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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) over the lines. is changed) **Butte 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 2018 C00565929 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. Copeland, Rita, , , Type or Print Name of Treasurer Copeland, Rita, , , [Electronically Filed] 01 26 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

_	EC Eo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	raye Z
Can	didate	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. (Cominformation below.)	plete the candidate
Name Candi			
Candi Party	idate Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Part	y Con	nmittee:	
(d)	×	CLID \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(Democratic, Republican, etc.) Party.
Polit	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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 se committee. (i.e., nonconnected committee)	gregated 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	raising 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.	o 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 (Poviced 02/2000)		Page 3
FEC Form 1 (Revised 02/2009) Write or Type Committee Name		Page 3
Butte County Democratic C	entral Committee	
	Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
None		
Mailing Address		
	CITY STATE ZIP	CODE
Relationship: Connected Organization Affilia	ted Committee Joint Fundraising Representative Leader	ship PAC Sponsor
. Custodian of Records: Identify by name, address (pooks and records.	phone number optional) and position of the person in posses:	sion of committee
Copeland, Rita, , ,		1
Mailing Address 5429 Madison Avenue		
Ividility Address		
Sacramento	CA 95841	
TW D 3		
Title or Position	CITY STATE ZIP	CODE
Custodian of Records	Telephone number 916 - 348	9100
Treasurer: List the name and address (phone number any designated agent (e.g., assistant treasurer).	er optional) of the treasurer of the committee; and the name	and address of
Full Name Copeland, Rita, , , of Treasurer		
Mailing Address 5429 Madison Avenue		
Sacramento	CA 95841	
Title or Position , Treasurer	CITY STATE ZIP	CODE 9100 I
	Telephone number	

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Full Name of Designated Agent	Mace, Patrick, , ,	
Mailing Address	2729 Madera Lane	
	Chico CA 95973 CITY STATE ZI	P CODE
Title or Position Assistant Treasu	urer	5 7473
Banks or Other safety deposit bo Name of Bank, D		accounts, rents
	First Foundation Bank 2250 Douglas Blvd., Suite 190	
Mailing Address		
	Roseville CA 95661	
	CITY STATE ZI	P CODE
Name of Bank, D	Depository, etc.	
Mailing Address		
	CITY STATE ZI	P 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 Change Bank Name

Form/Schedule: Transaction ID:

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

FEC Form 1S (Revised 02/2017)

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5(a)	or(h). Joint Fundraisin	g Participant:			
- (3)	1.		FEC IE) number	C
	2.		FEC ID) number	C
	3.		, , , FEC ID) number	C
	4.		· · · I FEC ID) number	C
	4.				
6.	Name of Any Connected	Organization, Affiliated Committee,	Joint Fundraising Rep	presentative	or Leadership PAC Sponsor
	Mailing Address				
		1			I I-I
	Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	e Joint Fundraising	Representat	Leadership PAC Sponsor
8.		by name, address (phone number -	optional)		
8.		by name, address (phone number – Chair, Justin, , ,	optional)		
8.	Meyers, 0	· ·	optional)		
8.	Meyers, (Chair, Justin, , ,	optional)		
8.	Meyers, (Chair, Justin, , ,	optional)	CA	95969
8.	Meyers, (Full Name	Paradise		CA STATE A	95969 ZIP CODE A
8.	Meyers, (Paradise		STATE A	
8 . 9 .	Meyers, 0 Full Name	Paradise CITY Cies: List all banks or other depositor	Telephone N	STATE umber 5	ZIP CODE ▲ 30 - 519 - 6038
	Meyers, 0 Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	Paradise CITY Cies: List all banks or other depositor	Telephone N	STATE umber 5	ZIP CODE ▲ 30 - 519 - 6038
	Meyers, 0 Full Name	Paradise CITY Cies: List all banks or other depositor	Telephone N	STATE umber 5	ZIP CODE ▲ 30 - 519 - 6038
	Meyers, 0 Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	Paradise CITY Cies: List all banks or other depositor	Telephone N	STATE umber 5	ZIP CODE ▲ 30 - 519 - 6038
	Meyers, 0 Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	Paradise CITY Cies: List all banks or other depositor	Telephone Nies in which the commit	STATE umber 5	ZIP CODE ▲ 30 - 519 - 6038

