Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Napa County Democratic Central Committee Post Office Box 652 ADDRESS (number and street) (Check if address is changed) Napa 94559 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS campaigns@rcbs.us (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 30 2017 C00504233 FEC IDENTIFICATION NUMBER 3. 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. Richard, Kim, , , Type or Print Name of Treasurer Richard, Kim, , , [Electronically Filed] 07 30 2017 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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	COMMITTEE	ı aye £
Candida	ate 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 information below.)	the candidate
Name of Candidate		
Candidate Party Affilia	ation Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	ommittee:	
(d) x	CUD ' ' DEM '	ocratic, olican, etc.) Party
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connecte	d organization is
		or Organization
	Membership Organization Trade Association Coc	perative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segrega committee. (i.e., nonconnected committee)	ited fund 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 Fur	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or r committees/organizations, none of which is an authorized committee of a federal candidate.	nore political
Co	ommittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name		
Napa County D	emocratic Central Committee	
	Organization, Affiliated Committee, Joint Fundraising Representative, or	r Leadership PAC Sponsor
,None		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	re Leadership PAC Sponsor
. Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the personal	son in possession of committee
Richard, K	im, , ,	1
Full Name	Post Office Box 652	
Mailing Address		
	Napa CA	94559
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	900 Telephone number	363 5353
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; a assistant treasurer).	nd the name and address of
Full Name Richard, K	im, , ,	ı
of Treasurer	Post Office Box 652	
Mailing Address		
	. Name	v04550
	Napa CA	94559
Title or Position Treasurer	CITY STATE 903	ZIP CODE 363 5353

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Full Name of Designated Agent	None, , , ,	
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other safety deposit be Name of Bank,	r Depositories: List all banks or other depositories in which the committee deposits funds, hold oxes or maintains funds. Depository, etc.	s accounts, rents
safety deposit be	Post Office Box 6002	s accounts, rents
safety deposit be Name of Bank,	Depository, etc. Rabobank, N.A. Post Office Box 6002	s accounts, rents
safety deposit be Name of Bank,	Post Office Box 6002	s accounts, rents
safety deposit be Name of Bank,	Post Office Box 6002 Arroyo Grande CITY STATE	
safety deposit be Name of Bank, Mailing Address	Post Office Box 6002 Arroyo Grande CITY STATE	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. Rabobank, N.A. Post Office Box 6002 Arroyo Grande CA 93421 CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. Rabobank, N.A. Post Office Box 6002 Arroyo Grande CA 93421 CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. Rabobank, N.A. Post Office Box 6002 Arroyo Grande CA 93421 CITY STATE Depository, etc.	ZIP CODE