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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Bruce Kenneway, Independent President, November 2024 Using The Write In Vote 288 Union St Apt 103 ADDRESS (number and street) (Check if address is changed) Bangor 04401 ME CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS BruceKenneway@Gmail.com (Check if address is changed) Optional Second E-Mail Address |bjkenneway@yahoo.com COMMITTEE'S WEB PAGE ADDRESS (URL) BruceKenneway.com (Check if address is changed) DATE 25 2021 C00681205 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. Kenneway, Bruce, , , Type or Print Name of Treasurer Kenneway, Bruce, , , [Electronically Filed] 01 25 2021 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 2			
TYPE OF COMM	MITTEE				
Candidate Co	mmittee:				
(a) X Thi	is committee is a principal campaign committee. (Complete the candidate information below.))			
	is committee is an authorized committee, and is NOT a principal campaign committee. (Comprenation below.)	plete the candidate			
Name of Candidate	Kenneway, Bruce, , ,				
Candidate	Office W Sought: House Senate X President	State			
Party Affiliation	W Sought: House Senate X President	District			
(c) Thi	is committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Commit	tee:				
(d) Thi	· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.			
Political Actio	n Committee (PAC):				
(e) Thi	is committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected 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.				
	is committee supports/opposes more than one Federal candidate, and is NOT a separate semmittee. (i.e., nonconnected committee)	egregated 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 Fundrais	sing Representative:				
	s committee collects contributions, pays fundraising expenses and disburses net proceeds for two mmittees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political			
	s committee collects contributions, pays fundraising expenses and disburses net proceeds for tw nmittees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political			
Committe	ees Participating in Joint Fundraiser				
1.	FEC ID number				
2.	FEC ID number				
3.	FEC ID number				
4.	FEC ID number				

FFC Form 1 (Deviced 03/2000)	Dama 2
FEC Form 1 (Revised 02/2009) Write or Type Committee Name	Page 3
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Bruce Kenneway, Independent President, November 2024 Using The Williams of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership F	
NONE	
<u> </u>	
Mailing Address	
CITY STATE ZIP	CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leaders	ship PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possess books and records.	sion of committee
Kenneway, Bruce, , ,	ı
Full Name	
Mailing Address	
Bangor , ME , 04401	
Title or Position CITY STATE ZIP	CODE
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name a any designated agent (e.g., assistant treasurer).	and address of
Full Name Kenneway, Bruce, , , of Treasurer	
Mailing Address 288 Union St Apt 103	
Bangor ME 04401	
CITY STATE ZIP Title or Position	CODE

FEC Form	1 (Revised 02/2009)		Page 4		
Full Name of Designated Agent	Kenneway, Bruce, , ,				
Mailing Address	288 Union St Apt 103				
	Bangor CITY	STATE	04401 ZIP CODE		
Title or Position	Teleph	none number 207	7990		
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.					
	Bangor Savings Bank				
Mailing Address	871 Hammond St				
	Bangor		104402		
	CITY	STATE	ZIP CODE		
Name of Bank, D	epository, etc.				
Mailing Address					