STATEMENT OF

FORM 1	ORGANIZA (See instruction			Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	Office use only
Alyson Huber	Congressional Exploratory Com	mittee 		
ADDRESS (number and s	5325 Elkhorn Blvd.,	<u> </u>		
(Check if address	1		11111	
is changed)	Sacramento		[ÇA]	95842
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-			
(Check if address is changed)	huber@deaneandco	mpany.com		
e on angeo,			11111	
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
(Check if address		<u> </u>	11111	
is changed)		<u> </u>	11111	11111111
2. DATE 0.9	22 2011			
3. FEC IDENTIFICA	TION NUMBER	C C00499822		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of my kno	owledge and belief it is true, correc	et and complete	
Type or Print Name of	Treasurer Shawnda Deane			
Signature of Treasurer	Electronically Filed by Shawnda	Deane	Date 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 ma	y subject the person signing this STON SHOULD BE REPORTE	·	
Office Use Only		For further informati Federal Election Com Toll Free 800-424-953	mission	FEC FORM 1 (Revised 02/2009)

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5.	TYPE	OF CC	OMMITTEE (Check One)				
	Candidate Committee:						
	(a)	Х	This committee is a principal campaign committee. (Complete the candidate information by	below.)			
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
		Name of Candidate Alyson Huber					
	Cand	idate Affiliatio	on DEM Office X House Senate	President	State	CA	
	1 arty	7 tilliati	on Cougnit.		District	07	
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee	ee.			
	Name Cand						
	Party	Comm					
	(d)		This committee is a (National, State (or subordinate) committee of the		mocratic, ublican,etc.) I	Party.	
	Politi	cal Act	tion Committee (PAC):				
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.)	Its connected org	anization is a	•	
			Corporation Corporation w/o Capital Stock	Labor C	rganization		
			Membership Organization Trade Association	Cooper	ative		
			In addition, this committee is a Lobbyist/Registrant PAC.				
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separat committee. (i.e., nonconnected committee)	te segregated fund	d 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 F	Fundra	ising Representative:				
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, at least one of which is an authorized committee of a federal can		e political		
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.		e political		
Committees Participating in Joint Fundraiser							
			1. FEC ID number				
			2. FEC ID number	;			
			3 FEC ID number C				
			4 FEC ID number C				

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Write or Type Committee Name							
Alyson Huber Congre	essional Exploratory Commit	tee					
6. Name of Any Connected C	Organization, Affiliated Committee	e, Joint Fundraising Representativ	ve, or Lead	lership PAC Sponsor			
None							
Mailing Address							
			ப L				
	CITY	STA	ATE 🛦	ZIP CODE			
Relationship:	_	_	_				
Connected Organization	on Affiliated Committee	Joint Fundraising Represer	ntative	Leadership PAC Sponsor			
possession of Committee	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records. Shawnda Deane						
Full Name							
Mailing Address	5325 Elkhorn	5325 Elkhorn Blvd., #321					
	Sacramento		CA _	95842			
Title or Position ♥	CITY	A STA	ATE&	ZIP CODE A			
Custodia	an of Records	Telephone number	916	285 5733			
name and address of a	ne and address (phone number any designated agent (e.g., assi wnda Deane 5325 Elkhorn	stant treasurer).	the comm	iittee; and the			
	Sacramento		CA	95842			
Title or Position ♥	CITY	A ST.	ATE.	ZIP CODE A			
Treasur	er	Telephone number	916	_ 285 _ 5733			
							

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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	epository, etc.					
Community 1st Bank				1 1 1 1 1 1 1 1			
	Mailing Address	22 5	0 Douglas Blvd.,	Ste. 190			
		Ros	seville		CA	95661	
			CITY 🙇			ZIP CODE 🛕	
	Name of Bank, De	epository, etc.					
	Mailing Address						
			CI	ΓΥ Δ	STATE.▲	ZIP CODE 🛕	