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FEC

12/01/2023 12 : 12

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## STATEMENT OF ORGANIZATION

FORM 1		URGANIZ/	ATION		
				(	Office Use Only
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
	Action (	Club of Chico			
ADDRESS (number a	nd street)	5445 Madison Avenue			
(Check if a is changed					
		Sacramento		CA STATE ▲	2841 [
COMMITTEE'S E-MA	AIL ADDRES	S			
× < (Check if a is changed		campaigns@rcbs.us			
		Optional Second E-Mail Add	dress		
COMMITTEE'S WEB	address	https://www.facebook.com/De	emocraticActionClubofChico		
2. DATE 12		2023			
3. FEC IDENTIFIC	CATION NU	MBER ► C co	00407866		
4. IS THIS STATEN		NEW (N) OR	× AMENDED (A)		
I certify that I have e	examined this	s Statement and to the best	of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name of	of Treasurer	Lewis, Denise, , ,			
Signature of Treasure	er Lewis,	Denise, , ,		Date 12	/ D D / Y Y Y Y 01 2023
NOTE: Submission of	false, erroned		may subject the person signing the TION SHOULD BE REPORTED V		e penalties of 52 U.S.C. §30109
Office Use Only			For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FE	EC Form 1 (Revised 03/2022)	Page <b>2</b>
5.	TYPE OF COMMITTEE:	
	Candidate 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. (Complete the information below.)	e candidate
	Name of Candidate	
	Candidate Office Sought: House Senate President	State CA District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican,	
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	Corporation Corporation w/o Capital Stock Labor O	rganization
	Membership Organization Trade Association Coopera	tive
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	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.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	C).

## Joint Fundraising Representative:

(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Committees Participating in Joint Fundraiser
2.

In addition, this committee is a Lobbyist/Registrant PAC.

Relationship:

Connected Organization

	FEC Form 1 (Revised 0)	2/2009)					Page 3
۷	Vrite or Type Committee Name						
	Democratic Actio	on Club	of Ch	nico			
6.	Name of Any Connected Or	rganization,	Affiliated	Committe	ee, Joint Fundrais	sing Representative, or	Leadership PAC Sponsor
	Mailing Address						

STATE 🔺

Joint Fundraising Representative

ZIP CODE 🔺

Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

CITY

Affiliated Organization

Lewis, Den	ise, , ,
Full Name	
Mailing Address	5445 Madison Avenue
	Sacramento     CA     95841
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Custodian of Records	Image: Image of the second

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 of Treasurer	Lewis, Denise, , ,						
Mailing Address	5445 Madison Avenue						
	Sacramento     CA     95841						
	CITY ▲ STATE ▲ ZIP CODE ▲						
Title or Position ▼							
Treasurer	Image:						

FEC Form 1 (Revised 02/2009	FEC	orm 1	(Revised	02/2009)	)
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Full Name of Designated Agent	Konsavage	, Sara, , ,							1					1		1		1									
Mailing Address		2785 EI	Paso	Way	#114 																						
		Chico														C	A 		95	5926 	}			- L			
						СІТ	TY 🔺								ę	STA	TE				Z	<u>ː</u> IP	CO	DE			
Title or Position	7																										
Assistant Treasu	rer										Tele	epho	one	nı	ımt	ber		925		- [	2	06		- [_	55	592	

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.

First F	Foundation Bank		
Mailing Address	18101 Von Karman Ave., Suite 750		
	Irvine	CA 9261	2
	CITY A	STATE A	ZIP CODE
Name of Bank, Depositor	y, etc.		
Mailing Address			
	CITY A	STATE A	ZIP CODE ▲