FEC FORM 1		STATEMEN ORGANIZA	Office Use Only													
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		mple:If t		type		12F	'E41	м5	Onice	ose c	niy			
Departmen			010		0.											
ADDRESS (number an	nd street)	1500 Pennsylvania Avw														
 (Check if a is changed 	address I)	9														
		Washington								Ľ	20001					
		CITY 🔺						STAT	ΈA			Z	ZIP C	ODE		
COMMITTEE'S E-MA																
 (Check if a is changed 	address I)	hellojob06@gmail.com														
		Optional Second E-Mail Add	lress													
COMMITTEE'S WEB	address	DRESS (URL)						<u> </u>		 				 		
2. DATE	M / D 7 24	D / Y Y Y Y 2016														
3. FEC IDENTIFIC	CATION NU	JMBER ► C cc	062226	6												
4. IS THIS STATEM	IENT	NEW (N) OR	×	AM	ENDE	D (A)										
I certify that I have e	examined th	is Statement and to the best	of my	knowled	le and	beliet	f it is	true,	corr	ect a	and co	omplet	e.			
Type or Print Name of	of Treasure	Gumataotao, Rosa, , ,														
Signature of Treasure	er Guma	taotao, Rosa, , ,		[Electron	ically I	Filed]	D	ate	M	07	1	03	/	ү ү 20	ү ү 18	
NOTE: Submission of		ous, or incomplete information r									he pe	nalties	of 2	U.S.C	. §437g.	
Office Use Only				For furtl Federal Toll Free Local 20	Election 800-424	Comm 4-9530		act:				EC I Revise	-			

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TYPE OF (COMMITTEE	
Candidat	e 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. (Compleinformation below.)	ete the candidate
Name of Candidate		
Candidate Party Affilia	tion Office Sought: House Senate President	State 00
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	mmittee:	
(d)		emocratic, publican, etc.) Part
Political /	Action Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is
	Corporation X Corporation w/o Capital Stock	_abor Organization
	Membership Organization	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

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Write or Type Committee Name

-

Department of Treasry

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N													
	Mailing Address												
		CITY		STATE	ZIP CODE								
	Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor												
7.	Custodian of Records: Ider books and records.	ntify by name, address (phone num	er optional) and posi	tion of the person	in possession of committee								
		Benjamin, , ,											
	Full Name												
		4500 D											
	Mailing Address	1500 Pennsylvania Ave											

	Washington		20001
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	

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	Gumataotao, Rosa, , ,	
Mailing Address	1500 Pennsylvania Ave	
	Washington	
	CITY STATE ZIP CODE	
Title or Position		
	Telephone number	 '

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Full Name of Designated Agent	Graham, Aubrey, , ,
Mailing Address	General delivery
	Sacramento CA 95825
	CITY STATE ZIP CODE
Title or Position	
	Telephone number

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.

F	ederal Reserve Bank of Richmond	
Mailing Address	1500 Pennsylvania Ave	
	Washington	DC 20001
	CITY	STATE ZIP CODE
Name of Bank, Dep	ository, etc.	
L		
Mailing Address		
	CITY	STATE ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

MANC T1

Form/Schedule: Transaction ID:

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ŀ	FEC Form 1S (Revised 02/20	17) Optional Supplemental for Lines 5(g) or (h), 6,		Page of
5(g)	or(h). Joint Fundraising	Participant:	_	
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected C	rganization, Affiliated Committee, Joint Fu	ndraising Representative,	or Leadership PAC Sponsor
	Mailing Address			
	Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
	Connected	Organization Affiliated Committee J	oint Fundraising Representati	ve Leadership PAC Sponsor
8.		oy name, address (phone number - optional)		
	Davis, Mar Full Name	e,,,		
	Mailing Address	2776 s 8950 w		
		<mark>∣ Magna</mark>		84044
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE
			Telephone Number	

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.									I																						
Mailing Address	L																														
	L																														
																						L						· L			
	CITY 🔺											STATE 🔺						ZIP CODE									I				