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FEC
FORM 1

STATEMENT OF
ORGANIZATION

Other Use Only

1. NAME OF
COMMITTEE (In Full)

(Check if name
is changed)

Exemptions: If typing, type
over the lines.

12 FEB 4 15

BRYAN KENNEDY FOR CONGRESS

ADDRESS (number and street)

823 N 2ND ST STE 103

(Check if address
is changed)

MILWAUKEE

WI

53203-1818

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

campaign@bk2004.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.bk2004.org

COMMITTEE'S FAX NUMBER

(262)-364-2057

2. DATE 08 08 2004

3. FEC IDENTIFICATION NUMBER ▶ C00385482

4. 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 RUTH PAGE JONES

Signature of Treasurer

Ruth Page Jones

Date 08 08 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5407g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only				
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-814-1133

FEC FORM 1
(Revised 07/2003)

FEC Form 1 (Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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

BRYAN, KENNEDY

Candidate Party Affiliation

DEM

Office Sought

House

Senate

President

State

WI

District

05

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(National, State or subordinate) committee of the

(Democratic, Republican, etc.) Party.

(d)

This committee is a

(e)

This committee is a separate segregated fund.

(f)

This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Write or Type Committee Name

BRYAN KENNEDY FOR CONGRESS

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name HEATHER HART KENNEDY

Mailing Address 5669 N. BETHNAUR LANE
GLENDALE WI 53209-1420

Title or Position ASST. TREASURER CITY GLENDALE STATE WI ZIP CODE 53209-1420

Telephone number (414) 438-1246

8. Treasurer: List the name and address (phone number - optional) of the treasurer of this committee, and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer RUTH PAGE JONES

Mailing Address 1251 S. 386 DANIEL DR
WAUKESHA WI 53189

Title or Position TREASURER CITY WAUKESHA STATE WI ZIP CODE 53189

Telephone number (262) 521-1403

Full Name of Designated Agent HEATHER HART KENNEDY

Mailing Address 5669 N. BETHNAUR LANE
GLENDALE WI 53209-1420

Title or Position ASST. TREASURER CITY GLENDALE STATE WI ZIP CODE 53209-1420

Telephone number (414) 438-1246

FEC Form 1 (Revised 02/2003)

8. 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.

GUARANTY BANK

Mailing Address

17901 W. BROWN DEER RD

MILWAUKEE

WI

53223

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

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<i>JA</i> PREPARER (5/2004)	8-20-04 DATE PREPARED