San Bernardino County Central Credit Union

Post Office Box 723
San Bernardino, CA 92402
(909) 881-3355

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Nov 4 12 24 PM '96

October 29, 1996

Richard Ng
Federal Election Commission
999 E Street N.W.
Washington, DC 20463

Dear Richard:

Enclosed are the documents necessary to bring the Arrowhead Federal PAC to current status. In addition, I have included an amendment to the Statement of Organization.

As you review the documentation, if you have any concerns or questions, please give me a call. I would like to ensure the reports are completed correctly, as well as timely.

I would like to once again thank you for your assistance today. You have no idea how much you have helped me and put my mind at ease as well. I sincerely appreciate your time and patience with me!!

Thanks a million!! ☺

Sincerely,

Dawne L. Baker
Treasurer
Arrowhead Federal PAC
(800) 743-7228 x379

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

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1. (a) NAME OF COMMITTEE IN FULL: ARROWHEAD FEDERAL POLITICAL ACTION COMMITTEE	☐ (Check if name is changed)	2. DATE
(b) Number and Street Address: 2121 N. "J" STREET	☐ (Check if address is changed)	3. FEC Identification Number
(c) City, State and ZIP Code: SAN BERNARDINO, CA. 92402		4. Is This Report An Amendment? ☐ YES ☒ NO

10-29-96

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	State/District

☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)

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

☒ (e) This committee is a separate segregated fund.

CHANGE TO: ☒ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
N/A NONE		

Type of Connected Organization
☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

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	Mailing Address	Title or Position
DWAINE BAKER	P.O. BOX 735 SAN BERNARDINO, CA 92402	

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	Mailing Address	Title or Position
SAME AS ABOVE		

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.	Mailing Address and ZIP Code
SAN BERNARDINO COUNTY CENTRAL CREDIT UNION	P.O. BOX 735 SAN BERNARDINO, CA. 92402

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	SIGNATURE OF TREASURER	DATE
Dwaine Baker	Dwaine Baker	9-19-96

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.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-219-3420

FE6AN053

FEC FORM 1
(revised 4/87)

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 10/30/96
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

D.A.Q. — PREPARER

11/5/96 — DATE PREPARED

FEC FORM 70-2 (12/92)