FEC FORM 1	STATEMEN ORGANIZA	-	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
	ect Steven Everly	for Congress	
	974 ,146 Ave.		
ADDRESS (number and street)			
(Check if address is changed)	1378, 118th Place		
	Knoxville		IA 50138   STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRI	ESS		
(Check if address is changed)	steven.everly@everlyfo	riowa.com	
<i>,</i> ,	Optional Second E-Mail Add  steven.ardent@gmail	ress I.com	
COMMITTEE'S WEB PAGE AD	DDRESS (URL)		
	13 / Y Y Y Y 2019		
3. FEC IDENTIFICATION N	IUMBER ► C co	0712315	
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 Treasure	er Everly, Jeannie, Kay, ,		
Signature of Treasurer	-ly, Jeannie, Kay, ,	[Electronically Filed]	Date 07 15 / Y Y Y Y 2019
NOTE: Submission of false, error		nay subject the person signing the DN SHOULD BE REPORTED W	nis Statement to the penalties of 2 U.S.C. §437g. ITHIN 10 DAYS.
Office Use Only		For further information cc Federal Election Commissic Toll Free 800-424-9530 Local 202-694-1100	

Image# 201907159150826280

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	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
TYP	E OF C	OMMITTEE	
Car	ndidate	e 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. (Comp information below.)	plete the candidate
	ne of didate	Everly, Steven, Ray, ,	
	didate y Affiliati	on REP Office Sought: House Senate President	State IA District 02
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	ne of didate		
Par	ty Con	nmittee:	
(d)			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 con	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 separate committee. (i.e., nonconnected committee)	gregated 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	nt Func	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## Committee to Elect Steven Everly for Congress

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

Mailing Address		
	CITY	STATE ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraisin	g 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.

Everly, Jea	annie, Kay, ,
Full Name	
Mailing Address	974, 146 Ave.
	1378, 118th Place
	Knoxville IA 50138
Title or Position	CITY STATE ZIP CODE
<b>Treasurer</b>	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	Everly, Jeannie, Kay, ,
Mailing Address	974, 146 Ave.
	1378, 118th Place
	Knoxville
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent															1											
Mailing Address																										
																								1		
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Title or Position																										
	_   _											Tele	eph	one	e ni	umb	ber									

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.

C	Community 1st Credit Union									
Mailing Address	1008 Bell Ave. Suite103									
	Knoxville		50138							
	CITY	STATE	ZIP CODE							
Name of Bank, Dep	pository, etc.									
L										
Mailing Address										
	CITY	STATE	ZIP CODE							