Image# 27931516490

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instruction	_		Office use only
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	Office use only
ı ŞVB Finançial	Group Political /	Action Committe	e		1
	. 2002	TASMAN DRIVE	<u> </u>		
ADDRESS (number and	street)	I ASMAN DRIVE			
(Check if addr	ress				
is changed)	SAN	TA CLARA		[CA]	95054 -
			CITY	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS andassociates.co	a m			
ITATIK@ddrkee		''''			
COMMITTEE'S WEB	PAGE ADDRESS (U	RL)			
COMMITTEE'S FAX N 8182600657	NUMBER				
2. DATE 0.8		2 0 0 7 Y			
3. FEC IDENTIFICA	ATION NUMBER	(C C00333658		
4. IS THIS STATEM	MENT NEW	(N) OR	X AMENDED (A)		
I certify that I have exam	ined this Statement and	to the best of my know	vledge and belief it is true, correct	and complete	
Torra or Brist Name of	k	(inde Durkee			
Type or Print Name of	reasurer	ao Barnos			
Signature of Treasurer	Electronically File	d by Kinde Durl	Kee	Date 11	D D D P P P P P P P P P P P P P P P P P
NOTE: Submission of fa			subject the person signing this S		es of 2 U.S.C. S437g.
Office Use Only			For further informatic Federal Election Comm Toll Free 800-424-953	nission	FEC FORM 1 (Revised 02/2003)

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5.	TYPE OF COMMITTEE (Check One)					
	(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 cinformation below.)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	Name of Candidate					
	Candidate Office Party Affiliation Sought: House Senate President	State District				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
	(d) This committee is a (or subordinate) committee of the Re	emocratic, publican,etc.) Party.				
	(e) X This committee is a separate segregated fund					
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fur committee.	nd or party				
6.	Name of Any Connected Organization or Affiliated Committee					
ı	None	1				
I						
	<u> </u>					
	Mailing Address					
	CITY STATE A	ZIP CODE A				
	Relationship NONE					
	Type of Connected Organization:					
	Corporation Corporation w/o Capital Stock Labor Organizati	on				
	Membership Organization Trade Association Cooperative					

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Write or Type Committee N	lame					
SVB Financial Gro	oup Political Action Committee					
	stodian of Records: Identify by name, address, (phone number optional), and position of the person in ssession of Committee books and records.					
Full Name K						
Mailing Address	1212 S. Victory Blvd.					
	Burbank	CA		91502		
Title or Position ♥	CITY A	STATE	A	ZIP CO	DE 🛦	
Treas	surer	Telephone number	818		0669	
3. Treasurer: List the r	name and address (phone number optional) of any designated agent (e.g., assistant treasu	of the treasurer of the rer).	commi	ttee; and the		
Full Name of Treasurer K	inde Durkee					
Mailing Address	1212 S. Victory Blvd.					
	Burbank	CA	_	91502 _		
Title or Position ♥	CITY A	STATE	A	ZIP CO	DE 🛦	
Treas	surer	Telephone number	818	260	0669	
Full Name of Designated Agent						
Mailing Address						
			_			
Title or Position ♥	CITY A	STATE	A	ZIP COI	DE A	
		Telephone number				

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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.							
	Silicon Mailing Address	Valley Bank 3003 Tasman Dr.						
	mamy, corocc	Santa Clara CA 950	054 _					
		CITY A STATE A ZII	P CODE A					