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Jason C. King
9696 Bonita Beach Road, Suite 201
Bonita Springs, Florida 34135

2008 FEB 27 PM 3:36

February 25, 2008

Federal Elections Commission
999 E. Street NW
Washington DC, 20463

**Re: Jason C. King
Appointment of Campaign Treasurer
Statement of Candidate**

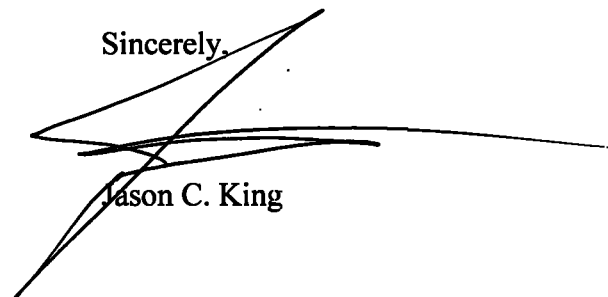
To Whom It May Concern:

Enclosed for filing please find the following executed Forms in connection with the above referenced matter:

1. Appointment of Campaign Treasurer, Form DS-DE 9; and
2. Statement of Candidate, Form DS-DE 84.

Should you have any questions with regard thereto, please do not hesitate to contact me.

Sincerely,



Jason C. King

JCK/id
Copies to:
Anthony Listrom, JD, CPA, CVA
File

28039644277

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Campaign Committee to Elect Jason C. King

ADDRESS (number and street)

9696 Bonita Beach Road, Suite 201

(Check if address
is changed)

Bonita Springs

FL

34135

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

Jason@ThompsonLawPA.com

AListrom@Comcast.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

239-494-8329

2. DATE

02/25/2008

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

X

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

Anthony Listrom

Signature of Treasurer



Date

M M / D D / Y Y Y Y

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 12/2007)

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

Jason G. King

Candidate Party Affiliation

Dem

Office Sought:

☒

House

Senate

President

State

FL

District

14

- (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 _____ (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

- (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 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 | C |
| 2. | <input type="text"/> | FEC ID number | C |
| 3. | <input type="text"/> | FEC ID number | C |
| 4. | <input type="text"/> | FEC ID number | C |
| 5. | <input type="text"/> | FEC ID number | C |

Write or Type Committee Name

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

Mailing Address

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

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

CITY

STATE

ZIP CODE

Title or Position

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

CITY

STATE

ZIP CODE

Title or Position

Telephone number

28039644280

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

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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☐ No Postmark

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<i>Jm/p</i> PREPARER	<i>2/27/08</i> DATE PREPARED
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(3/2005)

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