

STATEMENT OF ORGANIZATION

RECEIVED
FEC MAIL ROOM

(See reverse side for instructions)

2008 AUG -7 P 1:13

| | |
|---|--|
| 1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) CALPAC California Aggressive Leadership Political Action Committee | 2. DATE 2008 AUG -7 P 1:13 |
| (b) Number and Street Address <input type="checkbox"/> (Check if address is changed) P.O. Box 362 | 3. FEC Identification Number 000359430 |
| (c) City, State and ZIP Code San Bernardino, CA 92402 | 4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |

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.

| 6. Name of Any Connected Organization or Affiliated Committee | Mailing Address and ZIP Code | Relationship |
|---|------------------------------|--------------|
| | | |

Type of Connected Organization

- Corporation Corporation w/o 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 |
|---------------------------|--|-------------------|
| Smith Marion & Co., CPA's | 22365 Barton Rd., Suite 108, Grand Terrace, CA 92313 | treasurer |

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 |
|-----------------------|--|-------------------|
| William P. Smith, CPA | 22365 Barton Rd., Suite 108, Grand Terrace, CA | Treasurer |
| Chad Porter, CPA | Same | Asst. 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 |
|--------------------------------|---|
| Bank of America | 22377 Barton Rd., Grand Terrace, CA 92313 |

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 William P. Smith | SIGNATURE OF TREASURER <i>William P. Smith</i> | DATE 7/3/08 |
|---|---|----------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-894-1100

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FEC FORM 1

(revised 4/87)

