

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Aug 4 12 44 PM '95

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COSTA MESA, CALIFORNIA 92626
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REED & DAVIDSON

ATTORNEYS AT LAW

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DANA W. REED
KIMMY DAVIDSON

OF COUNSEL
DARRYL H. WOOD
FRANCLY W. PERTZ

July 31, 1995

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Dear Filing Officer:

Enclosed for filing is the original and one copy of the following:

Committee: California Real Estate Political Action Committee (CREPAC/Federal)

Form: FEC 1 Amendment

The report is being sent by:

Certified Mail # P 474 575 324

Next-day delivery # _____

Please endorse this transmittal letter as acknowledgement of receipt and return it in the self-addressed, stamped envelope provided.

Sincerely,

Reed & Davidson

GC:lb

Enclosure

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STATEMENT OF ORGANIZATION

(See reverse side for instructions)

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1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) California Real Estate Political Action Committee/	2. DATE 7/31/95
(b) Mailing and Street Address (CREPAC/Federal) <input type="checkbox"/> (Check if address is changed) 525 S. Virgil Ave.	3. FEC IDENTIFICATION NUMBER C00083279
(c) City, State and ZIP Code Los Angeles, CA 90020	4. IS THIS STATEMENT AN AMENDMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

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5. TYPE OF COMMITTEE (Check one)

- (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. (Complete the candidate information below.)
- | | | | |
|-------------------|-----------------------------|---------------|----------------|
| Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
| | | | |
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization

- Corporation Corporation w/b Capital Stock Labor Organization Membership Organization Trade Association Cooperative

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	Mailing Address	Title or Position

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	Mailing Address	Title or Position
Cary Davidson	777 S. Figueroa St. Ste. 3700 Los Angeles, CA 90017	Assistant Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code

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 TREASURER Cary Davidson	SIGNATURE OF TREASURER 	DATE 7-31-95
--	----------------------------	-----------------

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.

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Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

DATE OF RECEIPT

First Class Mail

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Registered/Certified Mail

POSTMARKED

7-31-95

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Received from the House Office of Records
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

MRT

PREPARER

8-4-95

DATE PREPARED