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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. Dr. Raul Ruiz for Congress PO Box 3433 ADDRESS (number and street) (Check if address is changed) Palm Desert 92261 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@drraulruiz.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.drraulruiz.com (Check if address is changed) DATE 2014 C00502575 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. John Pinkney Type or Print Name of Treasurer John Pinkney [Electronically Filed] 17 2014 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 Only Local 202-694-1100

ı	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		COMMITTEE	
Can		e Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below	.)
(b) Name	e of	This committee is an authorized committee, and is NOT a principal campaign committee. (Cor information below.)	nplete the candidate
	didate	Dr. Raul Ruiz	
	didate / Affiliati	on DEM Office Sought: X House Senate President	State CA
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name Cand	e of lidate		
Part	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	egregated 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 Func	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	1.		
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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FEC Form 1 (Revised 02/2009)  Write or Type Committee Name	Page 3
Dr. Raul Ruiz for Congress	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
Ruiz Victory Fund	
<u> </u>	
PO Box 3433	
Mailing Address	
Palm Desert CA 92261	
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee X Joint Fundraising Representative Lea	dership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in pos books and records.	session of committee
John Pinkney  Full Name	<b>.</b>
PO Box 3433  Mailing Address	
Palm Desert CA 92261	-
Title or Position CITY STATE	ZIP CODE
Treasurer	902   -   9882
. <b>Treasurer:</b> List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	ne and address of
Full Name John Pinkney of Treasurer	
Mailing Address PO Box 3433	
Palm Desert CA 92261	
Title or Position	ZIP CODE 902     9882
Telephone number	

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Full Name of Designated Agent	Jennifer May	
Mailing Address	PO Box 3433	
	Palm Desert CA 9226  CITY STATE	ZIP CODE
Title or Position Assistant Treasu	surer Telephone number 202 –	365
Banks or Other safety deposit bo	r Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.	nolds accounts, rents
Banks or Other safety deposit bo Name of Bank, I	oxes or maintains funds.	nolds accounts, rents
safety deposit bo	oxes or maintains funds.	nolds accounts, rents
safety deposit bo	Depository, etc.  Bank of America  34420 Monterey Avenue	noids accounts, rents
safety deposit bo Name of Bank, [	Depository, etc.  Bank of America  34420 Monterey Avenue	noids accounts, rents
safety deposit bo Name of Bank, [	Depository, etc.  Bank of America  34420 Monterey Avenue	
safety deposit bo Name of Bank, [	Depository, etc.  Bank of America  34420 Monterey Avenue	
safety deposit bo Name of Bank, [	Depository, etc.  Bank of America  34420 Monterey Avenue  Palm Desert  CITY  STATE	60
safety deposit bo Name of Bank, [ Mailing Address	Depository, etc.  Bank of America  34420 Monterey Avenue  Palm Desert  CITY  STATE	60
safety deposit bo Name of Bank, [ Mailing Address  Name of Bank, [	Depository, etc.  Bank of America  34420 Monterey Avenue  Palm Desert  CITY  STATE  ProAmerica Bank  888 West Sixth St	60
safety deposit bo Name of Bank, [ Mailing Address	Depository, etc.  Bank of America  34420 Monterey Avenue  Palm Desert  CITY  STATE  ProAmerica Bank  888 West Sixth St	60
safety deposit bo Name of Bank, [ Mailing Address  Name of Bank, [	Depository, etc.    Bank of America   34420 Monterey Avenue   Palm Desert   CA   9226     CITY   STATE     Depository, etc.   ProAmerica Bank   888 West Sixth St	ZIP CODE