FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See	instructions)		Office use only		
NAME OF COMMITTEE (in f	ull) (Check if is change	name Example: If typy over the lines	ing, type 12FE4M5			
PASADENA AF	REA UNITED DEMOCRAT	IC HEADQUARTERS		<u> </u>		
ADDRESS (number and s	treet) 1212 S. Victo	ory Blvd.				
X (Check if address is changed)	Burbank		CA)	91502		
0014477777	4000500	CITY▲	STATE▲	ZIP CODE ▲		
pete@durkeea	ndassociates.com					
COMMITTEE'S WEB I	PAGE ADDRESS (URL)					
سيبينا			1111111			
COMMITTEE'S FAX N 8182600657	UMBER					
2. DATE 0 9	19 / Y Y Y Y 2007	Y				
3. FEC IDENTIFICATION	TION NUMBER	C C00380568				
4. IS THIS STATEM	ENT NEW (N)	OR X AMEN	NDED (A)			
I certify that I have examin	ned this Statement and to the bes	t of my knowledge and belief it is	true, correct and complete			
Type or Print Name of ⁻	Freasurer Kinde Du	ırkee				
Signature of Treasurer	Electronically Filed by Ki	nde Durkee	Date 11	M / D D / Y Y Y Y Y Y		
NOTE: Submission of fals	se, erroneous, or incomplete infor	mation may subject the person si		<u>-</u>		
Office Use Only		Federal Ele	rinformation contact: ection Commission 00-424-9530 194-1100	FEC FORM 1 (Revised 02/2003)		

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5.	TYPE OF COMMITTEE (Check One)					
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)					
	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					
		emocratic, epublican,etc.) Party.				
	(e) This committee is a separate segregated fund					
	(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fur committee.	and or party				
6.	Name of Any Connected Organization or Affiliated Committee					
	_None					
l						
	Mailing Address					
	CITY STATE A	ZIP CODE A				
	Relationship NONE					
	Type of Connected Organization:					
	Corporation Corporation w/o Capital Stock Labor Organization	ion				
	Membership Organization Trade Association Cooperative					

Write or Type Committee Name

possession of		PASADENA AREA UNITED DEMOCRATIC HEADQUARTERS Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.						
Full Name	Kinde Du	rkee		1 1 1		1 1 1 1		
Mailing Address	_	1212 S. Victory Blvd.						
3								
	_	Burbank		<u> </u>	91502			
Title or Position	∀	CITY A	STA	TE▲	ZIP CO	DE 🛦		
	Treasurer		Telephone number	818	260	0669		
Treasurer: Lis	st the name an dress of any de	d address (phone number optionalsignated agent (e.g., assistant trea	al) of the treasurer of the	ne commit	tee; and the			
Full Name of Treasurer	Kinde Du	rkee						
Mailing Address	_	1212 S. Victory Blvd.						
	_	Burbank		<u> </u>	91502 _			
Title or Position	- -	Burbank CITY A	C.		91502 - ZIP CO	DDE 🛦		
Title or Position	▼ Treasurer							
Title or Position Full Name of Designated Agent			STA	TEA	ZIP CC	 DDE ▲ 0669		
Full Name of Designated	Treasurer		STA	TEA	ZIP CC			
Full Name of Designated Agent	Treasurer		STA	818	ZIP CC			

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9.	Banks or Other Depositorie safety deposit boxes or maint	ains funds.	ccounts, rents
	Name of Bank, Depository, et	dc.	
	City N	National Bank	
	Mailing Address	555 S. Flower St.	
		12th Floor	
		Los Angeles CA	90071
		CITY △ STATE △	ZIP CODE 🛆