FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		See instructions)	ON		Office use only
NAME OF COMMITTEE (in	full) (Chec		Example: If typying, type over the lines	12FE4M5	The day only
Elections Con	nmittee of the County	of Orange Fede	ral PAC	1 1 1 1 1	
ADDRESS (number and	1700 E. G	arry Street #23	 - 		
(Check if addr	ress LILL	<u> </u>	<u> </u>	1111	
is changed)	Santa Ana	a 		CA L	92705 -
COMMITTEE'S E-MA	II ADDRESS	CIT	(▲	STATE	ZIP CODE 🔺
	I I I I I I I I I I				
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
	<u> </u>			1111	
	<u> </u>	<u> </u>	<u> </u>	1 1 1 1 1	
COMMITTEE'S FAX N 9499750865	NUMBER				
2. DATE 0.6	D D Y Y 20	0 6			
3. FEC IDENTIFICA	ATION NUMBER	C	00192302		
4. IS THIS STATEM	MENT NEW (N)	OR	X AMENDED (A)		
I certify that I have exam	ined this Statement and to the	best of my knowledg	e and belief it is true, correct ar	d complete	
Type or Print Name of	Treasurer David	L. Gould			
Signature of Treasure	Electronically Filed by	David L. Gould	<u> </u>	Date 06	26 YYY006
NOTE: Submission of fa	•		ect the person signing this State	•	s of 2 U.S.C. S437g.
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2003)

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5.	. TYPE OF COMMITTEE (Check One)		
	(b) This committee is an authori	campaign committee. (Complete the candidate in zed committee, and is NOT a principal campaign	
	information below.)		
	Name of Candidate		
		Office Sought: House Senate	President State District
	(c) This committee supports/opp	oses only one candidate, and is NOT an authorize	ed committee.
	Name of Candidate		
	(d) This committee is a	(National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	(e) This committee is a separate (f) X This committee supports/opp		· · · · · · · · · · · · · · · · · · ·
	(f) X This committee supports/opp committee.	oses more than one Federal candidate, and is NC	1 a separate segregated fund or party
6.	. Name of Any Connected Organization or	Affiliated Committee	
ı			
	Mailing Address		
		CITY	STATE ▲ ZIP CODE ▲
	Relationship		
	Type of Connected Organization:		
	Corporation	Corporation w/o Capital Stock	Labor Organization
	Membership Organization	Trade Association	Cooperative

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٧	Vrite or Type Committee N	lame		
	Elections Commit	tee of the County of Orange Federal I	PAC	
7.		: Identify by name, address, (phone nunittee books and records.	umber optional), and position o	f the person in
	Full Name			
	Mailing Address			
	Title or Position ♥	CITY A	STATE▲	ZIP CODE A
			Telephone number	
8.	name and address of Full Name	name and address (phone number oping any designated agent (e.g., assistant in arvey Liss	tional) of the treasurer of the contreasurer).	nmittee; and the
	Mailing Address	1700 E. Garry Stree	et, Suite #231	
		Santa Ana	CA	92705
	Title or Position ♥	CITY A	STATE▲	ZIP CODE A
	Treas	surer	Telephone number	
	Full Name of Designated Agent Designated	avid L. Gould		
	Mailing Address	555 South Flower S	Street, Ste.4210	
		Los Angeles	CA	90071
	Title or Position ♥	CITY A	STATE A	ZIP CODE A
	Assis	stant Treasurer	Telephone number	

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accessfety deposit boxes or maintains funds. Name of Bank, Depository, etc.								;COL	unts	s, re	nts																							
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	Mailing Address				l			<u> </u>	<u> </u>	<u> </u>				1			 	 	 	 			1												
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