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**FEC** 

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## STATEMENT OF

RECEIVED

(Revised 02/2009)

**ORGANIZATION** 2012 FEB 14 PM 1: 43 FORM 1 NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. ommittee to Elect Bill Jensen to Congress **BOX 400346** ADDRESS (number and street) (Check if address is changed) esperia CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) committeetoelectbilljensen@gmail.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) http://billjensen2012.com/ (Check if address is changed) DATE **FEC IDENTIFICATION NUMBER** IS THIS STATEMENT OR NEW (N) 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. Stephanie McGuire Type or Print Name of Treasurer Signature of Treasurer 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

Toll Free 800-424-9530

Local 202-694-1100

F	EC Fo	rm 1 (Revised 02/2009)	Page 2				
		OMMITTEE					
(a)	$\boxtimes$	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 Cand		William O'Neil Jensen, Jr.					
Cand Party	idate Affiliati	on REP Office	Oldio	CA 08			
(c)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.	Didiriot				
Name Cand			11111	!!			
			<del></del>				
(d)			Democratic, epublican, etc.)	Par			
Poli	tical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organizati	on is			
		Corporation Corporation w/o Capital Stock	Labor Organiza	tion			
		Membership Organization Trade Association	Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
<b>(f)</b>		This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or	pai			
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
.loini		fraising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two	or more politica	d			
		committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more penale	•			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more politica	1			
	Com	mittees Participating in Joint Fundraiser					
	1.						
	2.	FEC ID number C					
	3.	FEC ID number C					
	4.						

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FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	ne	
Committee to E	lect Bill Jensen to Congress	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative	ve, or Leadership PAC Sponsor
	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Represen	ntative Leadership PAC Sponsor
<ol> <li>Custodian of Records: Id books and records.</li> </ol>	entify by name, address (phone number optional) and position of the	person in possession of committee
Full Name Step	hanie McGuire MAGUIRE	
Tun Name	PO BOX 400346	
Mailing Address		<del></del>
	¡Hesperia , , , , , , , , , , , , , , , , , , ,	192340 1_10346
		[2-4.8]-[2-13]
Title or Position	CITY STATE	ZIP CODE
Bookkeeper	Telephone number	760 [887 [4418
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 Step	hanie McGuire MAGUIRE	
Mailing Address	PO BOX 400346	
	Hesperia CA STATE	923400346 ZIP CODE
Title or Position Treasurer	Telephone number	760, <sub> -</sub> 887, <sub> -</sub> 4418 , <sub> </sub>
<b>L</b>		

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Name of Bank, Depository, etc.

Mailing Address

12030741996

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CITY

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STATE

STATE

ZIP CODE

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Hand Delivered	Date of Receipt
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USPS Priority Mail	Postmarked
Delivery Confirmation™ or Sign	nature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
<u> </u>	Next Business Day Delivery
Received from House Records & Registration	Date of Receipt n Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
h	2/14/12
PREPARER	DATE PREPARED