Image# 202002219187246643				PAGE 1/4
FEC FORM 1	STATEMEN ORGANIZ		Offi	ice Use Only
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
COMMITTEE (in full)	is changed)	over the lines.		
San Benito Coun	ty Democratic C		<u></u>	
ADDRESS (number and street)	1100 Cedar Drive			
(Check if address				· · · · · · · · · · ·
is changed)	Hollister		CA 9502	23
			STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	sbcdemocrats@gmail.c	com		
is changed)	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE ADI	DRESS (URL)			
2. DATE 02 07				
3. FEC IDENTIFICATION NU		00496521		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name of Treasure	Spencer, Honor, , ,			
Signature of Treasurer	er, Honor, , ,	[Electronically Filed]	Date 02	07 / Y Y Y Y Y 2020
NOTE: Submission of false, errone		may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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F	EC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE	OF C	OMMITTEE	
Cano	didate	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. (Comple information below.)	te the candidate
Name Candie			
Candio Party	date Affiliati	on Office Sought: House Senate President	State CA District
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candio			
Party	y Con	nmittee:	
(d)	×		emocratic, publican, etc.) Party
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conner	cted organization is a
		Corporation Corporation w/o Capital Stock	abor 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 segre committee. (i.e., nonconnected committee)	egated 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	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.	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.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## San Benito County Democratic Central Committee

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

None			
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponso
Custodian of Records: Iden books and records.	tify by name, address (phone number op	tional) and position of the person	in possession of committe
Spencer, H	lonor, , ,		
Mailing Address	1100 Cedar Drive		
	Hollister	CA 95	5023
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		Telephone number	801 - 1032
	address (phone number optional) of the		

 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	Spencer, Honor, , ,
Mailing Address	1100 Cedar Drive
	Hollister
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 831 - 801 - 1032

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Full Name of Designated Agent	None, , , ,																									
Mailing Address																										
																							]-			
						CIT	Y									STA	λΤΕ				ZI	D C	OD	Е		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

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.

Rabo I	3ank		
Mailing Address	Post Office Box 6002		
	Arroyo Grande	CA 9342	1
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE