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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. Friends of Kojo Asamoa-Caesar 1916 N Kenosha Ct ADDRESS (number and street) (Check if address is changed) Tulsa 74106 OK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@kojoforcongress.com (Check if address is changed) Optional Second E-Mail Address kasamoa@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.kojoforcongress.com (Check if address is changed) DATE 2019 C00724336 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. Asamoa-Caesar, Kojo, , , Type or Print Name of Treasurer Asamoa-Caesar, Kojo, , , [Electronically Filed] 03 02 2020 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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		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.)					
Nam Can	e of didate	Asamoa-Caesar, Kojo, , ,					
	didate / Affiliati	on DEM Office Sought: X House Senate President	State OK District 01				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Nam Cand	e of didate						
Par	ty Con	nmittee:					
(d)			Democratic, Republican, etc.) Party.				
Poli	tical A	action Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected 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 part 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.)					
Join	t Func	draising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political				
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	1						

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Write or Type Committee N		·
Friends of Ko	jo Asamoa-Caesar	
	ed Organization, Affiliated Committee, Joint Fundraising Representat	ive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conn	ected Organization Affiliated Committee Joint Fundraising Representation	entative Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of th	ne person in possession of committee
Asam Full Name	oa-Caesar, Kojo, , ,	
Mailing Address	P.O. Box 48551	
	Tulsa	74148
Title or Position	CITY STATE	ZIP CODE
	Telephone number	918 - 688 - 4986
Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of the commit g., assistant treasurer).	ttee; and the name and address of
Full Name Asamo of Treasurer	oa-Caesar, Kojo, , ,	
Mailing Address	P.O. Box 48551	
	Tulsa	74148
Title or Position	CITY STATE	ZIP CODE
	Telephone number	918 - 688 - 4986

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Full Name of Designated Agent						
Mailing Address						
	CITY STATE	ZIP CODE				
Title or Position						
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 Oklahoma					
Mailing Address	3237 S Peoria					
	Tulsa OK 74105					
	CITY STATE	ZIP CODE				
Name of Bank, [Depository, etc.					
Mailing Address						
	CITY STATE	ZIP CODE				