PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. 43 Alumni For America P. O. Box 77196 ADDRESS (number and street) (Check if address is changed) Washington 20002 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS 43alumniforbiden@gmail.com (Check if address is changed) Optional Second E-Mail Address kaytwok@aol.com COMMITTEE'S WEB PAGE ADDRESS (URL) 43alumniforjoebiden.com (Check if address is changed) DATE 01 2020 C00747592 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. Kirksey, Karen, , , Type or Print Name of Treasurer Kirksey, Karen, , , [Electronically Filed] 10 28 2020 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

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	i aye Z
Can	ndidate	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. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	(D
(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 con-	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)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

Write or Type Committee Name 43 Alumni For America i. 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 Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records. Full Name Mailing Address Kirksey, Karen, ., Full Name Mailing Address Title or Position CITY STATE ZIP CODE Telephone number 202 - 489 - 9876	FEC Form 1 (Revised	02/2009)	Page 3
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 Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records. Kirksey, Karen, Full Name 4801 Colonel Brooke Ct Mailing Address Title or Position CITY STATE ZIP CODE Telephone number 202 - 489 - 9876 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 Kirksey, Karen, 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 Kirksey, Karen, 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 Virgination (e.g., assistant treasurer). Full Name Of Treasurer (e.g., assistant treasurer). Full Name Of Treasurer (e.g., assistant treasurer). Full Name Of Treasurer (e.g., assistant treasurer). STATE ZIP CODE			9
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 Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records. Kirksey, Karen, Full Name 4801 Colonel Brooke Ct Mailing Address Title or Position CITY STATE ZIP CODE Telephone number 202 - 489 - 9876 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 Kirksey, Karen, 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 Kirksey, Karen, 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 Virgination (e.g., assistant treasurer). Full Name Of Treasurer (e.g., assistant treasurer). Full Name Of Treasurer (e.g., assistant treasurer). Full Name Of Treasurer (e.g., assistant treasurer). STATE ZIP CODE			
Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records. Kirksey, Karen, , Full Name Address 4801 Colonel Brooke Ct 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 Kirksey, Karen, , of Treasurer Mailing Address 4801 Colonel Brooke Ct Lupper Mariboro Lity STATE ZIP CODE Tritle or Position CITY STATE ZIP CODE Tritle or Position CITY STATE ZIP CODE Tritle or Position			ive, or Leadership PAC Sponsor
Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records. Kirksey, Karen, , Full Name Address 4801 Colonel Brooke Ct 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 Kirksey, Karen, , of Treasurer Mailing Address 4801 Colonel Brooke Ct Lupper Mariboro Lity STATE ZIP CODE Tritle or Position CITY STATE ZIP CODE Tritle or Position CITY STATE ZIP CODE Tritle or Position	NONE		
CUTY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records. Kirksey, Karen, Full Name Hall Colonel Brooke Ct Mailing Address Upper Mariboro CITY STATE ZIP CODE Telephone number 202 - 489 - 9876 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 Mailing Address Hall Colonel Brooke Ct Upper Mariboro Virseey, Karen, Title or Position ZOZ 489 9876			<u> </u>
CUTY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records. Kirksey, Karen, Full Name Hall Colonel Brooke Ct Mailing Address Upper Mariboro CITY STATE ZIP CODE Telephone number 202 - 489 - 9876 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 Mailing Address Hall Colonel Brooke Ct Upper Mariboro Virseey, Karen, Title or Position ZOZ 489 9876			
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Kirksey, Karen, , , Full Name 4801 Colonel Brooke Ct Mailing 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 Kirksey, Karen, , , Girksey, Karen, , , Upper Marlboro (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 Mailing 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 Mailing 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 Mailing Address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).	Mailing Address		
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Kirksey, Karen, , , Full Name 4801 Colonel Brooke Ct Mailing 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 Kirksey, Karen, , , Girksey, Karen, , , Upper Marlboro (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 Mailing 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 Mailing 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 Mailing Address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).			
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Kirksey, Karen, , , Full Name 4801 Colonel Brooke Ct Mailing 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 Kirksey, Karen, , , Girksey, Karen, , , Upper Marlboro (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 Mailing 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 Mailing 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 Mailing Address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).			
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records. Kirksey, Karen, , , Full Name 4801 Colonel Brooke Ct Mailing Address Upper Mariboro CITY STATE ZIP CODE Telephone number 202 489 9876 Full Name of 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 Mailing Address 4801 Colonel Brooke Ct Upper Mariboro CITY STATE ZIP CODE Title or Position		CITY STATE	ZIP CODE
Kirksey, Karen, , , Full Name 4801 Colonel Brooke Ct Mailing Address 4801 Colonel Brooke Ct Title or Position CITY STATE ZIP CODE 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 Kirksey, Karen, , , of Treasurer Mailing Address 4801 Colonel Brooke Ct Upper Marlboro CITY STATE ZIP CODE Title or Position	Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponso
Title or Position CITY STATE ZIP CODE 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 Mailing Address Wirksey, Karen, , , of Treasurer Mailing Address Virksey, Karen, , , of Treasurer Mailing Address Virksey, Karen, , , of Treasurer CITY STATE ZIP CODE Title or Position		entify by name, address (phone number optional) and position of the	e person in possession of committee
Mailing Address Upper Mariboro		Karen, , ,	
Title or Position CITY STATE ZIP CODE Telephone number Teleph		4801 Colonel Brooke Ct	
Title or Position CITY STATE ZIP CODE Telephone number 202 489 9876 Telephone number 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 Mailing Address 4801 Colonel Brooke Ct Upper Marlboro CITY STATE ZIP CODE Title or Position	maining Addices		
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 Kirksey, Karen, , , of Treasurer Mailing Address 4801 Colonel Brooke Ct Upper Marlboro CITY STATE ZIP CODE Title or Position		Upper Marlboro MD	20772
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 Kirksey, Karen, , , of Treasurer Mailing Address 4801 Colonel Brooke Ct Upper Marlboro CITY STATE ZIP CODE Title or Position	Title or Position	CITY STATE	ZIP CODE
any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address 4801 Colonel Brooke Ct		Telephone number	202 489 - 9876
of Treasurer Mailing Address 4801 Colonel Brooke Ct	3. Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committ assistant treasurer).	tee; and the name and address of
Upper Marlboro CITY STATE ZIP CODE Title or Position		Karen, , ,	
CITY STATE ZIP CODE Title or Position 1 202 1 489 1 9876	Mailing Address	4801 Colonel Brooke Ct	
CITY STATE ZIP CODE Title or Position 1 202 1 489 1 9876			
Title or Position		Upper Marlboro MD	20772
, , , , , , , , , , , , , , , , , , , ,	Title or Position	CITY STATE	ZIP CODE
		Telephone number	202 489 - 9876

