

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

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2023 JUN 12 AM 11:57  
Office Use Only

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

ROBERT J. JORDAN, 2024 COM

ADDRESS (number and street)

12722 Trask Ave

☐ (Check if address  
is changed)

GARDEN GROVE  
CITY

CA  
STATE

92843 - 3041  
ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

☒ (Check if address  
is changed)

robert.jordan2024.com

Optional Second E-Mail Address

campaign@robertjordan2024.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☒ (Check if address  
is changed)

www.robertjordan2024.com

RS

2. DATE 06 09 2022

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT



NEW (N)

OR

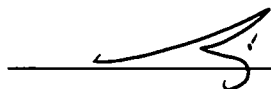


AMENDED (A)

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 Michael Allen Lings

Signature of Treasurer



Date

06

09

2022

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  
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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

**Candidate Committee:**

- [illegible]

(d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party

(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.)

1.  FEC ID number 

2.  FEC ID number 

3.  FEC ID number 

4.  FEC ID number 

Write or Type Committee Name

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 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

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

## 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  
of Treasurer

Mailing Address

Title or Position

TREASURER

Telephone number

Full Name of  
Designated  
Agent

Mailing Address

Title or Position

Telephone number

9. **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.

Mailing Address

Name of Bank, Depository, etc.

Mailing Address

20090201 14:00:00

Extremely Urgent



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JUN 12 2023

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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.

|                                                                                      |                                                                                                                                                                                                                                                                                           |
|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Hand Delivered                                              | Date of Receipt                                                                                                                                                                                                                                                                           |
| <input type="checkbox"/> USPS First Class Mail                                       | Date of Receipt                                                                                                                                                                                                                                                                           |
| <input type="checkbox"/> USPS Registered/Certified                                   | Postmarked (R/C)                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> USPS Priority Mail                                          | Postmarked                                                                                                                                                                                                                                                                                |
| <input type="checkbox"/> USPS Priority Mail Express                                  | Postmarked                                                                                                                                                                                                                                                                                |
| <input type="checkbox"/> Postmark Illegible                                          |                                                                                                                                                                                                                                                                                           |
| <input type="checkbox"/> No Postmark                                                 |                                                                                                                                                                                                                                                                                           |
| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>UPS</i> | <div style="display: flex; justify-content: space-between;"> <div> Shipping Date<br/> <i>6-8-2023</i> </div> <div> Date of Receipt<br/> <i>6-13-2023</i> </div> </div> <div style="display: flex; justify-content: flex-end;"> Next Business Day Delivery <input type="checkbox"/> </div> |
| <input type="checkbox"/> Received via FAX                                            | Date of Receipt                                                                                                                                                                                                                                                                           |
| <input type="checkbox"/> Received via Email                                          | Date of Receipt                                                                                                                                                                                                                                                                           |
| <input type="checkbox"/> Received from Electronic Filing Office                      | Date of Receipt                                                                                                                                                                                                                                                                           |
| <input type="checkbox"/> Other (Specify):                                            | Date of Receipt or Postmarked                                                                                                                                                                                                                                                             |
| <i>MA</i><br>PREPARER                                                                | <i>6-13-2023</i><br>DATE PREPARED                                                                                                                                                                                                                                                         |

(4/2023)

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