

FEC FORM 1

STATEMENT OF ORGANIZATION

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2023 JUN 22 AM 10:24

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5  
TIM KALEMKARIAN P24 COMMITTEE

ADDRESS (number and street) PO BOX 3272  
(Check if address is changed)  
WESTLAKE VILLAGE CA 91359-3272  
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Check if address is changed)  
ABCDEFGHIJKLMNQPQRSTU@PROTONMAIL.COM  
Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed)

2. DATE 06 / 14 / 2023

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT X 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: TIMOTHY KALEMKARIAN  
Signature of Treasurer: TIMOTHY KALEMKARIAN Date: 06 / 14 / 2023

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.

NON-FEDERAL CAMPAIGN FINANCING

5. TYPE OF COMMITTEE:

Candidate 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 TIMOTHY CHARLES KALEMKARIAN

Candidate Party Affiliation REP Office Sought: House  Senate  President State CA District 00

- (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 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.)

- (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).

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. \_\_\_\_\_
2. \_\_\_\_\_

C  
C

NONDISCLOSURE NUMBER: 742544001601004517

Write or Type Committee Name

TIM KALEMKARIAN P24 COMMITTEE

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

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:  Connected Organization  Affiliated Organization  Joint Fundraising Representative  Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records

Full Name

TREASURER

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

TIMOTHY CHARLES KALEMKARIAN

Mailing Address

PO BOX 3272

WESTLAKE VILLAGE

CA

91359

3272

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

2025 RELEASE UNDER E.O. 14176







Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

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 6/22/23  
 PREPARER DATE PREPARED

(4/2023)

NONPROFIT ORGANIZATION