FEC

Only

STATEMENT OF

PAGE 1 / 4

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. **BUSS FOR AMERICA 2024** 1 W Manchester Blvd., Suite 700 ADDRESS (number and street) (Check if address is changed) Inglewood 90301 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address cine@politicalreportingplus.com is changed) Optional Second E-Mail Address info@buss2024.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 30 2024 C00867846 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. Type or Print Name of Treasurer Ivery, Cine D., , Date 01 30 2024 Signature of Treasurer Ivery, Cine D., , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

E	EC Form 1 (Revised 03/2022)	Page 2					
	TYPE OF COMMITTEE:						
	Candidate 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 cand information below.)							
Name of Candidate Buss, Johnny, Hatten, ,							
	Candidate Party Affiliation IDP Sought: House Senate X President	State					
	(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 Republican,	etc.) Party					
Political Action Committee (PAC):							
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	I organization is a:					
	Corporation Corporation w/o Capital Stock Labor Or	ganization					
	Membership Organization Trade Association Cooperat	ive					
	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.)						
	(g) This committee is an independent expenditure-only political committee (Super PAC).						
	In addition, this committee is a Lobbyist/Registrant PAC.						
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC	3).					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	Joint Fundraising Representative:						
	(i) 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.						
	(j) 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						

I	FEC Form 1 (Revised 0	2/2009)			Page 3
٧	Irite or Type Committee Name	· · · · · · · · · · · · · · · · · · ·			
	BUSS FOR AME	RICA 2024			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	NONE				
	Mailing Address				
		CITY ▲	ST	TATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organizatio	n Joint Fundraising Re	epresentative	Leadership PAC Sponso
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Ivery, Cine	D., , ,			
	Full Name	1 W Manchester Blvd., Suite 700			
	Mailing Address				
		Inglewood		CA 90301	
		CITY ▲	ST	ATE A	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone number	r 310 – L	878 - 4131
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional assistant treasurer).) of the treasurer of the con	mmittee; and the n	ame and address of
	Full Name Ivery, Cine of Treasurer	D., , ,			
	Mailing Address	1 W Manchester Blvd., Suite 700			
	J				
		Inglewood		CA 90301	-
		CITY ▲	ST	TATE ▲	ZIP CODE ▲
	Title or Position ▼	5	0		- 3
	Treasurer		Telephone number	r 310 – L	878 4131

FEC Form 1 (Revised (02/2009)			Page 4			
Full Name of Designated Agent							
Mailing Address							
Title or Position ▼	CITY ▲		STATE ▲	ZIP CODE ▲			
		Telephone num	nber				
Banks or Other Depositorions safety deposit boxes or main	es: List all banks or other depositontains funds.	ries in which the committe	e deposits funds, hol	ds accounts, rents			
Name of Bank, Depository, e	Name of Bank, Depository, etc.						
Californi	a Bank & Trust						
Mailing Address	550 S Hope St, #100						
	Los Angeles		CA 90071				
	CITY ▲		STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.							
Mailing Address							
	CITY ▲		STATE ▲	ZIP CODE ▲			