PAGE 1 / 4 •

STATEMENT OF **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. Aaron Nettles for Congress 472 1/2 W 22nd Street ADDRESS (number and street) (Check if address is changed) SAN PEDRO 90731 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS nettlesforcongress@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) nettlesforcongress.org (Check if address is changed) DATE 2019 C00719435 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. Nettles, Aaron, , , Type or Print Name of Treasurer Nettles, Aaron, , , [Electronically Filed] 09 13 2019 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

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		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE Committee:	
(a)	x	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. (Corinformation below.)	nplete the candidate
Name Cand		Nettles, Aaron, , ,	
Cand Party	lidate Affiliatio	on DEM Office Sought: X House Senate President	State CA District 44
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	ty Con	nmittee:	(D
(d)		(National, State This committee is a 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 co	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)		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	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	e	
Aaron Nettles f	or Congress	
	Organization, Affiliated Committee, Joint Fundraising Representativ	/e, or Leadership PAC Sponsor
NONE		
	<u></u>	
Mailing Address		
	CITY STATE	ZIP CODE
		211 0002
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Represer	ntative Leadership PAC Sponsor
 Custodian of Records: Ide books and records. 	ntify by name, address (phone number optional) and position of the	person in possession of committee
Nettles, A	aron, , ,	
Full Name	,472 1/2 W 22nd Street	
Mailing Address		
	SAN PEDRO CA	90731
Title or Position	CITY STATE	ZIP CODE
		520 338 0469
8. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee assistant treasurer).	ee; and the name and address of
Full Name Nettles, A	aron, , ,	
of Treasurer	470 4/0 W 000 d Otro d	
Mailing Address	472 1/2 W 22nd Street	
	SAN PEDRO CA	90731
Title or Position	CITY STATE	ZIP CODE
Title or Position		520 338 0469
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	m 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Mailing Address		
	Rancho Palos Verdes CA 90275	, , 1_1
	CITY STATE	ZIP CODE
Name of Bank,	CITY STATE	ZIP CODE
- Name of Bank,	CITY STATE	ZIP CODE
Name of Bank, Mailing Address	CITY STATE Depository, etc.	ZIP CODE
	CITY STATE Depository, etc.	ZIP CODE
	CITY STATE Depository, etc.	ZIP CODE