PAGE 1 / 5

FEC FORM 1		STATEME ORGANIZ							Office	e Use O		GE 1 / 5	
NAME OF     COMMITTEE (in	n full)	(Check if name is changed)		nple:If typing the lines.	g, type	1	2FE	4M5					
KILEY ELE	CTIO	N VICTORY PA	AC.										
		19458 TREELAKE RD.											
ADDRESS (number a		5466 TREEFIRE RD.											
(Check if a is changed													
		GRANITE BAY  CITY ▲				l L	CA TATE	<b>_</b>	95746		- [	DE 🛦	
COMMITTEE'S E-MA	AIL ADDRE	SS											
(Check if a		DAVID@THEAGEN	CY.US	1 1 1 1	1 1 1			1	1 1		1 1	1 1	, 1
is changed	d)	Ontional Cocond E Mail A	ddraaa										
		Optional Second E-Mail A	laaress	1 1 1 1	1 1 1						1 1	1 1	. 1
(Check if a is changed													
2. DATE 00													
3. FEC IDENTIFIC	CATION NU	IMBER ▶ C	C0081832	3									
4. IS THIS STATEM	MENT	NEW (N) OR	×	AMENE	DED (A)								
I certify that I have e	examined th	is Statement and to the bes	st of my k	nowledge a	nd belief	f it is t	ue, c	orrect	and c	omplete	э.		
Type or Print Name	of Treasure	BAUER, DAVID, , ,											
Signature of Treasure	er <i>BAUE</i>	R, DAVID, , ,		[Electronicall <sub>]</sub>	y Filed]	Da	te	M 06	M /	22	/ Y	2022	Y
NOTE: Submission of	false, errone	ous, or incomplete informatio								enalties	of 52 l	J.S.C.	§30109
Office Use Only				For further in Federal Election Toll Free 800- Local 202-694	on Commi 424-9530		ot:			EC F			

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. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candic	date information below.)
(b) This committee is an authorized committee, and is NOT a principal cam information below.)	paign committee. (Complete the candidate
Name of Candidate	
Candidate Party Affiliation Office Sought: House Sen	ate President District
(c) This committee supports/opposes only one candidate, and is NOT an au	uthorized 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 organ	ization 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 committee. (i.e., nonconnected committee)	I is NOT a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify spon-	sor on line 6.)
(g) This committee is an independent expenditure-only political committee (S	Super PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-co	ontribution accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and discommittees/organizations, at least one of which is an authorized committee.	•
(j) This committee collects contributions, pays fundraising expenses and discommittees/organizations, none of which is an authorized committee of a	
Committees Participating in Joint Fundraiser	
1.	С
	C

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٧	Vrite or Type Comr	mittee Name	
	KILEY E	LECTION VICTORY PAC	
6.	=	connected Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
	Mailing Address	9458 TREELAKE RD	
		GRANITE BAY	5746
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Spons
7.	Custodian of Re	ecords: Identify by name, address (phone number optional) and position of the person in pords.	essession of committee
		BAUER, DAVID, , ,	
	Full Name		
	Mailing Address	9458 TREELAKE RD.	
		1	
		GRANITE BAY	5746
		Sit	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position	▼	
	Custodian of Rec	cords Telephone number 916	473 4298
8.		the name and address (phone number optional) of the treasurer of the committee; and agent (e.g., assistant treasurer).	the name and address of
	E 11 M	BAUER, DAVID, , ,	
	Full Name of Treasurer		
		<sub>1</sub> 9458 TREELAKE RD.	
	Mailing Address		
		GRANITE BAY CA 9	5746
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position		
	Treasurer	. 916	473     4298
	110000101	Telephone number	] - [

FEC <b>Form</b>	(Revised 02/2009)	Page <b>4</b>						
Full Name of	None, , , ,	J						
Designated Agent								
Mailing Address								
Title or Position	CITY ▲	STATE ▲ ZIP CODE ▲						
	Telephone	ne number						
Banks or Other safety deposit bo	<b>Depositories:</b> List all banks or other depositories in which the com xes or maintains funds.	mmittee deposits funds, holds accounts, rents						
Name of Bank, [	Name of Bank, Depository, etc.							
	CALIFORNIA BANK AND TRUST							
Mailing Address	550 SOUTH HOPE ST. #100							
	LOS ANGELES	CA 90071 -   -     -						
	CITY ▲	STATE ▲ ZIP CODE ▲						
Name of Bank, [	Depository, etc.							
Mailing Address								
	CITY ▲	STATE ▲ ZIP CODE ▲						

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' + H9 A = N5 H+ CB

Form/Schedule: F1A Transaction ID:

Additional affiliated committee

Form/Schedule: Transaction ID: