Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Jessica Cisneros For Congress 7305 San Dario Avenue Ste G ADDRESS (number and street) Box #317 (Check if address is changed) Laredo 78045 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jessica@jessicacisnerosforcongress.com (Check if address is changed) Optional Second E-Mail Address us@jessicacisnerosforcongress.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.jessicacisnerosforcongress.com (Check if address is changed) DATE 2019 C00709006 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. Cisneros, Jessica, , , Type or Print Name of Treasurer Cisneros, Jessica, , , [Electronically Filed] 09 19 2019 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	FEC Fo	orm 1 (Revised 02/2009) Page 2	
		COMMITTEE c 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.)	
	didate	Cisneros, Jessica, , ,	
	didate y Affiliatio	ion DEM Office Sought: X House Senate President District	=
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee: (National, State (Democratic,	
(d)		This committee is a committee of the committee of the Republican, etc.) Par	ty.
Poli	itical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is	s a:
		Corporation Corporation w/o Capital Stock Labor Organization	I
		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 parcommittee. (i.e., nonconnected committee)	rty
		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	draising Representative:	_
(g)		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.	
(h)		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.	
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number C	
	3.	FEC ID number	
	4.		П

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Write or Type Committee Nar		. 0
Jessica Cisner	os For Congress	
	Organization, Affiliated Committee, Joint Fundraising Representativ	e, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Represen	ntative Leadership PAC Sponso
 Custodian of Records: Id books and records. 	entify by name, address (phone number optional) and position of the	person in possession of committee
Flowers,	DeVeria, , ,	
Mailing Address	7305 San Dario Avenue Ste G	
Walling Address	Box #317	
	Laredo	78045
Title or Position	CITY STATE	ZIP CODE
Bookkeeper	Telephone number	
3. Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee assistant treasurer).	ee; and the name and address of
Full Name Cisneros of Treasurer	, Jessica, , ,	
Mailing Address	7305 San Dario Avenue Ste G	
	Box #317	
	Laredo	78045
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
	er Depositories: List all banks or other depositories in which the committee deposits funds, I boxes or maintains funds.	•
safety deposit b	Depository, etc. Amalgamated Bank 275 Seventh Avenue	
safety deposit b Name of Bank,	Depository, etc. Amalgamated Bank	
safety deposit b Name of Bank,	Depository, etc. Amalgamated Bank 275 Seventh Avenue	
safety deposit by Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York New York NY 1000	01
safety deposit by Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York NY 1000	01
safety deposit by Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York CITY STATE Depository, etc.	01
safety deposit by Name of Bank, Mailing Address Name of Bank,	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York CITY STATE Depository, etc.	01
safety deposit by Name of Bank, Mailing Address Name of Bank,	Depository, etc. Amalgamated Bank 275 Seventh Avenue New York CITY STATE Depository, etc.	01

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

Form/Schedule: F1N Transaction ID:

This amended FEC 1 is to make an adjustment to the mailing address.

Form/Schedule: Transaction ID: