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
Juan Markos for	Congress district 2	28 2018	
ADDRESS (number and street)	4632 Santa Monica blvd		
(Check if address is changed)	2012		
ie changed,	Los Angeles CITY ▲		CA 90029 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address is changed)	contact@juanmarkos.con) 	
	Optional Second E-Mail Addre	SS	
COMMITTEE'S WEB PAGE AD	DRESS (URL)		
2. DATE 03 / 03			
3. FEC IDENTIFICATION N	JMBER ► C COOR	335466	
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)	
I certify that I have examined th	nis Statement and to the best of	my knowledge and belief it is	s true, correct and complete.
Type or Print Name of Treasure	r Schloredt, Charlie, , ,		
Signature of Treasurer	redt, Charlie, , ,	[Electronically Filed]	Date 04 / D D / Y Y Y Y 04 18 2017
NOTE: Submission of false, erron	eous, or incomplete information ma ANY CHANGE IN INFORMATION		is Statement to the penalties of 2 U.S.C. §437g. THIN 10 DAYS.
Office Use Only		For further information cor Federal Election Commissior Toll Free 800-424-9530 Local 202-694-1100	

Image# 201704189052307412

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	COMMITTEE
Candidat	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. (Complete the candidate information below.)
Name of Candidate	Markos, Juan, , ,
Candidate Party Affilia	tion NPA Office Sought: X House Senate President CA District 28
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	
(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 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 Fun	draising 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 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.
Con	nmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Juan Markos for Congress district 28 2018

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

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Lear 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possi	ZIP CODE
CITY STATE CITY STATE CITY STATE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Lear 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possition	adership PAC Sponsor
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Lear 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possi	adership PAC Sponsor
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Lear 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possi	adership PAC Sponsor
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Lear 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possi	adership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possition 	
	session of committee
books and records.	
Full Name	
Mailing Address	
Title or Position CITY STATE 2	ZIP CODE
Telephone number	
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the nam any designated agent (e.g., assistant treasurer).	ne and address of
Full Name Schloredt, Charlie, , , of Treasurer	
Mailing Address	
2012	
Title or Position Treasurer Image: treasurer	877 3552

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Full Name of	Banks, Alex, , ,	
Designated		
Agent		
Mailing Address	1823 W Pico Blvd	
	207	
	Los Angeles	CA 90029
	CITY	STATE ZIP CODE
Title or Position	ager	Telephone number 310 482 8456

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.

	Chase																						
Mailing Address		5445 Ho	llywoo	od B	lvd																		
		Los Ang	geles											C	۹	9	002	9			-[
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Name of Bank, [Depository, etc	C.																					
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Mailing Address																							
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