

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)

☒ (Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Ameena 4 Congress

ADDRESS (number and street)

☒ (Check if address
is changed)

15774 S LaGrange Rd

P.O. Box 392

Orland Park

CITY ▲

IL STATE ▲

60462

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒ (Check if address
is changed)

hello@ameena.org

Optional Second E-Mail Address

jwerner@ameena.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

☒ (Check if address
is changed)

www.ameena.org

2. DATE

08

25

2021

3. FEC IDENTIFICATION NUMBER ►

C00104973

4. 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.

Type or Print Name of Treasurer

Jack Werner

Signature of Treasurer

[Signature]

Date

09

04

2021

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.

Office
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Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

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 Dr. Ameena Matthews

Candidate Party Affiliation DEM Office Sought: ☒ House ☐ Senate ☐ President State IL District 01

- (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.)

Joint Fundraising Representative:

- (g) ☐ 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.
- (h) ☐ 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. _____	FEC ID number <u>C</u> _____
2. _____	FEC ID number <u>C</u> _____
3. _____	FEC ID number <u>C</u> _____
4. _____	FEC ID number <u>C</u> _____

2021-09-10 AM 00:08:09

Write or Type Committee Name

Ameena 4 Congress

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

Friends For Dr. Ameena

Mailing Address

15774 S LaGrange Rd

P.O. Box 392

Orland Park

IL

60462-1

CITY

STATE

ZIP CODE

Relationship:

☐

Connected Organization

☒

Affiliated Committee

☐

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

Dr. Ameena Matthews

Mailing Address

16719 Anne Marie Ave

Tinley Park

IL

60477-1

Title or Position

CITY

STATE

ZIP CODE

Candidate

Telephone number

630-660-5428

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

Jack Werner

Mailing Address

3914 N Kolmar Ave

Chicago

IL

60641-1

CITY

STATE

ZIP CODE

Title or Position

Communications Dir.

Telephone number

847-338-0912

2021-09-10 00:08:09

Mailing Address**Title or Position**

Telephone number

- Name of Bank, Depository, etc.

Mailing Address

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

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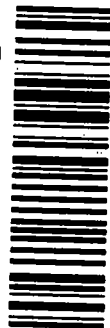
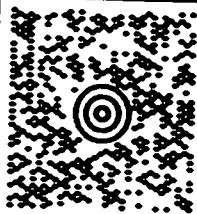
AHEENA MATTHEWS
(773) 828-2833
THE UPS STORE #1869
15774 S LA GRANGE RD
ORLAND PARK IL 60462-4766

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DATE: 07 SEP 2021

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WASHINGTON DC 20002-4694

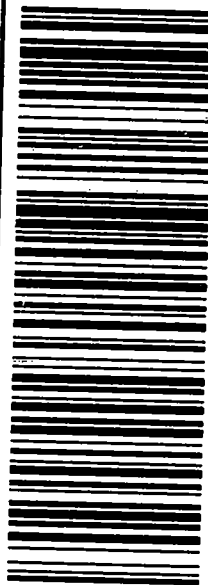
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Federal Election Commission
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 PREPARER	09/10/21 DATE PREPARED

(3/2015)

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