Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Jeanne Hendricks for Congress PO Box 2243 ADDRESS (number and street) (Check if address is changed) Saint Cloud 56302 MNCITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address Jeanne@Hendricksformn.com is changed) Optional Second E-Mail Address Todd@Hendricksformn.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00866624 FEC IDENTIFICATION NUMBER 3. X 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. Type or Print Name of Treasurer Hendricks, Jeanne, , Date 03 28 2024 Signature of Treasurer Hendricks, Jeanne, . . 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) X 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 car information below.)	ndidate				
	Name of Candidate Hendricks, Jeanne, Marie, ,					
	Party Affiliation DEM Sought: X House Senate President	State MN District 06				
(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, etc.)) Party				
Political Action Committee (PAC):						
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	ganization is a:				
	Corporation Corporation w/o Capital Stock Labor Organi	ization				
	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 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.					
	(j) 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					

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Write or Type Committee Name							
6.		eanne Hendricks for Congress ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
	NONE						
	Mailing Address						
		CITY ▲	STATE ▲	ZIP CODE ▲			
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising	Representative	Leadership PAC Sponsor			
7.	Custodian of Records: Ident books and records.	fy by name, address (phone number optional) and position o	f the person in possess	sion of committee			
	Hendricks,	Jeanne, , ,					
	Full Name	1613 Utah Dr S					
	Mailing Address						
		Minneapolis	MN 55426				
	Till and Branks	CITY A	STATE ▲	ZIP CODE ▲			
	Title or Position ▼ Candidate		ı 952 ı ı	693 6540			
	Galladato	Telephone num	ber				
3.		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 Hendricks, of Treasurer	Jeanne, , ,		1			
		₁ 1613 Utah Dr S					
	Mailing Address						
		IMinneapolis	- MN - 55400				
			MN 55426				
	Title or Position ▼	CITY A	STATE ▲	ZIP CODE ▲			
		Telephone num	ber				

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Full Name of Designated Agent							
Mailing Address							
	CITY ▲	STATE ▲	ZIP CODE ▲				
Title or Position ▼							
		Telephone number					
safety deposit boxes or main	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.						
լUS Bank	LIS Rank						
Mailing Address	1817 Plymouth Road						
	Minnetonka	MN L	55305				
	CITY ▲	STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY ▲	STATE ▲	ZIP CODE ▲				