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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. James Brian Griffin For Congress 16835 Algonquin Street ADDRESS (number and street) Suite 337 (Check if address is changed) **Huntington Beach** 92649 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jbgriffin@jbgmg.com (Check if address is changed) Optional Second E-Mail Address ijbgriffin@jbgmg.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.jamesbgriffinforcongress.org (Check if address is changed) DATE 07 2019 C00723635 FEC IDENTIFICATION NUMBER 3. X 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. Griffin, James, Brian, , Type or Print Name of Treasurer Griffin, James, Brian, , [Electronically Filed] 10 19 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

FEC Form 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below	<i>i.</i> )
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	mplete the candidate
Name of Candidate Griffin, James, Brian, ,	
Candidate Office	State
Party Affiliation REP Sought: X House Senate President	District 48
(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 co	onnected 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 s committee. (i.e., nonconnected committee)	segregated 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 Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundraiser	
1.	
2.	
3.	
4.	

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Write or Type Committee I		J
James Brian	Griffin For Congress	
	ed Organization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STAT	TE ZIP CODE
Relationship: Conn	ected Organization Affiliated Committee Joint Fundraising Repre	sentative Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of t	the person in possession of committee
Griffir Full Name	n, James, Brian, ,	
Mailing Address	16835 Algonquin Street	
ag / taa.eee	Suite 337	
	Huntington Beach CA	92649
Title or Position	CITY STATE	ZIP CODE
Candidate	Telephone number	562 810 8881
. <b>Treasurer:</b> List the nam any designated agent (e	e and address (phone number optional) of the treasurer of the comm.g., assistant treasurer).	nittee; and the name and address of
Full Name Griffing of Treasurer	, James, Brian, ,	
Mailing Address	16835 Algonquin Street	
	Suite 337	
	Huntington Beach	92649
Title or Position Candidate	CITY STATE	
	Telephone number	562 810 8881

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Full Name of Designated G Agent	Griffin, James, Brian, , 92649	
Mailing Address	16835 Algonquin Street	
	Suite 337	
	Huntington Beach  CITY  CITY  STATE	ZIP CODE
Title or Position Candidate		810 - 8881
. Banks or Other De	epositories: List all banks or other depositories in which the committee deposits funds, hold	ds accounts, rents
safety deposit boxes Name of Bank, Depo	s or maintains funds.	1
safety deposit boxes Name of Bank, Dep	ository, etc.	
safety deposit boxes Name of Bank, Depo	s or maintains funds.  pository, etc.  Bank of America	
safety deposit boxes Name of Bank, Dep	s or maintains funds.  pository, etc.  Bank of America	
safety deposit boxes Name of Bank, Dep	Sor maintains funds.  Pository, etc.  Bank of America  16811 Algonquin Street	ZIP CODE
safety deposit boxes Name of Bank, Dep	Sor maintains funds.  Bank of America  16811 Algonquin Street  Huntington Beach  CITY  STATE	ZIP CODE
safety deposit boxes Name of Bank, Depo	Sor maintains funds.  Bank of America  16811 Algonquin Street  Huntington Beach  CITY  STATE	ZIP CODE
safety deposit boxes Name of Bank, Depo	Sor maintains funds.  Bank of America  16811 Algonquin Street  Huntington Beach  CITY  STATE  Dository, etc.	ZIP CODE
Safety deposit boxes Name of Bank, Depo	Sor maintains funds.  Bank of America  16811 Algonquin Street  Huntington Beach  CITY  STATE  Dository, etc.	ZIP CODE
Safety deposit boxes Name of Bank, Depo	Sor maintains funds.  Bank of America  16811 Algonquin Street  Huntington Beach  CITY  STATE  Dository, etc.	ZIP CODE

## : 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: F1N Transaction ID:

We have not accepted any Campaign Funds to date

Form/Schedule: Transaction ID: