FEC FORM 1	STATEMEI ORGANIZ	_	PAGE 1 / 4	
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
	P.O. BOX 259			
ADDRESS (number and stree (Check if address is changed)	,			
	BAKERSFIELD		CA 93302 STATE ▲ ZIP CODE ▲	
COMMITTEE'S E-MAIL ADD	PRESS			
(Check if address is changed)	smohanraj@calcot.con) 		
	Optional Second E-Mail Ad smohanraj@calcot.c	dress om		
COMMITTEE'S WEB PAGE (Check if address is changed)	, , , , , , , , , , , , , , , , , , ,			
2. DATE 06 /	01 / Y Y Y Y 01 2020			
3. FEC IDENTIFICATION	3. FEC IDENTIFICATION NUMBER ► C C00172775			
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examine	d this Statement and to the best	of my knowledge and belief it	is true, correct and complete.	
Type or Print Name of Treas	surer Mohanraj, Sam, , ,			
Signature of Treasurer	Iohanraj, Sam, , ,	[Electronically Filed]	Date 06 / 29 / 2020	
NOTE: Submission of false, e		may subject the person signing t ON SHOULD BE REPORTED W	his Statement to the penalties of 2 U.S.C. §437g. ITHIN 10 DAYS.	
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		

Image# 202006299244224478

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ſ	FEC Fo	rm 1 (Revised 02/2009) Page 2		
TYPE	E OF C	OMMITTEE		
Can	didate	e 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. (Complete the candidate information below.)		
Name Cand	e of lidate	<u> </u>		
	lidate ⁄ Affiliati	on Office Sought: House Senate President District		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name Cand	e of lidate			
Parl	ty Con	nmittee:		
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party		
Poli	tical A	ction Committee (PAC):		
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is		
		Corporation Corporation w/o Capital Stock		
		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.)		
Join	t Func	Iraising 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		
	2.	FEC ID number		
	3.	FEC ID number		
	4.	FEC ID number		

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

CALCOT, LTD. FEDERAL POLITICAL ACTION COMMITTEE

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

	CALCOT, LTD. FEDEI	RAL POLITICAL ACT			
L					
	Mailing Address	P.O. BOX 259			
		BAKERSFIELD		CA 93302	
		CITY		STATE	ZIP CODE
7.		I Organization Affiliated Cor			Leadership PAC Sponsor
	Mohanraj, Full Name	Sam, , ,			
	Mailing Address	PO Box 259			
		Bakersfield		CA 93302	
	Title or Position	CITY		STATE	ZIP CODE
			Telephone	number 661 -	395 6841

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 of Treasurer	Mohanraj, Sam, , ,
Mailing Address	PO Box 259
	Bakersfield CA 93302 -
	CITY STATE ZIP CODE
Title or Position Treasurer	Image:

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Full Name of Designated Agent	Vasquez, Alane, , ,
Mailing Address	PO Box 259
	Bakersfield CA 93302
	CITY STATE ZIP CODE
Title or Position	
	Telephone number

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.
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Mailing Address	5701 CALIFORNIA AV	
	BAKERSFIELD	CA 93309
	CITY	STATE ZIP CODE
Name of Bank, Depository,	etc.	
Mailing Address		
	CITY	STATE ZIP CODE