Image# 201606299020103517				
FEC FORM 1	STATEMEI ORGANIZ	-	~	PAGE 1 / 4 —
1. NAME OF	(Check if name	Example: If typing, type		ice Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
DEMOCRATIC	WOMEN OF THE	EDESERT		
ADDRESS (number and street)	PO Box 6207			
(Check if address is changed)				
	La Quinta		CA 9224	48
	CITY A		STATE A	ZIP CODE A
OMMITTEE'S E-MAIL ADD	RESS			
(Check if address	kimberly_barraza@out	look.com		
is changed)		<u> </u>		
	Optional Second E-Mail Ad mayadeaztlan@aol.	dress çom		
COMMITTEE'S WEB PAGE A (Check if address is changed)	ADDRESS (URL)			
2. DATE 06	29 / Y Y Y Y 2016			
. FEC IDENTIFICATION	NUMBER ► C c	00416347		
IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined	this Statement and to the best	of my knowledge and belief	it is true, correct and	complete.
-				
ype or Print Name of Treasu	Irer Gregory E. Sanborn			
ignature of Treasurer	egory E. Sanborn	[Electronically Filed]	Date 06	D D / Y Y Y Y 29 / 2016
IOTE: Submission of false, erro	oneous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

-	-		
FEC FC	Page 2		
TYPE OF 0	COMMITTEE		
Candidat	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 of Candidate	L		
Candidate Party Affiliat	tion Office Sought: House Senate President District		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate			
Party Cor	nmittee:		
(d)	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Part		
Political A	Action 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 Labor Organization		
	Membership Organization Trade Association Cooperative		
	In addition, this committee is a Lobbyist/Registrant PAC.		
(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or part 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 Fund	draising 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.		
Con	nmittees 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

DEMOCRATIC WOMEN OF THE DESERT

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

None _			
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: X Connected	Organization Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Iden books and records. 	ify by name, address (phone number op	tional) and position of the perso	n in possession of committee
Kimberly B	arraza		
Mailing Address	PO Box 6207		
	La Quinta		92248
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	- 501 - 1681

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	Kimberly Barraza
Mailing Address	PO Box 6207
	La Quinta
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent	Amalia Deaztlan	
Mailing Address	79170 Fred Waring	
	Bermuda Dunes	CA 92203
	CITY	STATE ZIP CODE
Title or Position	urer	760 831 4610 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.

U.S.	Bank		
Mailing Address	4663 Clayton Road		
	Concord	CA	94521
	CITY	STATE	ZIP CODE
Name of Bank, Deposito	ry, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE