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PAUL GOUGH
OF COUNSEL

RECEIVED
FEC MAIL CENTER

2008 DEC -3 AM 8:24

1321 SEVENTH STREET, SUITE 205
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(310) 458-1405
FAX (310) 260-2666
www.bmhlaw.com

November 21, 2008

Public Records Office
Federal Election Commission
999 E Street, NW
Washington, DC 20463

Dear Filing Officer:

Please find enclosed for filing the original and one copy of:

Form 1 X Amendment

Form 2___

Form 3___

Form 3X___

for California Farm Bureau Fund to Protect the Family Farm.

Please return an endorsed filed copy in the enclosed self addressed envelope for our records.

Very truly yours,

Charles H. Bell, Jr.

28039933333

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

RECEIVED
FEC MAIL CENTER
2008 DEC -3 AM 8:24

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

California Farm Bureau Fund to Protect the Family Farm (FARM PAC)

ADDRESS (number and street)

2300 River Plaza Drive



(Check if address
is changed)

Sacramento

CA

95833

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

cgudel@cfbf.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

916

561

5693

2. DATE

11

18

2008

3. FEC IDENTIFICATION NUMBER

C00041954

4. 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.

Type or Print Name of Treasurer Paul J. Wenger

Signature of Treasurer

Paul J. Wenger

Date

11

18

2008

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
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 12/2007)

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5. TYPE OF COMMITTEE

Candidate 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
CandidateCandidate
Party AffiliationOffice
Sought:☐

House

☐

Senate

☐

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☒ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☒ Trade Association ☐ Cooperative
- (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 Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising 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.

Committees Participating in Joint Fundraiser

- | | | | |
|----|----------------------|---------------|----------------------|
| 1. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 2. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 3. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 4. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 5. | <input type="text"/> | FEC ID number | <input type="text"/> |

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Write or Type Committee Name

California Farm Bureau Fund to Protect the Family Farm (FARM PAC)

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

California Farm Bureau Federation

Mailing Address

2300 River Plaza Drive

Sacramento

CITY

CA

STATE

95833

ZIP CODE

Relationship:



Connected Organization



Affiliated Committee



Leadership PAC Sponsor



Joint Fundraising Representative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Joseph M. Peters

Mailing Address

2300 River Plaza Drive

Sacramento

CITY

CA

STATE

95833

ZIP CODE

Title or Position

Secretary

Telephone number

916

561

5520

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

Paul J. Wenger

Mailing Address

2300 River Plaza Drive

Sacramento

CITY

CA

STATE

95833

ZIP CODE

Title or Position

Treasurer

Telephone number

916

561

5520

Full Name of
Designated
Agent

Joseph M. Peters

Mailing Address

2300 River Plaza Drive

Sacramento

CITY

CA

STATE

95833

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

916

561

5520

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.

Bank of America

Mailing Address

1655 Grant Street, Bldg A-10th Flr

Concord

CITY

CA

STATE

94520

ZIP CODE

Name of Bank, Depository, etc.

Merrill Lynch

Mailing Address

1435 River Park Drive

Suite 100

Sacramento

CITY

CA

STATE

95815

ZIP CODE

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>Jm A</i> PREPARER (3/2005)	<i>12/3/18</i> DATE PREPARED

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