

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

Kirsten Kennedy for Congress

ADDRESS (number and street)

P.O. BOX 219

(Check if address is changed)

North Branch

CITY ▲

VA

STATE ▲

55056-0219

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

kirstenkennedyforcongress.com

Optional Second E-Mail Address

kirstenkennedyforcongress.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

04

02

2018

3. FEC IDENTIFICATION NUMBER ►

C00670927

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

Signature of Treasurer

Date

M M

D D

Y Y Y Y

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.

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

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(Revised 06/2012)

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Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

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

DAVID D WALDOCH

Mailing Address

P.O. Box 95

LINDSTROM

MINN

55045-0095

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

612  
~~308~~-308-7669

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

DAVID D WALDOCH

Mailing Address

P.O. Box 95

LINDSTROM

MINN

55045-0095

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

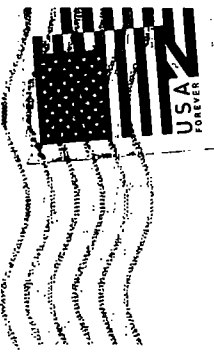
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Kirsten Kennedy for Congress  
PO Box 219  
North Branch, MN 55045

SAINT PAUL, MN 550  
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 PREPARER  
 (3/2015)

4/18/18  
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