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### **MEMORANDUM**

September 7, 2012

Federal Election Commission 999 E Street, NW Washington, DC 20463

RE:

Intent to establish a separate non-contribution account

Restoring Our Community C00410130

Dear Sirs:

Consistent with the stipulated judgment in *Carey v. FEC*, the above-referenced committee intends to establish a separate bank account to deposit and withdraw funds raised in unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

If you have any questions about this matter, please contact Ashlee Titus, Assistant Treasurer, at (916) 442-7757.

Thank you.

# 12030883122

FEC FORM

## STATEMENT OF ORGANIZATION

RECEIVED

FURIVI I	•		2012 SEI	P I I AM IO: 20 Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	ALL-GENTER
Restoring Our Community				
		1		
ADDRESS (number and street)	455 Capitol Mall,	Suite 600		
(Check if address is changed)	Sacramento		CA L	95814
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE				
(Check if address	feccomm@bmhlaw.co	mc		
is changed)				
COMMITTEE'S WEB PAGE AL	DDRESS (URL)			·
(Check if address is changed)				
2. DATE 09 0	7 2012	nde kunn makken soonale opposite kunde konstande opposite kunde med kunde konstande kunde konstande kunde kons		
3. FEC IDENTIFICATION N	UMBER C	C00520130		
4. IS THIS STATEMENT	NEW (N) OF	R X 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.
Type or Print Name of Treason	er <u>Charles H. Bell</u>	, <sub>Jr.</sub>		
Signature of Treasurer and FEC 1 to change commit	ttee type, treasurer	, bank and address.	Date 09	7 07 2012
NOTE: Submission of false, error		ation may subject the person signing		the penalties of 2 U.S.C. §437g
Office Use		For further information Federal Election Commit Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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	FEC Fo	rm 1 (Revised 02/2009) Page 2							
		COMMITTEE							
	didate	Committee:  This committee is a principal campaign committee. (Complete the candidate information below.)							
a) 									
b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)							
Vamo Cano	e of lidate								
	lidate Affiliati	Office State  on Sought: House Senate President  District							
c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.							
Name Cand	e of lidate								
		nmittee:							
d)	in the second	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.							
Poli	tical A	action 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 Labor Organization							
		Membership Organization Trade Association Cooperative							
٠		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 segregated fund or party committee. (i.e., nonconnected committee)							
		In addition, this committee is a Lobbyist/Registrant PAC.							
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)							
oin	t Func	draising Representative:							
g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political							
		committees/organizations, at least one of which is an authorized committee of a federal candidate.							
1)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, nane of which is an authorized committee of a federal candidate.							
	Com	nmittees Participating in Joint Fundraiser							
	1.	FEC ID number C							
	2.								
	3.								
	J.								
	4.								

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Write or Type Committee Na	ne			
Restoring Our Community				
6. Name of Any Connected	Organization, Affiliated Committee	, Joint Fundraising Repr	esentative, or Le	adership PAC Sponsor
Ndne				
Mailing Address				
•				
	CITY		STATE	ZIP CODE
W.C.G.T	ed Organization Affiliated Commit	G.MM	<del></del>	
<ol> <li>Custodian of Records: Id books and records.</li> </ol>	entify by name, address (phone num	ber optional) and position	on of the person	in possession of committee
Charle Full Name	s H. Bell,	<u> </u>	1 1 1 1 1	
Mailing Address	455 Capitol Mall, Suite 6	00		
	1		1111	
	Sacramento		CA 9	5814
Title or Position	CITY		STATE	ZIP CODE
Custodian of Records			, 916	
custodian of Records		Telephone num		J- 442 7757 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Treasurer: List the name a any designated agent (e.g.	and address (phone number option assistant treasurer).	al) of the treasurer of the	committee; and	the name and address of
Full Name Charle of Treasurer	5 H. Bell,		<u> </u>	
Mailing Address	455 Capitol Mall, Suite 6	00 	11111	
			1111	
	Sacramento		CA 95	5814
Title or Position	CITY		STATE	ZIP CODE
Treasurer		Telephone num	916 ber	- 442 - 7757

CITY

STATE

ZIP CODE

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|Ashlee N. Titus

Full Name of Designated

Agent

Mailing Address

(3/2005)

### **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark Shipping, Date fed Ex **Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER DATE PREPARED