**FEC** 

## **STATEMENT OF**

FORM 1	ORGANIZATIOI	N	
1 011111 1	(See instructions)		Office use only
NAME OF COMMITTEE (in f	(Check if name Exam is changed) over t	nple: If typying, type the lines	12FE4M5
Alyson Huber (	Congressional Exploratory Committee		
ADDRESS (number and s	5325 Elkhorn Blvd., #321		
(Check if address			
is changed)	Sacramento		CA 95842 - 1 1
	CITY▲	S	TATE▲ ZIP CODE ▲
COMMITTEE'S E-MAII	ADDRESS (Please provide only one e-mail address		
(Check if address is changed)	huber@deaneandcompany.c	om	
0 /			
COMMITTEE'S WEB F	PAGE ADDRESS (URL)		
(Check if address			
is changed)			
2. DATE 0.9	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICATION	TION NUMBER C C004	499822	
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)	
I certify that I have examin	ed this Statement and to the best of my knowledge and	d belief it is true, correct and co	omplete
Type or Print Name of	reasurer Shawnda Deane		
Signature of Treasurer	Electronically Filed by Shawnda Deane	Da	te 08 / 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the		,
Office Use Only		For further information con Federal Election Commission Toll Free 800-424-9530	FEC FORM 1 (Revised 02/2009)

	ı	FEC F	Form 1 (Revised 02/2009)	Page 2					
5.			DMMITTEE (Check One)						
	(a)								
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	Name Candi		Alyson Huber						
	Candi Party	idate Affiliati	on DEM Office X House Senate President	07					
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District 07					
	Name Candi								
	Party	Comm							
	(d)		(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.					
	Politic	Political Action Committee (PAC):							
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization or line 6.)	cted 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.						
		Com	mittees Participating in Joint Fundraiser						
			1. FEC ID number C						
			2 FEC ID number C						
			3. FEC ID number						
			4. FEC ID number C						

(2009)		Page 3			
onal Exploratory Committee					
anization, Affiliated Committee, Joint I	Fundraising Representative, or	Leadership PAC Sponsor			
CITY▲	STATE A	ZIP CODE			
Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor			
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  5325 Elkhorn Blvd., #321					
Sacramento		95842			
CITY A	STATE A Telephone number 9	ZIP CODE 4 16 - 285 - 5733			
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					
da Deane					
5325 Elkhorn Blvd., #321					
Sacramento		95842			
CITY A	STATE	ZIP CODE A			
	۵	16 <u>285</u> 5733			
	anization, Affiliated Committee, Joint I  CITY  Affiliated Committee  Affiliated Committee  Toooks and records.  a Deane  5325 Elkhorn Blvd., #  Sacramento  CITY A  of Records  and address (phone number option designated agent (e.g., assistant troops agent to the sacramento)  Sacramento  Sacramento  Sacramento  Sacramento  Sacramento  Sacramento  Sacramento  Sacramento	anization, Affiliated Committee, Joint Fundraising Representative, or  CITY STATE STATE STATE A  Affiliated Committee Joint Fundraising Representative  Intify by name, address, (phone number optional), and position books and records.  In Deane  5325 Elkhorn Blvd., #321  Sacramento CA  CITY STATE			

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	Full Name of Designated Agent	Non	e				
	Mailing Address	·					
	Title or Position ▼		СІТ	Y A	STATE 🛦	ZIP CODE A	
				Telephone	number		
9.	Banks or Other I safety deposit box	Depositories: Listes or maintains fund:		epositories in which the commi	ttee deposits funds, hold	ls accounts, rents	
	Name of Bank, De	lame of Bank, Depository, etc.					
Community 1st Bank							
	Mailing Address	<b>22</b> 5	0 Douglas Blvd.,	Ste. 190			
		Ros	seville		CA	95661	
		CITY 🗻 S		STATE₄	ZIP CODE 🛕		
	Name of Bank, De	epository, etc.					
	Mailing Address						
			CI	<b>ΓΥ Δ</b>	STATE.▲	ZIP CODE 🛕	