FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	(See instruc		Office use only	
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
SECUREUS				
ADDRESS (number and	street) 1831 Bay Street SI			
(Check if address is changed)	washington		DC 20003 -	
		CITY▲	STATE▲ ZIP CODE ▲	
COMMITTEE'S E-MAI	L ADDRESS mandowning.com		,	
			<del></del> .	
ш				
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
COMMITTEE'S FAX N 2134526575	IUMBER			
2. DATE 0.3	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
3. FEC IDENTIFICA	TION NUMBER	C C00411538		
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)				
I certify that I have exami	ned this Statement and to the best of my k	knowledge and belief it is true, correct	and complete	
Type or Print Name of	Treasurer Trini Jimenez			
Signature of Treasurer	Electronically Filed by <b>Trini Jir</b>	nenez	Date 03 / D24 / YYYO66	
NOTE: Submission of fa	·	may subject the person signing this St.	atement to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS	
Office Use Only		For further information Federal Election Commit Toll Free 800-424-9530		

	FECForm 1 (Revised 02/2003)	Page 2				
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 c information below.)	andidate				
	Name of Candidate					
	Candidate Office House Senate President	State District				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
		emocratic, publican,etc.) Party.				
	(e) This committee is a separate segregated fund					
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fu committee.	nd or party				
6.	Name of Any Connected Organization or Affiliated Committee					
L						
L						
	Mailing Address	<b></b>				
	CITY▲ STATE ▲	ZIP CODE A				
	Relationship					
	Type of Connected Organization:					
	Corporation Corporation w/o Capital Stock Labor Organization	on				
	Membership Organization Trade Association Cooperative					

FEC For	m 1 (Revised 02/2003	3)			Pa	ge <b>3</b>	
Write or Type Co	mmittee Name						
SECUREUS	S						
	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.						
Full Name	Stephen Kaufman Full Name						
Mailing Addres	ss	777 S. Figueroa St., S	Ste. 4050				
		Los Angeles	CA	<u> </u>	90017		
Title or Position	on 🔻	CITY A	STAT	Γ <b>Ε</b> Δ	ZIP COE	DE A	
	Asst. Treasure	<u>,                                      </u>	Telephone number	213	_ <b>452</b> 	6565	
name and a Full Name of Treasurer	ddress of any desig	address (phone number optiognated agent (e.g., assistant trees	nal) of the treasurer of theasurer).	e commi	ttee; and the		
Mailing Addre		TO DONGS					
		Los Angeles	CA	<u> </u>	90507 _		
Title or Position	on 🔻	CITY A	STAT	Γ <b>Ε</b> Δ	ZIP COI	DE 🛦	
	Treasurer		Telephone number	213	452	6565	
Full Name of Designated Agent	Stephen Ka	ufman					
Mailing Addres	ss	777 S. Figueroa St. S	te. 4050				
		Los Angeles		<u> </u>	90017 _		
Title or Position	on 🔻	CITY A	STAT	Έ <b>Α</b>	ZIP COD	E A	
	Asst. Treasure	<u>r</u>	Telephone number	213	452	6565	

	FEC Form 1 (Revised 02	2/2003)	Page 4				
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.						
	Califor  Mailing Address	rnia Bank and Trust  555 S. Hope Street, Ste. 100					
		Los Angeles CA	90071				

STATE ∠

 $\textbf{ZIP CODE} \quad \triangle$ 

CITY 🗷