

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

QUEEN ALYSSIA FOR UNITED STATES SENATE NORTH CAROLINA 2026

ADDRESS (number and street)

P.O. BOX 24861



(Check if address is changed)

RALEIGH

CITY ▲

NC

STATE ▲

27611

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address is changed)

queenalyssiaussnc26@gmail.com

Optional Second E-Mail Address

ALYSSIA@QUEENALYSSIANC.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address is changed)

QUEENALYSSIANC@COM

2. DATE

M M / D D / Y Y Y Y  
12 / 17 / 2025

3. FEC IDENTIFICATION NUMBER ►

C C00931063

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 HAMMOND, ALYSSIA, ROSE-KATHERINE, ,

Signature of Treasurer HAMMOND, ALYSSIA, ROSE-KATHERINE, ,

Date

M M / D D / Y Y Y Y  
12 / 17 / 2025

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  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

## 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 HAMMOND, ALYSSIA, ROSE-KATHERINE, ,

Candidate  
Party Affiliation

DEM

Office  
Sought:

☐

House

☒

Senate

☐

President

State

NC

District

00

- (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 ☐ 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 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.)

- (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:**

- (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.

C

2.

C

Write or Type Committee Name

## QUEEN ALYSSIA FOR UNITED STATES SENATE NORTH CAROLINA 2026

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

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☐ Connected Organization ☐ Affiliated Organization ☐ 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 HAMMOND, ALYSSIA, ROSE-KATHERINE, ,

Mailing Address P.O. BOX 24861

RALEIGH

NC

27611

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

CANDIDATE/TREASURER

Telephone number 919 - 964 - 3058

## 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 HAMMOND, ALYSSIA, ROSE-KATHERINE, ,

Mailing Address P.O. BOX 24861

RALEIGH

NC

27611

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

CANDIDATE/TREASURER

Telephone number 919 - 964 - 3058

Full Name of  
Designated  
Agent

HAMMOND, ALYSSIA, ROSE-KATHERINE, ,

Mailing Address

P.O. BOX 24861

RALEIGH

NC

27611

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

DESIGNATED AGENT

Telephone number

919

964

3058

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.

ATLANTIC UNION BANK

Mailing Address

702 OBERLIN RD.

SUITE 110

RALEIGH

NC

27605

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

: 97 'A -G7 9 @ @ B9 CI G 'H9 LH 'F9 @ H98 'HC '5 'F9 DCF HZ G7 < 98 I @ 'CF 'H9 A -N5 H -CB

Form/Schedule: F1N

Transaction ID :

HELLO FEC FILING COMMITTEE, MY NAME IS ALYSSIA ROSE-KATHERINE HAMMOND. IM RUNNING FOR UNITED STATES SENATE IN THE STATE OF NC FOR A 2ND TIME. MY CAMPAIGN WEBSITE IS STILL IN THE PROCESS OF BEING BUILT. SO I DONT WANT YOU TO GOOGLE FOR MY WEBSITE AND THINK IM A BOGUS CANDIDATE BECAUSE MY WEBSITE IS NOT AVAIALE AT THIS TIME. I ALSO WANTED TO KNOW WHEN IS THE DEADLINE FOR MY FIRST EXPENDITURES REPORT. LIKE BY WHAT DATE DO I HAVE TO REPORT HOW MUCH I RAISED OR SPENT. IS THERE A CALENDAR AVAILABLE ONLINE WHERE I CAN SEE WHEN FINANCIAL REPORTS SHOULD BE SUBMITTED? CAN YOU PLEASE LET ME KNOW IF ANY CORRECTIONS NEED TO BE MADE OF MY SUBMISSION. DOES ANYTHING NEED TO BE CHANGED DO I NEED TO ADD ANYTHING? YOU CAN EMAIL ME AT QUEENALYSSIAUSSNC26@GMAIL.COM OR CALL 919-343-4667 CAN YOU PROCESS MY FORM RELETAVILY QUICKLY BECAUSE I'M FILING A LITTLE BEHIND SCHEDULE THAN WHAT I WOULD HAVE NORMALLY LIKED TO FILE. CAN YOU PLEASE TELL ME IF ANYTHING IS INCORRECT IN A TIMELY FASHION SO I CAN MAKE AMMENDMENTS QUICKLY. CAN YOU PLEASE SEND ME A LETTER OR EMAIL SOMETHING NOTIFYING ME MY FILING HAS BEEN ACCEPTED OR APPROVED. CAN I AMMEND AND ADD TREASURERS, CUSTODIAN OF RECORDS, AND DESIGNATED AGENTS ONCE I GET PEOPLE TO FILL THOSE POSITIONS? THANK YOU IN ADVANCE. HAPPY HOLIDAYS!

Form/Schedule:

Transaction ID: