Image# 202207079517839576				07/07/2022 15 : 36
FEC FORM 1	STATEMEI ORGANIZ	-		PAGE 1 / 4
1. NAME OF	(Chaoly if nome	Example If tuning tune		ce Use Only
COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Ronda Kennedy	for Congress			
	2416 W Victory Blvd.			
ADDRESS (number and street)	L_ _ _ _ _ _ _ _ ⊥#646			
is changed)	Burbank	<u> </u>		
			CA  9150 STATE ▲	$\frac{100}{210} = \boxed{100}$
			• ··· · <b>-</b>	
	_SS ⊥info@rondakennedy.c	om		
<ul> <li>(Check if address is changed)</li> </ul>				
	Optional Second E-Mail Ad  rbk4ca@gmail.com	dress		
COMMITTEE'S WEB PAGE AD	DBESS (UBL)			
(Check if address	rondakennedy.com			
is changed)				
	7 / Y Y Y Y 2022			
3. FEC IDENTIFICATION N	UMBER ► C c	00708073		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	t is true, correct and	complete.
-				
Type or Print Name of Treasure	er Kennedy, Michael, Warren, ,			
Signature of Treasurer	eedy, Michael, Warren, ,	[Electronically Filed]	Date 07	07 / Y Y Y Y 2022
NOTE: Submission of false, error		may subject the person signing TION SHOULD BE REPORTED		penalties of 52 U.S.C. §3010
Office		For further information of	contact:	FEC FORM 1
Use Only		Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		(Revised 06/2012)

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. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) <b>X</b> 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 tinformation below.)	the candidate
Name of Kennedy, Ronda, Nadine, , Candidate	
Candidate Office Party Affiliation REP Sought: House Senate President	State CA District 30
(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 (Democra	tic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is a:
Corporation Corporation w/o Capital Stock	Organization
Membership Organization Trade Association Coope	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 segregation committee. (i.e., nonconnected committee)	ted 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.)	
(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 I	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.

In addition, this committee is a Lobbyist/Registrant PAC.

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Write or Type Committee Name	

## Ronda Kennedy for Congress

Mailing Address																																	
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								C	ΤY												ST	ATE	E 🔺				Z	٢P	СС	DE			
Relationship: Connecte	d Orga	nizat	tion	E	/	Affili	ate	ed (	Drg	ani	zat	ion	I		Jo	oint	Fu	ındı	rais	ing	Re	pre	ser	ntati	ve		Le	ade	ərsh	ip (	PAC	; Sp	onso

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

Kennedy, M	Vichael, Warren, ,
Full Name	
Mailing Address	217 Smoke Tree Ave.
	Oak Park
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number     702     -     523     -     2059

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	Kennedy, Michael, Warren, ,
of Treasurer	
Mailing Address	217 Smoke Tree Ave.
	Oak Park         CA         91377           Image: Image of the state of the stat
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	•
Treasurer	Telephone number     702     -     523     -     2059

FEC Form 1 (Revised 02	)2/2(	009	)																			F	Pag	e 4	۱ ــــــــــــــــــــــــــــــــــــ		
Full Name of Designated Agent										ĺ									ĺ							1	
Mailing Address																											
																								L			
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Title or Position ▼																											
											Tele	eph	ione	e n	umł	ber				· [_							

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.

Bank o	f America		
Mailing Address	5667 Kenan Rd		
	Agoura Hills	CA 91301	
	CITY A	STATE A	ZIP CODE ▲
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY A	STATE A	ZIP CODE