Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Jeffrey Burum for Congress 1237 S Victoria Ave ADDRESS (number and street) (Check if address is changed) Oxnard 93035 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@jeffreyburumforcongress.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.JeffreyBurumforCongress.com (Check if address is changed) DATE 2017 C00653949 FEC IDENTIFICATION NUMBER > 3. 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. Burum, Jeffrey, David, Maj (Ret.), Type or Print Name of Treasurer Burum, Jeffrey, David, Maj (Ret.), [Electronically Filed] 80 2017 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

Local 202-694-1100

F	EC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Can		e Committee:	
(a)	X	This committee is a principal campaign committee. (Complete the candidate information below	1.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Coninformation below.)	mplete the candidate
Name Cand		Burum, Jeffrey, David, Maj (Ret),	
Cand Party	idate Affiliati	on REP Office Sought: X House Senate President	State CA
			District 26
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	segregated 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.)	
Join	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number C	
	3.	FEC ID number	
	4.		

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Write or Type Committee Na	me	
Jeffrey Burum	for Congress	
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
NONE		
Mailing Address		
J		
	CITY STATE	ZIP CODE
Relationship: Connec	eted Organization	Leadership PAC Sponso
Relationship.	Anniated Committee John Fundaising Nepresentative	Ecadership i Ac Sportson
books and records.	dentify by name, address (phone number optional) and position of the person in Jeffrey, David, Maj (Ret.),	possession of commune
Full Name	,1237 S Victoria Ave	
Mailing Address		
	Oxnard CA 930	35
Title or Position	CITY STATE	ZIP CODE
	Telephone number =	
3. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; and th ., assistant treasurer).	e name and address of
	Jeffrey, David, Maj (Ret.),	
of Treasurer	1237 S Victoria Ave	
Mailing Address		
	Oxnard CA 9303	
Title or Position	Oxnard CA 930:	ZIP CODE

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Full Name of Designated Bu Agent	urum, Alexander, David, ,	
Mailing Address	1237 S Victoria Ave	
	Oxnard CA 93035 CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Mailing Address	S Bank 1291 S Victoria Ave	
	Oxnard CA 93035	
	Oxnard CA 93035 CITY STATE	ZIP CODE
Name of Bank, Depo	CITY STATE	
	CITY STATE	
	CITY STATE ository, etc.	ZIP CODE
Name of Bank, Depo	CITY STATE ository, etc.	ZIP CODE
Name of Bank, Depo	CITY STATE ository, etc.	ZIP CODE