PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Occidental Petroleum Corporation Political Action Committee 1701 Pennsylvania Ave NW ADDRESS (number and street) Suite 800 (Check if address is changed) Washington 20006 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS .griffin_moar@oxy.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2016 C00083857 FEC IDENTIFICATION NUMBER 3. X 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. Griffin Moar Type or Print Name of Treasurer Griffin Moar [Electronically Filed] 02 2016 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • 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. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate y Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee: (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is
		Corporation Wo 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 s committee. (i.e., nonconnected committee)	egregated 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	nt Fund	raising Representative:	
(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	
(h)		committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.		
	3.		
	4.		

	-		\neg
	FEC Form 1 (Revised (02/2009)	age 3
V	/rite or Type Committee Name		<u> </u>
		roleum Corporation Political Action Committee	
6.		Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PA	
O	ccidental Petroleum	Corporation	
L			
L		1701 Pennsylvania Ave NW	
	Mailing Address		
		Suite 800	
		Washington DC 20006	
		CITY STATE ZIP C	ODE
	Relationship: X Connected	ed Organization Affiliated Committee Joint Fundraising Representative Leadershi	p PAC Sponsor
	Custodian of Records: Ider	ntify by name, address (phone number optional) and position of the person in possessio	n of committee
	books and records.		
	Full Name		1
	Mailing Address		
	Title or Position	CITY STATE ZIP CO	ODE
	1	Talanhana mumban	_1 1
		Telephone number	
3.		nd address (phone number optional) of the treasurer of the committee; and the name and	d address of
	any designated agent (e.g., a	assistant treasurer).	
	Full Name Griffin Moa of Treasurer	ar 	
	Mailing Address	1717 Pennsylvania Ave NW	
		Suite 400	
		Washington	-
	Title on Desiders	CITY STATE ZIP CO	DDE
	Title or Position Form 1 for		- 3000

FEC Form	1 (Revised 02/2009)	Page 4
Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds. Depository, etc. Bank of America	
safety deposit bo	oxes or maintains funds. Depository, etc.	
safety deposit bo Name of Bank, D	Depository, etc. Bank of America Westwood Village Branch	
safety deposit bo Name of Bank, D	Depository, etc. Bank of America Westwood Village Branch PO Box 24297	
safety deposit bo Name of Bank, D	Depository, etc. Bank of America Westwood Village Branch PO Box 24297 Los Angeles CA 90024	ZIP CODE
safety deposit bo Name of Bank, D	Depository, etc. Bank of America Westwood Village Branch PO Box 24297 Los Angeles CITY STATE	ZIP CODE
safety deposit bo Name of Bank, E Mailing Address	Depository, etc. Bank of America Westwood Village Branch PO Box 24297 Los Angeles CITY STATE Depository, etc.	ZIP CODE
safety deposit bo Name of Bank, E Mailing Address	Depository, etc. Bank of America Westwood Village Branch PO Box 24297 Los Angeles CITY STATE	ZIP CODE
safety deposit bo Name of Bank, E Mailing Address	Depository, etc. Bank of America Westwood Village Branch PO Box 24297 Los Angeles CITY STATE Capital One	ZIP CODE
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Depository, etc. Bank of America Westwood Village Branch PO Box 24297 Los Angeles CITY STATE Capital One	ZIP CODE
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Depository, etc. Bank of America Westwood Village Branch PO Box 24297 Los Angeles CITY STATE Capital One	ZIP CODE