

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2011 SEP -7 AM 11:48 FEC MAIL CENTER Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

J. E. W. KENNEDY BANKS FOR PRESIDENT COMMITTEE
NEW KENNEDY BANKS FOR US PRESIDENT COMMITTEE

ADDRESS (number and street)

1052 EDISON STREET

(Check if address is changed)

YORK NY 17405-3006

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

KENNEDYONLINE.US

2. DATE

08 / 12 / 2011

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

CASSAUNDR W. TOWELL

Signature of Treasurer

Cassandra W. Towell

Date

08 / 30 / 2011

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 Use Only

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

FEC FORM 1 (Revised 02/2009)

1103066190

5. 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 J. E. W. KENNEDY BANKS

Candidate Party Affiliation REP Office Sought: House Senate President State PA District 19

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

Name of Candidate J. E. W. KENNEDY BANKS

Party Committee:

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

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - 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.)

Joint Fundraising Representative:

- (g) 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.
- (h) 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.	<input type="text"/>	FEC ID number	<input checked="" type="checkbox"/> C
2.	<input type="text"/>	FEC ID number	<input checked="" type="checkbox"/> C
3.	<input type="text"/>	FEC ID number	<input checked="" type="checkbox"/> C
4.	<input type="text"/>	FEC ID number	<input checked="" type="checkbox"/> C

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Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for 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

J. E. W. KENNEDY BANKS

Mailing Address

1052 EDISON STREET

YORK

PA

17403

Title or Position

CITY

STATE

ZIP CODE

CANDIDATE

Telephone number

717-843-7484

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

CASSANDRA W POWELL

Mailing Address

1601 FLORIDA AVENUE

York

York

PA

17404-3118

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

717-845-7395

11030661192

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address]

[Grid for Mailing Address]

[Grid for Mailing Address]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for 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.

FULTON BANK

Mailing Address

185 MEMORY

~~YORK~~

YORK PA 17402

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address]

[Grid for Mailing Address]

[Grid for Mailing Address]

CITY

STATE

ZIP CODE

11030661193

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

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Next Business Day Delivery

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Other (Specify): Date of Receipt or Postmarked

[Handwritten Signature]

PREPARER
 (3/2005)

9/7/11

DATE PREPARED

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