PAGE 1/6 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Bruce John Kenneway, Independent President, November 2020 Using The Write In Vote 288 Union St Apt 103 ADDRESS (number and street) (Check if address is changed) Bangor 04401 ME CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS BruceKenneway@Gmail.com (Check if address is changed) Optional Second E-Mail Address |bjkenneway@yahoo.com COMMITTEE'S WEB PAGE ADDRESS (URL) BruceKenneway.com (Check if address is changed) DATE 2018 C00681205 FEC IDENTIFICATION NUMBER 3. 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. Kenneway, Bruce, John, Mr, Type or Print Name of Treasurer Kenneway, Bruce, John, Mr, [Electronically Filed] 06 18 2018 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

	EEO F -	1 (Paying 02/2000)	Pogo 2
		omm 1 (Revised 02/2009) OMMITTEE	Page 2
		Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below	۲.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Corinformation below.)	mplete the candidate
Nam Cano	e of didate	Kenneway, Bruce, John, Mr,	
	didate / Affiliati	on W Office Sought: House Senate X President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	segregated 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate	·
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	. ago 🗸
Bruce John Kenneway, Independent President, November 2020 Using The	Write In Vote
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	
NONE	
Mailing Address	
CITY STATE Z	IP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Lead	lership PAC Sponsor
. Custodian of Records: Identify by name, address (phone number optional) and position of the person in poss books and records.	ession of committee
Kenneway, Bruce, John, Mr, Full Name	1
288 Union St Apt 103	
Mailing Address	
Bangor , ME , 04401	
Title or Position CITY STATE Z	IP CODE
	08 7990
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	e and address of
Full Name Kenneway, Bruce, John, Mr, of Treasurer	
Mailing Address 288 Union St Apt 103	
Bangor ME 04401	
CITY STATE Z Title or Position	IP CODE
	08 7990

FEC Forn	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Kenneway, Bruce, John, ,	
Mailing Address	288 Union St Apt 103	
	Bangor ME 04401	<u> </u>
	CITY STATE ZIP	CODE
Title or Position		
	Depositories: List all banks or other depositories in which the committee deposits funds, holds ac xes or maintains funds. Depository, etc. Bangor Savings Bank	counts, rents
Mailing Address	871 Hammond St	
	Bangor ME 04402	
	CITY STATE ZIP	CODE
Name of Bank, D	Depository, etc.	
Mailing Address		
	CITY STATE ZIP	CODE

FEC Form 1S (Revised 02/2017)

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

Page ____ **of** ____

(h). Joint Fundraising		FEC ID number	С
1.		FEC ID number	
2.			C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected Or	ganization, Affiliated Committee, Joint Fund	draising Representativ	e, or Leadership PAC Spon
Mailing Address			
	<u> </u>		
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	y name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify b Kenneway, Full Name	y name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC S
esignated Agent: Identify b Kenneway,	y name, address (phone number – optional) Bruce, , Mr,	nt Fundraising Represent	Leadership PAC S
esignated Agent: Identify b Kenneway, Full Name	y name, address (phone number – optional) Bruce, , Mr, 288 Union St Apt 103		
esignated Agent: Identify b Kenneway, Full Name	y name, address (phone number – optional) Bruce, , Mr, 288 Union St Apt 103 Bangor	ME	04401
esignated Agent: Identify b Kenneway, Full Name	y name, address (phone number – optional) Bruce, , Mr, 288 Union St Apt 103 Bangor	MESTATE ▲	04401 ZIP CODE A
esignated Agent: Identify b Kenneway, Full Name Ling Address	y name, address (phone number – optional) Bruce, , Mr, 288 Union St Apt 103 Bangor CITY	MESTATE ▲	04401
esignated Agent: Identify b Kenneway, Full Name Mailing Address TITLE OR POSITION anks or Other Depositorie	y name, address (phone number – optional) Bruce, , Mr, 288 Union St Apt 103 Bangor CITY s: List all banks or other depositories in which	STATE A	04401 ZIP CODE A
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FEC Form 1S (Revised 02/2017)

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

Page ____ **of** ____

(g) or (h).	Joint Fundraising	g Participant:		
1.			FEC ID numb	er C
2.			FEC ID numb	er C
3.			FEC ID numb	er C
4.			FEC ID numb	er C
. Name	e of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representa	ative, or Leadership PAC Sponsor
	Mailing Address	1		
	Mailing Address			
	Dalaita a lata			
	Relationship:	CITY ▲	STATE	ZIP CODE A
. Desig	nated Agent: Identify	by name, address (phone number - optional)		sentative Leadership PAC Sponso
Fı	Kennewagull Name	by name, address (phone number – optional) y, Bruce, John, Mr, 288 Union St Apt 103		
Fı	Kennewa	y, Bruce, John, Mr,		
Fı	Kennewagull Name	y, Bruce, John, Mr, 288 Union St Apt 103		
Fı	Kennewagull Name	y, Bruce, John, Mr, 288 Union St Apt 103 Bangor	ME	04401
Fu	Kenneway ull Name lailing Address	288 Union St Apt 103 Bangor	ME STATE A	04401
Fu	Kenneway	288 Union St Apt 103 Bangor CITY		04401
Fu M	Kenneway ull Name lailing Address FITLE OR POSITION Candidate/President and ideate/President by deposit boxes or ma	288 Union St Apt 103 Bangor CITY ies: List all banks or other depositories in which	STATE A	04401 ZIP CODE A 207 - 408 - 7990
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Fu M	Kenneway ull Name	288 Union St Apt 103 Bangor CITY ies: List all banks or other depositories in which	STATE A	04401 ZIP CODE A 207 - 408 - 7990
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