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FEC **FORM**

Only

FE3AN042.PD

STATEMENT OF **ORGANIZATION**

2009 MAR -3 A 10 54

Office Use Only Example: If typing, type NAME OF (Check if name 12FE4M5 i., **COMMITTEE** (in full) is changed) over the lines. UNIONBANCAL CORPORATION POLITICAL ACTION COMMITTEE ADDRESS (number and street) (Check if address is changed) SAN FRANCISCO CA CITY STATE **ZIP CODE** COMMITTEE'S E-MAIL ADDRESS Jack.King@uboc.com COMMITTEE'S WEB PAGE ADDRESS (URL) **COMMITTEE'S FAX NUMBER** Ð, D 02 27 2009 DATE 3. FEC IDENTIFICATION NUMBER C00172205 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. Type or Print Name of Treasurer 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: Federal Election Commission **FEC FORM 1** Use (Revised 12/2007)

Toll Free 800-424-9530

Local 202-694-1100

FI	EC Fo	rm 1 (Revised 12/2007)	Page 2				
		COMMITTEE					
	didate	e Committee:					
(a)	.i.	This committee is a principal campaign committee. (Complete the candidate information belo	w.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name Candid			_1_ 1_				
Candid Party	-	on Sought: House Senate President	State				
(c)	₹	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District L.:				
Name	-						
Candid	date 		<u>i I I I I I I I I I I I I I I I I I I I</u>				
Party	y Con	nmittee:					
(d)	\$ i	This committee is a	(Democratic, Republican, etc.) Party.				
Politi	ical A	ction Committee (PAC):					
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is						
		Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
(f)	a mag	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Joint	Fund	draising Representative:					
(g)	3	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate.					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political				
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number	, "R.				
	3.	FEC ID number	The State of				
	4.	FEC ID number	ting the second of the second				
	5.	1	· · · · · · · · · · · · · · · · · · ·				

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Write or Type Committee Name							
UNIONBANCAL CORPORATION PO							
6. Name of Any Connected C	organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising	Representative					
	<u> </u>						
	!						
Mailing Address							
		1.1-1 : 1 1					
	CITY STATE 2	ZIP CODE					
Relationship:	Affiliated Committee Leadership PAC Sponsor Joint Fundraising	g Representative					
 Custodian of Records: Iden books and records. 	tify by name, address (phone number optional) and position of the person in poss	session of committee					
Full Name		11.:11					
Mailing Address							
Title or Position	CITY STATE 2	ZIP CODE					
<u> </u>	Telephone number]-[
3. Treasurer: List the name and any designated agent (e.g., a	reasurer: 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 of Treasurer John J.	King	<u> </u>					
Mailing Address	400 California Street, 16th Floor	<u> </u>					
		<u> </u>					
	San Francisco CA 94104						
Title or Position	CITY STATE Z	IP CODE					
Treasurer :	Telephone number 415	5 _ 2555					
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Full Name of Designated Agent	Nakamura	<u> </u>	
Mailing Address	400 California Street, 16th Floor		<u> </u>
	San Francisco CITY	CA STATE	94104 ZIP CODE
Title or Position	f	one number 415	
. Banks or Other Deposit safety deposit boxes or m	ories: List all banks or other depositories in which the naintains funds.	committee deposits fu	nds, holds accounts, rents
Name of Bank, Depositor		•	
<u> </u>	<u> </u>	<u> </u>	<u> </u>
Mailing Address		<u></u>	<u> </u>
		<u>.illllll</u>	<u> </u>
	CITY	STATE	ZIP CODE
Name of Bank, Depositor	y, etc.		
1: 1		111111	
Mailing Address			
		<u>; </u>	
	CITY	STATE	ZIP CODE

(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™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark Shipping Date fel 6x 2/27/09 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