**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Douglas Jensen for Congress PO Box 100 ADDRESS (number and street) (Check if address is changed) Silver City 51571 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address douglasforiowa@gmail.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) douglasforiowa.com (Check if address is changed) DATE 2025 C00919621 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT NEW (N) 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 Jensen, Douglas, , Date 10 30 2025 Signature of Treasurer Jensen, Douglas, , , 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

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TYPE OF COMMITTEE:				
Candidate Committee:				
This committee is a principal campaign committee. (Complete the candidate information below.)				
This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name of Candidate Jensen, Douglas, R, ,				
Candidate Party Affiliation  REP  Office Sought:  House  Senate  President	State IA District 04			
(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 Republicar	ic, n, etc.) Party			
Political Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:			
Corporation Corporation w/o Capital Stock Labor	Organization			
Membership Organization Trade Association Cooper	rative			
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 F	PAC).			
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.				
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. C				

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W	/rite or Type Committee Name				
	Douglas Jensen				
<b>i</b> .	-	ganization, Affiliated Committee, Joint Fundraising Repre	esentative, or Leadersh	nip PAC Sponsor	
	NONE				
	Mailing Address				
		CITY A	STATE ▲	ZIP CODE ▲	
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising	Representative L	eadership PAC Sponsor	
:	Custodian of Records: Ident books and records.	fy by name, address (phone number optional) and position o	f the person in possession	on of committee	
	Jensen, Do	uglas, , ,			
	Full Name	29701 Dobney Ave			
	Mailing Address	29701 Dobliey Ave			
		Silver City	IA 51571		
		CITY A	STATE ▲	ZIP CODE A	
	Title or Position ▼				
	Candidate	Telephone num	ber 712 - 3	802 - 8088	
	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the issistant treasurer).	committee; and the nar	ne and address of	
	Full Name Jensen, Do	uglas, , ,		1	
		29701 Dobney Ave			
	Mailing Address				
		Silver City	. IA		
		Oliver Olty	IA 51571		
	Title or Desiring	CITY A	STATE ▲	ZIP CODE ▲	
	Title or Position ▼    712   302   8088				
		Telephone num	ber	- 0000	

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	Full Name of Designated Agent				
	Mailing Address				
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
		Telephone number			
		epositories: List all banks or other depositories in which the committee deposits funds, holes or maintains funds.	ds accounts, rents		
	Name of Bank, Dep	pository, etc.			
	L	FNBO			
	Mailing Address				
		Council Bluffs			
		CITY ▲ STATE ▲	ZIP CODE ▲		
		OIT A STALL A	ZII OODE <b>=</b>		
	Name of Bank, Depository, etc.				
	L				
	Mailing Address				
		CITY ▲ STATE ▲	ZIP CODE ▲		
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