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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) (Check if address is changed) DATE 31 2018 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] 01 2018 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

Only Local 202-694-1100

FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE OF C		
Candidate	e 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. (Complinformation below.)	ete the candidate
Name of Candidate		
Candidate Party Affiliation	on Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con		
(d) x	OUD '	Democratic, epublican, etc.) Party.
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a
	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 separate seg committee. (i.e., nonconnected committee)	regated 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 Fund	Iraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	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.	or more political
Com	mittees Participating in Joint Fundraiser	
1.		
2.	FEC ID number C	
3.		
4.		

FEC Form 1 (Revised (02/2009)		Page 3
Write or Type Committee Name			1 age 3
	emocratic Central Comm	nittee	
· · · · · · · · · · · · · · · · · · ·	Organization, Affiliated Committee, Joint Fundr		rship PAC Sponsor
.None			
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint	Fundraising Representative L	Leadership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number optional	I) and position of the person in p	ossession of committee
Richard, K	iim, , ,		
	Post Office Box 652		
Mailing Address			
	Napa	CA 94559	
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		ephone number 903 - L	363 5353
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasussistant treasurer).	surer of the committee; and the r	name and address of
Full Name Richard, K	im, , ,		ı
of Treasurer	Post Office Box 652		
Mailing Address			
	L None		
	Napa CITY	CA 94559 STATE	ZIP CODE
Title or Position Treasurer		. 903	363 __ 5353
<u> </u>	Tele	ephone number	

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Full Name of Designated	Lewis, Denise, , ,	
Agent	5429 Madison Avenue	
Mailing Address	3-23 Madison Avenue	
	Sacramento CA 95841 CITY STATE Z	ZIP CODE
Title or Position		
Assistant Treas	urer	48 9100
Name of Bank, Mailing Address	Pirst Foundation Bank 2250 Douglas Blvd., Suite 190 Roseville CA 95661	
	CITY STATE 2	ZIP CODE
Name of Bank,	Depository, etc.	
Mailing Address		
	CITY STATE 2	ZIP CODE

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

Form/Schedule: F1N Transaction ID:

Amend to Change Bank Name and Add Assistant Treasurer

Form/Schedule: Transaction ID:

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

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5(g) c	or(h). Joint Fundraisin g	g Participant:	
	1.		FEC ID number
	2.		FEC ID number C
	3.		FEC ID number
	4		FEC ID number
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundrais	sing Representative, or Leadership PAC Sponsor
	Mailing Address		
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee Joint Fu	undraising Representative Leadership PAC Sponsor
8.	Phillips, C	by name, address (phone number – optional) thair, G. Anthony, , ,	
8.	Phillips, C		
8.	Phillips, C	chair, G. Anthony, , ,	STATE A ZIP CODE A
8.	Phillips, C Full Name	CITY A	
	Phillips, C Full Name Mailing Address TITLE OR POSITION POF	chair, G. Anthony, , , CITY Tele Tele Ties: List all banks or other depositories in which the	STATE A ZIP CODE A phone Number 415 - 309 - 1235
	Phillips, C Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or mail	chair, G. Anthony, , , CITY Tele Tele Ties: List all banks or other depositories in which the	STATE A ZIP CODE A phone Number 415 - 309 - 1235
	Phillips, C Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or mail	chair, G. Anthony, , , CITY Tele Tele Ties: List all banks or other depositories in which the	STATE A ZIP CODE A phone Number 415 - 309 - 1235
	Phillips, C Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	chair, G. Anthony, , , CITY Tele Tele Ties: List all banks or other depositories in which the	STATE A ZIP CODE A phone Number 415 - 309 - 1235
9.	Phillips, C Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	chair, G. Anthony, , , CITY Tele Tele Ties: List all banks or other depositories in which the	STATE A ZIP CODE A phone Number 415 - 309 - 1235