth3@gmail.com is changed) Optional Second E-Mail Address wally.booth3@proton.me COMMITTEE'S WEB PAGE ADDRESS (URL) https://ncgop11.org/ (Check if address is changed) DATE 2024 C00165142 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. Type or Print Name of Treasurer Booth, Wallace, W, , !!! Booth, Wallace, W, , !!! 01 29 2024 Signature of Treasurer Date 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

EC	orm 1 (Revised 03/2022)	age 2					
	PE OF COMMITTEE:						
Candidate Committee:							
(a) This committee is a principal campaign committee. (Complete the candidate information below.)							
(This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candid information below.)	date					
	Name of Candidate '''' '''' '''' ''' ''' ''' ''' ''' ''						
	Candidate Office Sought: House Senate President District District Senate District District Senate District Senate District Distr	ate NC					
(This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate						
ļ	rty Committee:						
-	This committee is a SUB (National, State or subordinate) committee of the REP (Democratic, Republican, etc.) Positive of the REP	arty					
ı	litical Action Committee (PAC):						
(This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organ	ization is a:					
	Corporation Corporation w/o Capital Stock Labor Organizat	tion					
	Membership Organization Trade Association Cooperative						
	In addition, this committee is a Lobbyist/Registrant PAC.						
(This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund committee. (i.e., nonconnected committee)	or party					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
(This committee is an independent expenditure-only political committee (Super PAC).						
	In addition, this committee is a Lobbyist/Registrant PAC.						
(This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).						
	In addition, this committee is a Lobbyist/Registrant PAC.						
•	int 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						
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	FEC Form 1 (Revised	02/2009)				 Page 3
٧	Vrite or Type Committee Nam	·				- 1390
	11TH CONGRE	SSIONAL DI	STRICT RE	PUBLICAN	I PARTY	
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
	NONE					
	Mailing Address					
			CITY A		STATE ▲	ZIP CODE ▲
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.					
		′allace, W, , !!!				
	Mailing Address	215 Forest Park CT				
		Pisgah Forest			NC L	28768
	Title or Position ▼		CITY ▲		STATE ▲	ZIP CODE ▲
	Treasurer			Telephone nun	nber 828	_ 620 _ 5388
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 Booth, W	/allace, W, , !!!				
	Mailing Address	215 Forest Park CT				

Pisgah Forest

Title or Position ▼

Treasurer

CITY

NC

STATE ▲

Telephone number

828

28768

ZIP CODE ▲

5388

620

FEC Form 1	(Revised 02/2009)		Page 4					
Full Name of Designated Agent		1 1 1 1 1 1 1						
Mailing Address								
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲					
		one number						
	Depositories: List all banks or other depositories in which the ces or maintains funds.	ommittee deposits fun	ds, holds accounts, rents					
Name of Bank, De	Name of Bank, Depository, etc.							
	United Community Bank							
Mailing Address	PO Box 1939							
	Bryson City	NC NC	28713					
	CITY ▲	STATE ▲	ZIP CODE ▲					
Name of Bank, De	Name of Bank, Depository, etc.							
	Wells Fargo Bank							
Mailing Address	53 Westridge Marketplace							
	Candler	NC	28715					
	CITY ▲	STATE ▲	ZIP CODE ▲					