2017-04-27-03-00155421

FEC FORM 1

Office

Use

Only

STATEMENT OF **ORGANIZATION**

RECEIVED
FEC MAIL CENTER
2017 APR 27 AM 11: 48

			CULT Pro- Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
MOORPIARK D	EHIOICIRAITING I	GLUB	
ADDRESS (number and street)	1,2,3,1,7, W1,4	LOW FORESIT	DRIVE
(Check if address is changed)			
- ,	HOORPARK		GA 930211-2804-1 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	ESS		
(Check if address is changed)	0,4,4,0,4,7,7,7,6	gmaill.com	
	Optional Second E-Mail Add	lress m1@14121h10101·610	200
		• • •	
COMMITTEE'S WEB PAGE AD	DRESS (URL)	# M	
(Check if address is changed)		AIRIK: DENIOCIRIA	TISI : GOIM
	<u> </u>		
2. DATE 0 4 2	o žovž		
2. 5/12 09 =			
3. FEC IDENTIFICATION N	UMBER ▶ C		
4. IS THIS STATEMENT \	NEW (N) OR	AMENDED (A)	
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	t is true, correct and complete.
Type or Print Name of Treasure	SATYANA	rayan Kai	≥RA
Signature of Treasurer	J.W.1	lauf	Date 04 20 2017
NOTE: Submission of false, error	eous, or incomplete information	may subject the person signing	this Statement to the penalties of 52 U.S.C. §30109

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

FEC FORM 1

(Revised 06/2012)

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate informat	ion below.)
(b) This committee is an authorized committee, and is NOT a principal campaign commit information below.)	ittee. (Complete the candidate
Name of Candidate L I I I I I I I I I I I I I I I I I I	
Candidate Party Affiliation Office Sought: House Senate	State resident District
(c) This committee supports/opposes only one candidate, and is NOT an authorized com	nmittee.
Name of Candidate	
Party Committee:	
(d) This committee is a SUB (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	e 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 scommittee. (i.e., nonconnected committee)	separate segregated 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.)	-
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, at least one of which is an authorized committee of a federal	
(h) This committee collects contributions, pays fundraising expenses and disburses net procommittees/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.	C
4.	C

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Name	B	
Mo	DORPARK DEMOCRATIC CLUB	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
MICHITANOIAI ICIOL		
VIENTURA ICIO	UNITY DEHIOCRATIC CENTRAL COHN	1 MITEE
Mailing Address		
	[] [] [] [] [] [] [] [] [] []	211-128104
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor
 Custodian of Records: Ide books and records. 	ntify by name, address (phone number optional) and position of the person in pos-	session of committee
Full Name SAT	YANARAYAN KARRA	
Mailing Address	112317 WILLIOW FOREST PRIVE	
	MOIORPIAIRIK 1111 CIA 191301	211-
Title or Position	CITY STATE 2	ZIP CODE
LTREASURER	Telephone number 805-9	9,01-11,022
Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nan assistant treasurer).	ne and address of
Full Name of Treasurer	YANARAYAN KARRA	
Mailing Address	112317 WILLIOW FOREST PRIVE	1.1 1 1 1 1
<u>.</u>		2.1] - [2 ₁ 8 ₁ 0 ₁ 4 ZIP CODE
Title or Position	Telephone number $[B_10_15] - [q_1]$	9,0-1,0,2,2

FEC For	rm 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	DIONALLA FIBLINGIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	
Mailing Address	6677 WESTWOOD STREET	
	NDORPARK 193	2021 - 2804 ZIP CODE
Title or Position	·	12.1.71-13.6.4.11
safety deposit I	er Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds. Depository, etc.	olds accounts, rents
	WELLS, FARGO, BANK	
Mailing Address	5,1,5, W, 1,0,6, A,N,G,E,L,E,S, A,V,E,N,U,E,	للشلليا
		لينسنا
	MOORPARK 193	10211-[2804]
	CITY STATE	ZIP CODE
Name of Bank,	Depository, etc.	
	<u> </u>	
Mailing Addres	s <u>[</u>	
		لبببيا
		لــبا-لــــ
	CITY STATE	ZIP CODE

SATYANARAYAN KARRA 12317 Willow Forrest Drive MOORPARK CA 93021-2782

2017 APR 27 EDERAL ELECTION COMMISSION

999E Street, N.W.

MASHINGTON, DC

SAMIA CLARITA CA 913

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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USPS First Class Mail Postmarked 4/22/2017	Date of Receipt 4/21/2017		
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No Postmark			
Overnight Delivery Service (Specify):	Shipping Date		
Next Business I	Day Delivery		
Received from House Records & Registration Office	Date of Receipt		
Received from Senate Public Records Office	Date of Receipt		
Received from Electronic Filing Office	Date of Receipt		
Other (Specify):	ceipt or Postmarked		
PREPARER MM	4/27/2017 DATE PREPARED		
(3/2015)	DATE FREPARED		