FEC FORM 1	STATEMEN ORGANIZ	-	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
	od Jacobs for Co	ongress	
ADDRESS (number and street)	41355 43rd St W		
 (Check if address is changed) 	Lancaster		CA 93536 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDR	ESS		
(Check if address is changed)	compliance@henryalar	n.com	
	Optional Second E-Mail Add	dress	
COMMITTEE'S WEB PAGE AI	DDRESS (URL) www.angelaforyou.com		
	10 / Y Y Y Y 2021		
3. FEC IDENTIFICATION N	IUMBER ► C C	00701946	
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 Treasur	er Phillips, Robert, , , III		
Signature of Treasurer	lips, Robert, , , III	[Electronically Filed]	Date 12 / D D / Y Y Y Y 10 / 2021
NOTE: Submission of false, erro		may subject the person signing th ON SHOULD BE REPORTED WI	nis Statement to the penalties of 2 U.S.C. §437g. THIN 10 DAYS.
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

Image# 202112109469830233

12/10/2021 11 : 13

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Can	ndidate	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. (Com information below.)	plete the candidate
Nam Cano	ie of didate	Underwood Jacobs, Angela, , ,	
	didate y Affiliati	on REP Office Sought: K House Senate President	State CA District 25
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	ie of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected 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 se committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	it Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

I

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

Angela Underwood Jacobs for Congress

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

N			
	Mailing Address		
		CITY	STATE ZIP CODE
	Relationship: Conne	cted Organization	Joint Fundraising Representative Leadership PAC Sponsor
7.	Custodian of Records: I books and records.	dentify by name, address (phone number op	otional) and position of the person in possession of committee
	Phillips	, Robert, , , III	
	Full Name		
	Mailing Address	41355 43rd St W	
		Lancaster	CA 93536
	Title or Position	CITY	STATE ZIP CODE
	Treasurer		202 866 8229 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	Phillips, Robert, , , III				
Mailing Address	41355 43rd St W				
			CA	93536	
		CITY	STATE	-	ZIP CODE

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent											I			I	I															
Mailing Address																														
																						L								
								CI	ΓY									ST	ATE	-					ZI	ΡC		DE		
Title or Position																														
													Tele	eph	ione	e n	uml	ber		L										

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.

	The Huntington National Bank		
Mailing Address	17 S High St		
	Columbus		3215
	CITY	STATE	ZIP CODE
Name of Bank, D	epository, etc.		
Mailing Address			
]-[]
	CITY	STATE	ZIP CODE