PAGE 1 / 4 =

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Committee to Elect Kenneth Jenks to Congress PO Box 802163 ADDRESS (number and street) (Check if address is changed) Santa Clarita 91380 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jenks.ken@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.kennethjenksforcongress.com (Check if address is changed) DATE 2019 C00728915 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. Jenks, Kenneth, , , Type or Print Name of Treasurer Jenks, Kenneth,,, [Electronically Filed] 2019 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 Only Local 202-694-1100

		_ •
	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. (Com information below.)	plete the candidate
Name of Candidate	Jenks, Kenneth, , Mr.,	
Candidate Party Affilia	ation REP Office Sought: X House Senate President	State CA District 25
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	ommittee:	
(d)		(Democratic, Republican, etc.) Party.
Political	Action 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 se 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.)	
Joint Fur	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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 two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Co	mmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.		
4		

FFC Forms 4 (Davids of 4)	22/2000)	Dama 3
FEC Form 1 (Revised 0 Write or Type Committee Name		Page 3
	lect Kenneth Jenks to Congress	
	Organization, Affiliated Committee, Joint Fundraising Representative,	or Loadorchin BAC Sponsor
-	organization, Anniated Committee, John Fundraising Representative,	or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representa	ative Leadership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number optional) and position of the po	erson in possession of committee
Jenks, Ker	nneth, , ,	
	PO Box 802163	
Mailing Address		
	Santa Clarita CA	91380
Title or Position	CITY STATE	ZIP CODE
	Telephone number	661 - 432 - 0263
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name Jenks, Ker	nneth, , ,	1
of Treasurer	PO Box 802163	
Mailing Address		
	Santa Clarita CA	91380
Title or Position	CITY STATE	ZIP CODE
	Telephone number	661 - 432 - 0263

FEC For	1 (Revised 02/2009)			Page 4
Full Name of Designated Agent	 			
Mailing Address				
3				
		CITY	STATE	ZIP CODE
Title or Position		OTT	SIAIL	ZII CODE
		Telephone	number	-
Banks or Other safety deposit b Name of Bank,	Depositories: List all banks or other kes or maintains funds. repository, etc.	er depositories in which the cor	nmittee deposits funds	s, holds accounts, rents
safety deposit b	xes or maintains funds.		nmittee deposits funds	, holds accounts, rents
safety deposit b Name of Bank,	ces or maintains funds. epository, etc. Chase		nmittee deposits funds	s, holds accounts, rents
safety deposit b Name of Bank,	ces or maintains funds. epository, etc. Chase			s, holds accounts, rents
safety deposit b Name of Bank,	ces or maintains funds. epository, etc. Chase 24000 Valencia Boulev			
safety deposit b Name of Bank,	ces or maintains funds. cepository, etc. Chase 24000 Valencia Boulev Valencia	/ard	CA 91	1355
safety deposit b Name of Bank, Mailing Address	ces or maintains funds. cepository, etc. Chase 24000 Valencia Boulev Valencia	/ard	CA 91 STATE	
safety deposit b Name of Bank, Mailing Address	ces or maintains funds. epository, etc. Chase 24000 Valencia Boulev Valencia epository, etc.	/ard	CA 91 STATE	
safety deposit b Name of Bank, Mailing Address Name of Bank,	ces or maintains funds. epository, etc. Chase 24000 Valencia Boulev Valencia epository, etc.	/ard	CA 91 STATE	
safety deposit b Name of Bank, Mailing Address Name of Bank,	ces or maintains funds. epository, etc. Chase 24000 Valencia Boulev Valencia epository, etc.	/ard	CA 91 STATE	