STATEMENT OF ORGANIZATION

RECEIVED 2012 JUL 12 AM II: 19

			FECM	Vollice Are Out -
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
APAC /				
ADDRESS (number and street)	P.O. BOX 5325			
(Check if address is changed)	SANTA MARIA		CA L	93456
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one e	-mail address)		
	trentb@benedetticpa.	com		1
(Check if address is changed)				
is sitely			11111	
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)				
2. DATE 07 03	2012			
3. FEC IDENTIFICATION N	UMBER CALL	<mark>Bernald and South Colors and South States and States a</mark>		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	his Statement and to the best	t of my knowledge and belief	it is true, correct	and complete.
Type or Print Name of Treasure	TRENT BENEDETTI			
Signature of Treasurer	Treat Beast		Date 07	03 / 2012
NOTE: Submission of false, errone	eous, or incomplete information ANY CHANGE IN INFORMATI			the penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

F	FEC Fo	orm 1 (Revised 02/2009)	Page 2
TYPE	OF C	COMMITTEE	
Can	didate	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. (Comple information below.)	te the candidate
Name Cand	e of lidate		
	lidete Affiliat	office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Part	y Cor	nmittee:	_
(d)			emocratic, publican, etc.) Party.
Poli	tical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a:
		Corporation w/o Capital Stock	abor Organization
		and the second s	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	х	This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated 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.)	
Join	t Fund	draising Representative:	186
(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 C	green branchig in de Leist Markey
	2.	FEC ID number C	
	3.	FEC ID number C	
	4.	FEC ID number C	

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Write or Type Committee Nam		
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	rship PAC Sponsor
aeel maldonado	<u> </u>	
	<u> </u>	
Mailing Address	P O. BOX 5325	
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee	eadership PAC Sponsor
Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person in p	ossession of committee
Full Name	ENEDETTI	
Mailing Address	2151 S COLLEGE DR STE 101	
	SANTA MARIA CA 9345	
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number 405	922 - 4881
3. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the rassistant treasurer).	name and address of
Full Name TRENT B	ENEDETTI	
Mailing Address	2151 S. COLLEGE DR STE 101	
	SANTA MARIA CA 93455	; ; , 1-1 , , ,
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	922 4881

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Full Name of Designated Agent	BRANDON GESICKI	
Mailing Address	P.O. BOX 22347	
	CITY STATE	ZIP CODE
Title or Position	reasurer 831 - Telephone number	. 206 - 6460
Banks or Other safety deposit be	Depositories: List all banks or other depositories in which the committee deposits funds, oxes or maintains funds.	holds accounts, rents
Name of Bank,	Depository, etc.	
Name of Bank,	Depository, etc.	
Name of Bank, Mailing Address		
		ZIP CODE
	CITY STATE	ZIP CODE
Mailing Address	CITY STATE	ZIP CODE
Mailing Address	CITY STATE Depository, etc.	ZIP CODE
Mailing Address Mailing Address	CITY STATE Depository, etc.	ZIP CODE
Mailing Address Mailing Address	CITY STATE Depository, etc.	ZIP CODE

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Federal Election Comm ENVELOPE REPLACEMENT PAGE FOR The FEC added this page to the end of this filing	INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
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USPS Registered/Certified	Postmarked (R/C) 7/5/12
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signa	ature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	·
Overnight Delivery Service (Specify):	Shipping Date
N	ext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
(In 1)	7/12/14
PREPARER (3/2005)	DATE PREPARED