FEC Form 1 (Re	evised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other Depos safety deposit boxes or	sitories: List all banks or other depositories in which the committee deposits funds, hold maintains funds.	ls accounts, rents
Banks or Other Depos safety deposit boxes or Name of Bank, Deposito N/A Mailing Address	maintains funds. fory, etc. N/A	ds accounts, rents
safety deposit boxes or Name of Bank, Deposito	maintains funds. cory, etc.	ds accounts, rents
safety deposit boxes or Name of Bank, Deposito	maintains funds. fory, etc. N/A	zip code
safety deposit boxes or Name of Bank, Deposito	maintains funds. fory, etc. N/A N/A N/A CITY STATE	
safety deposit boxes or Name of Bank, Deposito N/A Mailing Address Name of Bank, Deposito Ban	maintains funds. fory, etc. N/A N/A N/A CITY STATE	
safety deposit boxes or Name of Bank, Deposito N/A Mailing Address Name of Bank, Deposito	maintains funds. fory, etc. N/A N/A N/A DC 20002 CITY STATE Tory, etc.	
safety deposit boxes or Name of Bank, Deposito N/A Mailing Address Name of Bank, Deposito Ban	maintains funds. fory, etc. N/A N/A N/A DC 20002 CITY STATE Tory, etc.	

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: F1A Transaction ID:

Changing PAC name from 43 Alumni For Biden to 43 Alumni for America per FEC request.

Form/Schedule: Transaction ID: