Image# 2	29933465060
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FEC FORM 1	STATEMENT OF ORGANIZATION (See instructions)	Office use only
1. NAME OF COMMITTEE (in f	ull) (Check if name Example: If typying, type over the lines	12FE4M5
ADDRESS (number and s	treet)	
(Check if address is changed)		
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAI	_ ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	sscally@nmgovlaw.com	
COMMITTEE'S WEB I (Check if address is changed)		
2. DATE 0.4	/ D D / Y Y Y Y 2009	
3. FEC IDENTIFICA	TION NUMBER C C00459693	
4. IS THIS STATEM	ENT X NEW (N) OR AMENDED (A)	
I certify that I have examin Type or Print Name of ⁻ Signature of Treasurer	Electronically Eiled by Staven S. Lucas	d complete Date 04 / 07 / Y Y Y Y 099
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	
Office		

Office Use Only					For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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FEC	Form 1 (Revised 02/2009)	Page 2
	OMMITTEE (Check One)	
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 t information below.)	he candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Comr	nittee: (National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
Political Ac	tion Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
	Corporation Corporation w/o Capital Stock	bor Organization
	Membership Organization Trade Association Co	ooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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.)	
Joint Fundra	aising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political

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

(h)

1.	$\lfloor \ldots \ldots$	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.	<u> </u>	FEC ID number	C

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

ZUFFA POLITICAL ACTION COMMMITTEE

	Name of Any Connected Org	anization, Affiliated Committee, Joint Fund	Iraising Representative, or Leade	ership PAC Sponsor
	NONE			
	Mailing Address			
		CITY	STATE A	
	Relationship:			
	Connected Organization	Affiliated Committee Join	t Fundraising Representative	Leadership PAC Sponsor
7.	possession of Committee I	IS. LUCAS	optional), and position of th	
	Mailing Address	2350 KERNER BLVD., SU	JITE 250	
		SAN RAFAEL	CA	94901 _
	Title or Position ♥		STATE	
	Title or Position ♥ Custodian		STATE A Telephone number	ZIP CODE 🛦 - <u>389</u> - <u>6800</u>
8.	Custodian Treasurer: List the name a name and address of any Full Name		Telephone number 415 of the treasurer of the commi	- <u>389</u> - <u>6800</u>
8.	Custodian Treasurer: List the name a name and address of any Full Name	of Records nd address (phone number optional) designated agent (e.g., assistant treasu	Telephone number 415 of the treasurer of the commi urer).	- <u>389</u> - <u>6800</u>
8.	Custodian Treasurer: List the name a name and address of any Full Name of Treasurer	of Records nd address (phone number optional) designated agent (e.g., assistant treasu	Telephone number 415 of the treasurer of the commi urer).	- <u>389</u> - <u>6800</u>
8.	Custodian Treasurer: List the name a name and address of any Full Name of Treasurer	of Records Ind address (phone number optional) designated agent (e.g., assistant treasu N S. LUCAS 2350 KERNER BLVD., Si	Telephone number 415 of the treasurer of the commi urer).	- <u>389</u> - <u>6800</u> ttee; and the

FEC Form 1 (Revis					
Full Name of Designated Agent	JENNIE UNGER EDDY				
Mailing Address	2350 KERNER BLVD.,	SUITE 250			
	SAN RAFAEL		CA	94901	
Title or Position ♥	CITY A		STATE 🛦	ZIP COD	DE A
Assista	ant Treasurer	Telephone nui	mber	389	6800
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