PAGE 1/6 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 02 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] 02 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

	FFC F a	4 (Paying 02/2000)	Dogo 2
		omm 1 (Revised 02/2009) OMMITTEE	Page 2
		Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	1
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State CA District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Par	ty Con	nmittee:	(Domogratio
(d)	×	This committee is a SUB (National, State or subordinate) committee of the DEM	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 secommittee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form	1 (Revised 02/2009)	Page 3
Write or Type Com		-
Napa Co	unty Democratic Central Committee	
<u> </u>	Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
None		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Lea	adership PAC Sponsor
. Custodian of Robooks and record	ecords: Identify by name, address (phone number optional) and position of the person in posds.	session of committee
	Richard, Kim, , ,	I
Full Name	Post Office Box 652	
Mailing Address		
	Napa CA 94559	-
Title or Position	CITY STATE	ZIP CODE
Custodian of Re	ecords Telephone number	363
3. Treasurer: List the any designated a	he name and address (phone number optional) of the treasurer of the committee; and the natagent (e.g., assistant treasurer).	me and address of
Full Name of Treasurer	Richard, Kim, , ,	
Mailing Address	Post Office Box 652	
	Napa CA 94559	
Title or Position Treasurer		ZIP CODE 363 5353
<u> </u>	Telephone number	

FEC Form 1 (I	Revised 02/2009)		Page 4
Full Name of Designated Lew Agent	wis, Denise, , ,		
Mailing Address	5429 Madison Avenue		
	Sacramento	CA 95841 STATE	ZIP CODE
Title or Position Assistant Treasurer	Telephone nu	ımber <u> 916</u> – <u> </u>	348 9100
safety deposit boxes of Name of Bank, Depos		ttee deposits funds, hol	lds accounts, rents
Mailing Address	2233 Douglas Blvd., Suite 300		
	Roseville	CA 95661	
	CITY	STATE	ZIP CODE
Name of Bank, Depos	sitory, etc.		
Mailing Address			
	CITY	STATE	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: F1A Transaction ID:

Amend to Update Bank Address

Form/Schedule: Transaction ID:

FEC Form 1S (Revised 02/2017)

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

Page ____ **of** ____

1.					
1.			FEC II	number	C
2.			FEC II	number	C
3.			FEC II	number	С
4.			FEC II) number	С
ame of Any Connected	Organization, Affilia	ated Committee, Joint	Fundraising Rep	presentative	e, or Leadership PAC Spor
<u> </u>					
Mailing Address					
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
esignated Agent: Identify Phillips, C Full Name	Chair, G. Anthony, , ,				
Mailing Address					
Mailing Address					
Mailing Address					
		CITY A		STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION POF		CITY A	Telephone N		ZIP CODE A 415 309 12
TITLE OR POSITION POF anks or Other Depositor fety deposit boxes or ma	ries: List all banks o		Telephone N	umber	
TITLE OR POSITION POF anks or Other Depositor fety deposit boxes or ma	ries: List all banks o		Telephone N	umber	415 309
TITLE OR POSITION POF anks or Other Depositor afety deposit boxes or material deposit boxes or material depository, etc.	ries: List all banks o		Telephone N	umber	415 309