Only

PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Santa Barbara County Democratic Central Committee Federal PAC 5429 Madison Avenue ADDRESS (number and street) (Check if address is changed) Sacramento 95841 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 07 2012 C00427856 FEC IDENTIFICATION NUMBER 3. X 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. Rita Copeland Type or Print Name of Treasurer Rita Copeland [Electronically Filed] 09 2012 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

Toll Free 800-424-9530 Local 202-694-1100

(Revised 06/2012)

ı	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	E OF C	OMMITTEE & Committee:	<u>-</u>
(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. (Com information below.)	plete the candidate
Name Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Parl	ty Con	nmittee: (National, State	(Domogratio
(d)	X	CLID DEM	(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 con-	nected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		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 se committee. (i.e., nonconnected committee)	gregated 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees 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 N	ame		
Santa Barbara	a County Democratic Cent	ral Committee Fe	deral PAC
6. Name of Any Connecte	d Organization, Affiliated Committee, Joint Fundr	raising Representative, or Leader	ship PAC Sponsor
None			
Mailing Address			
Mailing Address			
			-
	CITY	STATE	ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint	Fundraising Representative Le	eadership PAC Sponsor
 Custodian of Records: books and records. 	Identify by name, address (phone number optiona	d) and position of the person in po	essession of committee
Rita C	ppeland		
Full Name	,5429 Madison Avenue		
Mailing Address			
	Comments	, CA , 95841	
	Sacramento		
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		lephone number 916 – L	348 9100
Treasurer: List the name any designated agent (e.q.)	and address (phone number optional) of the trea g., assistant treasurer).	surer of the committee; and the na	ame and address of
Full Name William	Rosen		
Mailing Address	5429 Madison Avenue		

Sacramento

Title or Position Treasurer CITY

95841

916

ZIP CODE

9100

348

CA

STATE

Telephone number

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Full Name of	Rita Copeland	
Designated Agent		
Mailing Address	5429 Madison Avenue	
-	I	
	Sacramento	,95841
	CITY STATE	ZIP CODE
Title or Position Assistant Treas	surer Surer Telephone number	916 348 9100
safety deposit bo	r Depositories: List all banks or other depositories in which the committee deposits oxes or maintains funds.	funds, holds accounts, rents
Name of Bank, I	Depository, etc.	
	Community 1st Bank	
	Community 1st Bank .2250 Douglas Blvd. Suite 190	
Mailing Address	,2250 Douglas Blvd., Suite 190	
Mailing Address	,2250 Douglas Blvd., Suite 190	
Mailing Address	,2250 Douglas Blvd., Suite 190	95661
Mailing Address	2250 Douglas Blvd., Suite 190	95661 ZIP CODE
Mailing Address Name of Bank, I	2250 Douglas Blvd., Suite 190 Roseville CITY STATE	
	2250 Douglas Blvd., Suite 190 Roseville CITY STATE	
	2250 Douglas Blvd., Suite 190 Roseville CITY STATE Depository, etc.	
Name of Bank, I	2250 Douglas Blvd., Suite 190 Roseville CITY STATE Depository, etc.	
Name of Bank, I	2250 Douglas Blvd., Suite 190 Roseville CITY STATE Depository, etc.	
Name of Bank, I	2250 Douglas Blvd., Suite 190 Roseville CITY STATE Depository, etc.	

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Daraka Larimore Hall Full Name P.O. Box 22435 Mailing Address Santa Barbara CA 93121 Title or Position CITY # **STATE** ZIP CODE POF 818 260 0669 Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number