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

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5(g)	or(h). Joint Fundraisin	g Participant:			
	1.		FEC ID no	umber C	
	2.		FEC ID no	umber C	
	3.		FEC ID no	umber C	
	4		FEC ID no	umber C	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Repres	sentative, or	Leadership PAC Sponsor
	Mailing Address				
	Relationship:	CITY ▲	S	TATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee Joi	nt Fundraising Re	epresentative	Leadership PAC Sponsor
8.		y by name, address (phone number – optional)	1 1 1 1 1 1	1 1 1 1	
8.	Arim-Law				
8.	Arim-Law Full Name	v, Vice Chair, Lupita, , ,			
8.	Arim-Law Full Name	v, Vice Chair, Lupita, , ,		CA	95973
8.	Arim-Law Full Name Mailing Address	7, Vice Chair, Lupita, , , 730 Hastings Street Chico		CA L	95973 ZIP CODE A
8.	Arim-Law Full Name	730 Hastings Street Chico CITY			
8. 9.	Arim-Law Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or ma	730 Hastings Street Chico CITY ries: List all banks or other depositories in which	STA	or 530	ZIP CODE ▲ - 566 - 4708
	Arim-Law Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor	730 Hastings Street Chico CITY ries: List all banks or other depositories in which	STA	or 530	ZIP CODE ▲ - 566 - 4708
	Arim-Law Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or ma	730 Hastings Street Chico CITY ries: List all banks or other depositories in which	STA	or 530	ZIP CODE ▲ - 566 - 4708
	Arim-Law Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	730 Hastings Street Chico CITY ries: List all banks or other depositories in which	STA	or 530	ZIP CODE ▲ - 566 - 4708
	Arim-Law Full Name Mailing Address TITLE OR POSITION POF Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	730 Hastings Street Chico CITY ries: List all banks or other depositories in which	STA	or 530	ZIP CODE ▲ - 566 - 4708

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

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n). Joint Fundraising	1	FEC ID number	
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected O	rganization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spor
Mailing Address	<u> </u>		
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
= -	y name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify b Del Rosario Full Name		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identify b	y name, address (phone number – optional) , Marlene, , ,	nt Fundraising Represent	Leadership PAC S
esignated Agent: Identify b Del Rosario Full Name	y name, address (phone number – optional) , Marlene, , , 3041 Orange Avenue		
esignated Agent: Identify book Del Rosario	y name, address (phone number – optional) , Marlene, , , 3041 Orange Avenue Oroville	CA CA	95966
esignated Agent: Identify be Del Rosarion Full Name Mailing Address	y name, address (phone number – optional) , Marlene, , , 3041 Orange Avenue Oroville	CA STATE ▲	95966 ZIP CODE A
esignated Agent: Identify b Del Rosario Full Name	y name, address (phone number – optional) , Marlene, , , 3041 Orange Avenue Oroville CITY	CA STATE ▲	95966
Del Rosario Full Name Mailing Address TITLE OR POSITION ▼ POF anks or Other Depositorie	y name, address (phone number – optional) , Marlene, , , 3041 Orange Avenue Oroville CITY s: List all banks or other depositories in which	STATE A Telephone Number	95966 ZIP CODE A
Del Rosario Full Name Mailing Address TITLE OR POSITION ▼ POF anks or Other Depositorie	y name, address (phone number – optional) , Marlene, , , 3041 Orange Avenue Oroville CITY s: List all banks or other depositories in which	STATE A Telephone Number	95966 ZIP CODE A
Del Rosario Full Name Mailing Address TITLE OR POSITION POF Anks or Other Depositorie ane of Bank,	y name, address (phone number – optional) , Marlene, , , 3041 Orange Avenue Oroville CITY s: List all banks or other depositories in which	STATE A Telephone Number	95966 ZIP CODE A
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Del Rosario Full Name Mailing Address TITLE OR POSITION POF anks or Other Depositorie ane of Bank, epository, etc.	y name, address (phone number – optional) , Marlene, , , 3041 Orange Avenue Oroville CITY s: List all banks or other depositories in which	STATE A Telephone Number	95966 ZIP CODE A