**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Nigel Bristow for Congress 922 NC 381 HWY ADDRESS (number and street) (Check if address is changed) Hamlet NC 28345 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address nigel683@gmail.com is changed) Optional Second E-Mail Address nigelbristowforcongress@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.nigelbristowforcongress.com/ (Check if address is changed) DATE 2023 C00863019 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 Amar, Vaishall,, 05 29 2024 Signature of Treasurer Amar, Vaishall, , , 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

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TYPE OF COMMITTEE:				
Candidate Committee:				
(a) X 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 candidate information below.)				
Name of Candidate Bristow, Nigel, William, ,				
Candidate Party Affiliation  DEM  Office Sought:  House  Senate  President	State NC District 09			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Biotriot			
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the Republication	atic, an, etc.) Party			
Political Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	cted organization is a:			
Corporation Corporation w/o Capital Stock Labor	Organization			
	erative			
In addition, this committee is a Lobbyist/Registrant PAC.				
This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee. (i.e., nonconnected committee)	ated 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	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.				
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				

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W	/rite or Type Committee Name		
	Nigel Bristow for	Congress	
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
	NONE		
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	ify by name, address (phone number optional) and position of the person in possess	sion of committee
	Bristow, Ni	gel, William, ,	
	Full Name		
	Mailing Address	922 NC 381 HWY	
		Hamlet	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Candidate		817   -   1081
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the nassistant treasurer).	ame and address of
	Full Name Amar, Vais of Treasurer	hall, , ,	
	Mailing Address	1519 Falls Road	
		Valdese NC 28690	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		729 6230

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Full Name of Designated Agent	Bristow, Nigel, William, ,			
Mailing Address	922 NC 381 HWY			
	Hamlet	NC 2834	5 	
Title or Decition -	CITY ▲	STATE ▲	ZIP CODE ▲	
Title or Position ▼ Assistant Treasur	er	ephone number 910 -	817 - 1081	
	Depositories: List all banks or other depositories in which these or maintains funds.	ne committee deposits funds, ho	lds accounts, rents	
Name of Bank, D	epository, etc.			
	Pinnacle			
Mailing Address	701 E Roosevelt Blvd			
	Suite 200A			
	Monroe	NC 28112	2	
	CITY ▲	STATE ▲	ZIP CODE ▲	
Name of Bank, Depository, etc.				
Mailing Address				
	CITY ▲	STATE ▲	ZIP CODE ▲	