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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) over the lines. is changed) California Freedom and Prosperity PAC 2 Civic Center Drive ADDRESS (number and street) Unit 4338 (Check if address is changed) San Rafael 94913-5703 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tom@calfreedom.org (Check if address X is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2018 C00629147 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. Montgomery, Thomas, , , Type or Print Name of Treasurer Montgomery, Thomas, , , [Electronically Filed] 10 08 2018 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

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	orm 1 (Revised 02/2009) COMMITTEE	Page 2	
	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			
Candidate Party Affiliat	ion Office Sought: House Senate President	State District	
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate			
Party Cor		_	
(d)		Democratic, Republican, etc.) Party	
Political A	Action Committee (PAC):		
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected 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) This committee supports/opposes more than one Federal candidate, and is NOT a separa 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.)		
Joint Fund	draising Representative:		
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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	nmittees 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	Name	
California Fre	edom and Prosperity PAC	
6. Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundraising Representat	ive, or Leadership PAC Sponsor
NONE		
<u> </u>		<u> </u>
		
Mailing Address		
		1 1 11
	CITY STATE	E ZIP CODE
п.		
Relationship: Conno	ected Organization Affiliated Committee Joint Fundraising Representation	entative Leadership PAC Sponsor
Overted Herry of December		
books and records.	Identify by name, address (phone number optional) and position of the	e person in possession of committee.
	gomery, Thomas, , ,	
Full Name	1912 Grand Ave	
Mailing Address		
	San Rafael , CA	, 94901
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	415 - 250 - 4036
Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of the commit .g., assistant treasurer).	tee; and the name and address of
Full Name Montg of Treasurer	gomery, Thomas, , ,	
Mailing Address	1912 Grand Ave	
	San Rafael CA	94901
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	415 - 250 - 4036

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Full Name of Designated Agent	Montgomery, Thomas, E, , III				
Mailing Address	1912 Grand Ave				
	San Rafael CA CITY STATE	94901 ZIP CODE			
Title or Position Principal		415 - 250 - 4036			
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. Chase Bank					
Mailing Address	437 Corte Madera Town Center				
	Corte Madera CA	94925			
	CITY STATE	ZIP CODE			
Name of Bank, D	Depository, etc.				
Mailing Address					

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This filing represents a name and email address change as well as a bank address change.

Form/Schedule: Transaction ID: