

FEC FORM 1

STATEMENT OF ORGANIZATION

SEP - 8 A 2:40  
Office Use Only

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

EL MODO DEMOCRATIC CLUB

ADDRESS (number and street)

489 HEVILS ST

(Check if address is changed)

MORROBAY

CA

93442-9819

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

BOX 6032

LOS ANGELES CA 90032

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE 09 02 2004

3. FEC IDENTIFICATION NUMBER 00404426

4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)

I certify that I have assembled this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer MARCIA L. MUNSON

Signature of Treasurer Marcia L. Munson Date 9 01 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §487g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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	House	Senate	President	State District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

(d) This committee is a	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
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- (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 party committee.

6. Name of Any Connected Organization or Affiliated Committee

\_\_\_\_\_

\_\_\_\_\_

Meeting Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

- |                         |                               |                    |
|-------------------------|-------------------------------|--------------------|
| Corporation             | Corporation w/o Capital Stock | Labor Organization |
| Membership Organization | Trade Association             | Cooperative        |

Write or Type Committee Name

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 MARCIA MUNSON

Mailing Address 440 LOS OSOS VALLEY ROAD  
LOS OSOS CA 93402

Title or Position TREASURER CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 805-528-0685

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 MARCIA MUNSON

Mailing Address 440 LOS OSOS VALLEY ROAD  
LOS OSOS CA 93402

Title or Position TREASURER CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 805-528-0685

Full Name of Designated Agent LEE GREENAWALT

Mailing Address 699 NEVIS ST  
HARRIS BAY CA 93742

Title or Position Agent CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 805-772-9549

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, bank accounts, rents, safety deposit boxes or treasuries funds.

Name of Bank, Depository, etc.

MIS. STATE BANK

Mailing Address

1001 LOS ROSOS VALLEY ROAD

LOS ROSOS CA 93402

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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.

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<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JK</i> PREPARER	9-8-04 DATE PREPARED

(5/2004)