

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

Princess For President 2024, All Praises Are Due To Prince Milton Lewis Jacob-Fambro II - AND - Princess Miltonah Khadijah Jacob-Fambro

ADDRESS (number and street)

P.O. Box 426417

(Check if address is changed)

San Francisco

CA

94142

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Princess For President 2024@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

Princess For President 2024.com

2. DATE

11/15/2022

3. FEC IDENTIFICATION NUMBER

C00628776

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

Princess Khadijah Maryam Jacob-Fambro

Signature of Treasurer

[Handwritten signature]

Date

11/15/2022

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 Use Only

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

FEC FORM 1 (Revised 03/2022)

NON-FUNCTIONAL ORGANIZATION

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 Princess Khadijah Maryam Jacob-Fambro

Candidate Party Affiliation DEM Office Sought: House Senate President State CA District _____

- (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.)

- (g) This committee is an independent expenditure-only political committee (Super PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

- (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

- (i) 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.
- (j) 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. _____
2. _____

C _____

C _____

NON-PROFIT CORPORATION

Write or Type Committee Name

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

N/A

Mailing Address

Relationship: Connected Organization Affiliated Organization 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

Princess Khadijah Maryam Jacob-Fambro

Mailing Address

P.O. Box 426417

San Francisco

CA

94142

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

415-374-1581

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

Princess Khadijah Maryam Jacob-Fambro

Mailing Address

P.O. Box 426417

San Francisco

CA

94142

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

415-374-1581

NONN 11 22 04 004 1508 15

Full Name of Designated Agent

Princess Khadijah Maryam Jacob-Fambro

Mailing Address

P.O. Box 426417

San Francisco

CA

94142

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

[Empty field]

Telephone number

415-374-1581

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.:

Bank of America

Mailing Address

One Powell Street

San Francisco

CA

94102

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

[Empty field]

Mailing Address

[Empty field]

[Empty field]

[Empty field]

[Empty field]

[Empty field]

CITY ▲

STATE ▲

ZIP CODE ▲

NON AFFILIATI CON ORGANIZAZIONE

5(i) or (j). **Joint Fundraising Participant:**

1. N/A

2. N/A

3. _____

4. _____

FEC ID number C _____

FEC ID number C _____

FEC ID number C _____

FEC ID number C _____

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

_____ N/A _____

Mailing Address _____

Relationship: _____ CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent: Identify by name, address (phone number – optional)**

Full Name _____

Mailing Address _____

_____ N/A _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

_____ Telephone Number _____-_____-_____

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc. _____

Mailing Address _____

_____ N/A _____

CITY ▲ STATE ▲ ZIP CODE ▲

NON PROFIT ORGANIZATION

UNITED STATES
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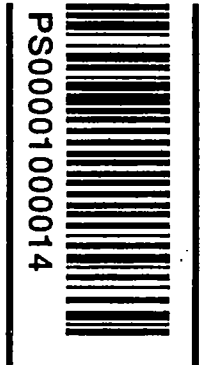
Expected delivery date specified. All Praises Are Due To: My Son & Daughter

domestic shipment include up to \$50 of insurance (restrictions apply). Tracking included for domestic and many international destinations.

and international insurance. * Princess Miltonah Khadijah Jacob-Fambro used international insurance. * Princess Miltonah Khadijah Jacob-Fambro

International Manual at <http://www.usps.com> for details. * Princess Miltonah Khadijah Jacob-Fambro

IT PRAISES SATAN
AND BLESS AMERICA!!!
LOVE YOU MOMMY, BABY AND SON I AM A TEAM!!!
WE BLESS YOU
AND BLESS AMERICA!!!
LOVE YOU



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 ★ MAIL ★



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FROM:
 Princess for President 2024
 P.O. Box 426417
 San Francisco, CA 94142
 I Love You Son Daughter
 ALL PRAISES ARE DUE TO PRINCESS MILTONAH KHADIJAH JACOB-FAMBRO
 AND - PRINCESS MILTONAH KHADIJAH JACOB-FAMBRO

TO: FEDERAL ELECTIONS COMMISSIONS
 1050 FIRST STREET NE
 WASHINGTON, DC 20463

NONN: 111 N1 0M 004 N000 N8

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <p style="font-size: 2em; margin: 0;"><i>SPM</i></p> <p>PREPARER</p> </div> <div style="width: 40%; text-align: right;"> <p style="font-size: 1.5em; margin: 0;">11/21/22</p> <p>DATE PREPARED</p> </div> </div>	

(3/2015)

2025 RELEASE UNDER E.O. 14176