Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Brendan For Congress 4300 Black Avenue ADDRESS (number and street) #591 (Check if address is changed) Pleasanton 94566 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS brendanforcongress@sbcglobal.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.brendanforcongress.com (Check if address is changed) DATE 2017 C00646695 FEC IDENTIFICATION NUMBER > 3. 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. St John, Erick, Brendan, , Type or Print Name of Treasurer St John, Erick, Brendan,, [Electronically Filed] 05 2017 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC F	Form 1 (Revised 02/2009) Page 2
	COMMITTEE te Committee:
(a) x	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	St John, Erick, Brendan, ,
Candidate Party Affilia	Action NNE Office Sought: W House Senate President District CA
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee: (Netional State
(d)	(National, State (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 Fur	ndraising 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 committees/organizations, at least one of which is an authorized committee of a lead-rai candidate.  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.
Со	mmittees Participating in Joint Fundraiser
1.	FEC ID number C
2.	FEC ID number
3.	FEC ID number
4.	

Write or Type Committee Name  Brendan For Congress  Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE  Mailing Address  CITY STATE ZIP CODE  Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  St John, Erick, Brendan, Full Name  Mailing Address  4300 Black Avenue  4300 Black Avenue  Title or Position CITY STATE ZIP CODE	FEC <b>Form 1</b> (Revis	sed 02/2009)	Page <b>3</b>
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#591  Pleasanton  CITY  STATE  ZIP CODE  Title or Position		n, Erick, Brendan, ,	
Pleasanton  CITY  STATE  ZIP CODE  Title or Position	Mailing Address	4300 Black Avenue	
CITY STATE ZIP CODE Title or Position		#591 	
Title or Position		Pleasanton	94566
	Title or Position	CITY STATE	ZIP CODE
		Telephone number	

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. 20 . 011		. 490
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
oofoty damasis is	r Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.	noids accounts, rents
Name of Bank,	Depository, etc.  Capital One P.O. Box 60	
	Depository, etc.  Capital One P.O. Box 60	
Name of Bank,	Depository, etc.  Capital One P.O. Box 60	02
Name of Bank,	Depository, etc.  Capital One P.O. Box 60	02 ZIP CODE
Name of Bank,	Depository, etc.  Capital One P.O. Box 60 St Cloud CITY STATE	
Name of Bank,	Depository, etc.  Capital One P.O. Box 60 St Cloud CITY STATE	ZIP CODE
Name of Bank,	Depository, etc.  Capital One P.O. Box 60 St Cloud CITY STATE  Depository, etc.	ZIP CODE
Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  Capital One P.O. Box 60 St Cloud CITY STATE  Depository, etc.	ZIP CODE
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