

FEDERAL
ELECTION
OPERATIONS CENTER

2004 AUG 16 A 10 28

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. 128734ME

TORRANCE DEMOCRATIC CLUB

ADDRESS (number and street) 3450 Emerald St

(Check if address is changed) #4 TORRANCE CA 90503-1

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

Torrancedemsoyahoogroups.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

http://groups.yahoo.com/group/torrancedemsoy/

COMMITTEE'S FAX NUMBER

2. DATE 08 11 2004

3. FEC IDENTIFICATION NUMBER C00403121

4. IS THIS STATEMENT NEW (N) OR AMENDED (A) [X]

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 Jerome J. Haig

Signature of Treasurer [Signature] Date 10/8/11/2004

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.

5. TYPE OF COMMITTEE (Check One)

- (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 _____

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

- (c) This committee supports/opposes only one candidate, and is NOT an authorized 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 segregated fund.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

NONE _____

Mailing Address _____

 CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

- Type of Connected Organization:
- Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative

Write or Type Committee Name

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 Jerome J. Haig

Mailing Address 3655 Torrance Blvd
Suite 490
Torrance CA 90503

Title or Position Treasurer CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number (310) (543) (8814)

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 Jerome J. Haig

Mailing Address 3655 Torrance Blvd
Suite 490
Torrance CA 90503

Title or Position Treasurer CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number (310) (543) (8814)

Full Name of Designated Agent

Mailing Address

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.

Union Bank of California

Mailing Address

Finance Office #120

124030 Hawthorne Blvd

Fontana CA 90305

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address


CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
	8/16/04
PREPARER (5/2004)	DATE PREPARED