FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Christina Bohannan for Congress P.O. Box 722 ADDRESS (number and street) (Check if address is changed) Iowa City 52244 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address Info@bohannanforcongress.com is changed) Optional Second E-Mail Address Jennifer@bohannanforcongress.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.bohannanforcongress.com (Check if address is changed) DATE 2023 C00787820 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT 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. Type or Print Name of Treasurer Fiihr, Jennifer,, Date 04 20 2024 Signature of Treasurer Fiihr, Jennifer, , , 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) 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 of Candidate Bohannan, Christina, , ,				
	Candidate Party Affiliation DEM Office Sought: House Senate President	State IA District 01			
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name of Candidate				
	Party Committee:				
	(d) This committee is a (National, State or subordinate) committee of the Republican, et	c.) 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.	organization is a:			
	Corporation Corporation w/o Capital Stock Labor Orga	ınization			
	Membership Organization Trade Association Cooperative	e			
	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 party committee. (i.e., nonconnected committee)				
	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 C				

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٧	Vrite or Type Committee Name				
		nan for Congress			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	Bohannan Victory Fu	nd 2024 			
	Mailing Address	5825 Waterbury Circle			
		1			
		Des Moines IA	50312		
		CITY ▲ STATE	E ▲ ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Repre			
		, contraction of the contract			
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Fiihr, Jennifer, , ,				
	Full Name				
	Mailing Address	5825 Waterbury Circle			
		Des Moines	50312		
		CITY ▲ STATE	E ▲ ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	515 - 229 - 3238		
8.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).				
	Full Name Fiihr, Jenni of Treasurer	fer, , ,			
	Mailing Address	5825 Waterbury Circle			
	, and the second				
		Des Moines IA	50312		
		CITY ▲ STATE	E ▲ ZIP CODE ▲		
	Title or Position ▼	2	3352 —		
	Treasurer		515 - 229 - 3238		

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Full Name of Designated			. 030			
Agent						
Mailing Address						
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲			
		e number				
	epositories: List all banks or other depositories in which the comes or maintains funds.	nmittee deposits funds,	holds accounts, rents			
Name of Bank, De	Name of Bank, Depository, etc.					
MidwestOne Bank						
Mailing Address	102 South Clinton Street					
	lowa City	IA 522	240			
	CITY A	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
L						
Mailing Address						
	CITY A	STATE ▲	ZIP CODE ▲			