

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

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

12FE4M5

WE THE PEOPLE FOR CLARK 2016

ADDRESS (number and street)

P.O. BOX 0274

(Check if address is changed)

LAKE ARROWHEAD

CITY ▲

CA

STATE ▲

92352

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

WETHEPEOPLE@PRESIDENCY.COM

Optional Second E-Mail Address

WETHEPEOPLE@EXECS.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.facebook.com/thedreamteamusa

2. DATE

09 / 12 / 2015

3. FEC IDENTIFICATION NUMBER ▶

C C00556951

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

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 DR. EUGENE OAK

Signature of Treasurer

DR. EUGENE OAK

[Electronically Filed]

Date

09 / 13 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

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 candidate information below.)

Name of Candidate **BRITTANY CLARK**

Candidate Party Affiliation  DEM  Office Sought:  House  Senate  President State  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  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation  Corporation w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  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 segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g)  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.
- (h)  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

1.  FEC ID number **C**
2.  FEC ID number **C**
3.  FEC ID number **C**
4.  FEC ID number **C**

Write or Type Committee Name

# WE THE PEOPLE FOR CLARK 2016

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

CORY PAC, INC.

Mailing Address 918 PENNSYLVANIA AVE SE

WASHINGTON DC 20003

CITY STATE ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  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.

Full Name DR. EUGENE OAK

Mailing Address 610 S. VAN NESS AVE.

LOS ANGELES CA 90005

CITY STATE ZIP CODE

ATTORNEY/BENEFACTOR 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 DR. EUGENE OAK

Mailing Address 610 S. VAN NESS AVE.

LOS ANGELES CA 90005

CITY STATE ZIP CODE

ATTORNEY/BENEFACTOR Telephone number

Full Name of Designated Agent

DIANE WILSON

Mailing Address

P.O. BOX 0274

LAKE ARROWHEAD

CA

92352

CITY

STATE

ZIP CODE

Title or Position

CAMPAIGN OFFICER

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.

CALIFORNIA BANK AND TRUST

Mailing Address

28200 HWY 189 STE K-100

(P.O. BOX 2299)

LAKE ARROWHEAD

CA

92352

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

BANK OF AMERICA

Mailing Address

28200 HIGHWAY 189

LAKE ARROWHEAD

CA

92352

CITY

STATE

ZIP CODE

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1A  
Transaction ID :

WE THE PEOPLE IS ACTING AS A JOINT FUNDRAISING REPRESENTATIVE IN ADDITION TO BEING A PRINCIPAL CAMPAIGN COMMITTEE. THE COMMITTEE ACCEPTS ONLY DONATIONS IN GIFTS (I.E. FREE AIR TIME, FOOD, TICKETS, AIRFARE ETC.) AND NOT IN FUNDS. THE JOINT FUNDRAISING PARTICIPANT, TO BE DETERMINED, IS THE CANDIDATE FOR VICE PRESIDENT AND BRITTANY CLARK AS CANDIDATE FOR PRESIDENT.

Form/Schedule:  
Transaction ID:

# FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

**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.

[ ADDITIONAL ]

USC CREDIT UNION

Mailing Address

FLOWER STREET BRANCH

3720 S. FLOWER ST., 4TH FLOOR

LOS ANGELES CA 90007

CITY ▲

STATE ▲

ZIP CODE ▲

[ ADDITIONAL ]

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

DEMOCRATIC CANDIDATE FUND

Mailing Address

1310 19TH STREET NW

WASHINGTON DC 20036

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

- Connected Organization
- Affiliated Committee
- Joint Fundraising Representative
- Leadership PAC Sponsor

[ ADDITIONAL ]

**Designated Agent**

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

**Joint Fundraiser Participant**

[ ADDITIONAL ]

FEC ID number

C

# FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

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Name of Bank, Depository, etc.

[ ADDITIONAL ]

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Mailing Address

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\_\_\_\_\_ - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

[ ADDITIONAL ]

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

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

\_\_\_\_\_

\_\_\_\_\_

Mailing Address

430 SOUTH CAPITOL STREET SE

\_\_\_\_\_

WASHINGTON

DC

20003

\_\_\_\_\_ - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ ADDITIONAL ]

**Designated Agent**

Full Name

\_\_\_\_\_

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

\_\_\_\_\_

Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Joint Fundraiser Participant**

[ ADDITIONAL ]

\_\_\_\_\_

FEC ID number

C

# FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

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Name of Bank, Depository, etc.

[ ADDITIONAL ]

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Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

[ ADDITIONAL ]

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

DEMOCRATIC NATIONAL CONVENTION COMMITTEE 2016

\_\_\_\_\_

\_\_\_\_\_

Mailing Address

430 S CAPITOL STREET SE

\_\_\_\_\_

\_\_\_\_\_

WASHINGTON

DC

20003

\_\_\_\_\_ - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ ADDITIONAL ]

**Designated Agent**

Full Name

\_\_\_\_\_

Mailing Address

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\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

**Joint Fundraiser Participant**

[ ADDITIONAL ]

\_\_\_\_\_

FEC ID number

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Name of Bank, Depository, etc.

[ ADDITIONAL ]

\_\_\_\_\_

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

[ ADDITIONAL ]

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

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

\_\_\_\_\_

Mailing Address

430 SOUTH CAPITOL STREET, SE

2ND FLOOR

WASHINGTON DC 20003 - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ ADDITIONAL ]

**Designated Agent**

Full Name

\_\_\_\_\_

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

**Joint Fundraiser Participant**

[ ADDITIONAL ]

\_\_\_\_\_

FEC ID number

C \_\_\_\_\_

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Name of Bank, Depository, etc.

[ ADDITIONAL ]

\_\_\_\_\_

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

[ ADDITIONAL ]

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

DEMOCRACY FOR AMERICA

\_\_\_\_\_

\_\_\_\_\_

Mailing Address

PO BOX 1717  
\_\_\_\_\_

\_\_\_\_\_

BURLINGTON VT 05402  
\_\_\_\_\_ - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ ADDITIONAL ]

Designated Agent

Full Name

\_\_\_\_\_

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

Joint Fundraiser Participant

[ ADDITIONAL ]

\_\_\_\_\_

FEC ID number

**C** \_\_\_\_\_