Only

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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. Napa County Democratic Central Committee 5429 Madison Avenue ADDRESS (number and street) (Check if address is changed) Sacramento 95841 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS campaigns@rcbs.us (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.napadems.org (Check if address is changed) DATE 07 2019 C00504233 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. Lewis, Denise, , , Type or Print Name of Treasurer Lewis, Denise,,, [Electronically Filed] 02 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

Local 202-694-1100

	FFC F a	4 (Paying 02/2000)	Dogo 2			
		omm 1 (Revised 02/2009) OMMITTEE	Page 2			
		e Committee:				
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	1			
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Nam Cand	e of didate					
	didate / Affiliati	Office Sought: House Senate President	State CA District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand	e of lidate					
Par	ty Con	nmittee:	(Domogratio			
(d)	×	This committee is a SUB (National, State or subordinate) committee of the DEM	(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 connected organization						
		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 sep 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 to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

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Write or Type Committee		5
Napa County	Democratic Central Committee	
· · ·	cted Organization, Affiliated Committee, Joint Fundraising Represent	tative, or Leadership PAC Sponsor
None		
Mailing Address		
	CITY	TE ZIP CODE
Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Repre	
. Custodian of Records books and records.	: Identify by name, address (phone number optional) and position of	the person in possession of committee
	is, Denise, , ,	
Full Name Mailing Address	5429 Madison Avenue	
Mailing Address		
	Sacramento	A 94559
Title or Position	CITY STAT	E ZIP CODE
Custodian of Records		916 - 348 - 9100
	ne and address (phone number optional) of the treasurer of the comr e.g., assistant treasurer).	mittee; and the name and address of
Full Name O'Ke of Treasurer	elley, Johanna, , ,	
Mailing Address	Post Office Box 652	
	Napa	94559
Title or Position , Treasurer	CITY STAT	
	Telephone number	707 812 5631

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Full Name of Designated Agent	Lewis, Denise, , ,					
Mailing Address	5429 Madison Avenue					
	Sacramento CITY	CA STATE	95841 ZIP CODE			
Title or Position Assistant Treasu	rer Telepho	one number 916	348 9100			
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. First Foundation Bank 12233 Douglas Blvd., Suite 300						
Mailing Address						
	Roseville	CA	95661			
	CITY	STATE	ZIP CODE			
Name of Bank, D	epository, etc.					
Mailing Address						

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' + H9 A = N5 H+ CB

Form/Schedule: F1A Transaction ID:

Amend to update officer information and add web address

Form/Schedule: Transaction ID:

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g)	or(h). Joint Fundraisin	g Participant:			
	1.		FEC	ID number	C
	2.		FEC	ID number	С
	3.		FEC	ID number	С
	4		FEC	ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Jo	oint Fundraising Re	epresentativ	e, or Leadership PAC Sponsor
	Mailing Address				
	Relationship:	CITY ▲	_	STATE ▲	ZIP CODE ▲
	Connected	I Organization Affiliated Committee	Joint Fundraisi	ng Represent	ative Leadership PAC Sponsor
8.		by name, address (phone number – o	ptional)		
	Mailing Address	PO Box 652			
		Napa		CA	94559
	TITLE OR POSITION	▼ CITY ▲		STATE ▲	ZIP CODE ▲
	POF		Telephone	Number	707 335 8866
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories intains funds.	in which the comn	nittee deposit	s funds, holds accounts, rents
	Mailing Address				
	Mailing Address				
					1
		CITY A		STATE ▲	ZIP CODE ▲