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. Jette for US PO Box 43078 ADDRESS (number and street) (Check if address is changed) Phoenix 85080 ΑZ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jetteforus@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00673566 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. Ingram, Robert, , , Type or Print Name of Treasurer Ingram, Robert, , , [Electronically Filed] 03 16 2018 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

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TYPE OF COMMITTEE	
Candidate Committee:  (a) This committee is a principal campaign committee. (Complete the candidate is	information helow
(a) This committee is a principal campaign committee. (complete the canadate is	,
(b) This committee is an authorized committee, and is NOT a principal campaigr information below.)	r committee. (Complete the candidate
Name of Candidate Jette, Matt, , Dr.,	
Candidate Party Affiliation  DEM  Office Sought:   House  Senate	State AZ President 06
	District
(c) This committee supports/opposes only one candidate, and is NOT an authori	zed committee.
Candidate Candidate	
Party Committee:	(Domooyatio
(Mational, 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	n on line 6.) Its connected organization is
Corporation Corporation w/o Capital St	tock 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 N committee. (i.e., nonconnected committee)	NOT a separate 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	9 6.)
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, at least one of which is an authorized committee of a	
(h) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, none of which is an authorized committee of a federal	
Committees Participating in Joint Fundraiser	
1 FEC ID no	umber C
2. FEC ID no	umber C
3.                               FEC ID no	umber C
4.	umber C

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Write or Type Committee Name		
Jette for US		
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or	r Leadership PAC Sponsor
NONE	<u> </u>	
Mailing Address		
Ü		
		1
	CITY STATE	ZIP CODE
Deletionalia Dominator	Constitution Description Description	Landarship DAC Consess
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	ve Leadership PAC Sponsor
<ol> <li>Custodian of Records: Iden books and records.</li> </ol>	ify by name, address (phone number optional) and position of the pers	son in possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
8. <b>Treasurer:</b> List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; a ssistant treasurer).	nd the name and address of
Full Name Ingram, Ro	pert, , ,	
Mailing Address	PO Box 43078	
	Phoenix	85080
Title or Position	CITY STATE	ZIP CODE
	Telephone number	

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CITY	STATE	ZIP CODE
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