| Image# | 11 | 932231 | 061 |
|--------|----|--------|-----|
|--------|----|--------|-----|

| 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 |
| Janice Hahn fo | or Congress | |
| | 777 S. Figueroa Street, Suite 4050 Image: treet) | |
| (Check if address is changed) | Los Angeles | |
| | CITY | STATE▲ ZIP CODE ▲ |
| COMMITTEE'S E-MAI (Check if address is changed) | L ADDRESS (Please provide only one e-mail address) | |
| COMMITTEE'S WEB | PAGE ADDRESS (URL) | |
| (Check if address is changed) | | |
| 2. DATE M M 0 8 | / D D / Y Y Y Y 15 / 2011 | |
| 3. FEC IDENTIFICA | TION NUMBER C C00493023 | |
| 4. IS THIS STATEM | ENT X NEW (N) OR AMENDED (A) | |
| I certify that I have examin | ned this Statement and to the best of my knowledge and belief it is true, correct and | d complete |
| Type or Print Name of ⁻ | Treasurer Stephen Kaufman | |
| Signature of Treasurer | Electronically Filed by Stephen Kaufman | Date 08 / 0 15 / Y Y Y Y |
| NOTE: Submission of fal | se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED W | |
| Office Use Only | For further information of Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100 | |

Image# 11932231062

| | FEC F | orm 1 (Revised 02/2009) | Page 2 |
|----|------------------------------|--|---|
| 5. | TYPE OF CO Candidate C | OMMITTEE (Check One) ommittee: | |
| | (a) X | 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 information below.) | e candidate |
| | Name of Candidate | Janice Hahn | |
| | Candidate Party Affiliati | on Office X House Senate President | State CA District 44 |
| | (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| | Name of Candidate | | |
| | Party Comm | | |
| | (d) | | (Democratic, Republican,etc.) Party. |
| | Political Act | ion Committee (PAC): | |
| | (e) | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected | organization is a: |
| | | Corporation Corporation w/o Capital Stock Labo | or Organization |
| | | Membership Organization Trade Association Coo | operative |
| | | 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 committee. (i.e., nonconnected committee) | 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 | ising Representative: | |
| | (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or in committees/organizations, at least one of which is an authorized committee of a federal candidate. | more political |
| | (h) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate. | more political |
| | Com | mittees Participating in Joint Fundraiser | |
| | | 1 FEC ID number C | |
| | | 2 FEC ID number C | |
| | | 3 FEC ID number | |

С 4. FEC ID number

JanjaeidalHator Congress

6.

| FEC Form 1 (Revised 02/2009) | Page 3 |
|------------------------------|--------|
| Write or Type Committee Name | |
| Janice Hahn for Congress | |

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

777 S. Figueroa Street, Suite 4050 Mailing Address 1 1 1 1 1 Los Angeles | ÇA | 90017 CITY STATE 🛦 ZIP CODE 🔺

| Relationship: | | | |
|------------------------|----------------------|----------------------------------|------------------------|
| Connected Organization | Affiliated Committee | Joint Fundraising Representative | Leadership PAC Sponsor |

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 | ufman | | |
|---------------------|------------------------|----------------------|----------|
| Mailing Address | 777 S. Figueroa St., S | uite 4050 | |
| | Los Angeles | CA | 90017 _ |
| Title or Position ▼ | CITY 🛦 | STATE | |
| Treasurer | | Telephone number 213 | 452 6565 |

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 | Stephen Kaufman | | | |
|---------------------------|-----------------|------------------------|---------------------|---------|
| Mailing Address | | 777 S. Figueroa St., S | uite 4050 | |
| | | Los Angeles | | |
| Title or Position ♥ | | | STATE | |
| Т | reasurer | | Telephone number213 | 4526565 |

| FEC Form 1 (Revis | sed 02/2009) | | Page 4 |
|--|--|---|-----------------------|
| Full Name of Designated Agent | Stephen Kaufman | | |
| Mailing Address | 777 S. Figueroa St., Suite | 4050 | |
| | Los Angeles | CA | 90017 |
| Title or Position ▼ | CITY A | STATE 🛦 | ZIP CODE 🛦 |
| Treasu | rer | Telephone number | 4526565 |
| Banks or Other Deposit safety deposit boxes or m Name of Bank, Depositor | aintains funds. y, etc. Alifornia Bank & Trust | the committee deposits funds, | holds accounts, rents |
| safety deposit boxes or m Name of Bank, Depositor | aintains funds. y, etc. | • the committee deposits funds, | holds accounts, rents |
| safety deposit boxes or m Name of Bank, Depositor | aintains funds. y, etc. Alifornia Bank & Trust | | holds accounts, rents |
| safety deposit boxes or m Name of Bank, Depositor | aintains funds. y, etc. alifornia Bank & Trust 550 Hope Street 550 Hope Street | | |
| safety deposit boxes or m Name of Bank, Depositor | aintains funds. y, etc. alifornia Bank & Trust 550 Hope Street L | | |
| safety deposit boxes or m Name of Bank, Depositor | aintains funds. y, etc. alifornia Bank & Trust 550 Hope Street L | | |
| safety deposit boxes or m Name of Bank, Depositor | aintains funds. y, etc. alifornia Bank & Trust 550 Hope Street L | STATE <u>A</u> | |
| safety deposit boxes or m Name of Bank, Depositor Mailing Address Name of Bank, Depositor | aintains funds. y, etc. alifornia Bank & Trust 550 Hope Street L | CA CA CA STATE ▲ | |
| safety deposit boxes or m Name of Bank, Depositor Mailing Address Name of Bank, Depositor | aintains funds. y, etc. alifornia Bank & Trust 550 Hope Street ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ | CA CA CA STATE ▲ | |