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## STATEMENT OF

RECEIVED 7

FORM 1		ORGANIZ	2012 SEP -7 PM 12: 00									
	:					COMALLOGE NTER						
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)		mple:If typing, type the lines.	12FE4M5	Annual Annua						
Dallas Cou	inty De	emocratic Par	ty , ,			<u></u>						
ADDRESS (number a	and street)	4209 Parry A	\ve.									
(Check if a is changed)		Dallas		TX	75223							
	•		CITY		STATE	ZIP CODE						
COMMITTEE'S E-MA  (Check if is change	address	S (Please provide only one dewing 1624										
COMMITTEE'S WEE	address	ress (URL) [WWW.dallasc	<b>l</b> emo	crats.org	1							
2. DATE <b>0</b> 9	9 7 1	´ 2012'``										
3. FEC IDENTIFIC	CATION NU	MBER C										
4. IS THIS STATE	MENT X	NEW (N) OR		AMENDED (A)								
I certify that I have  Type or Print Name		Statement and to the b			is true, correct	and complete.						
Signature of Treasur	rer <u>4</u>		<u>a</u>		Date 08	<b>1</b> 30°   2012. °						
NOTE: Submission of		ous, or incomplete informati	_			the penalties of 2 U.S.C. §437g						
Office Use Only				For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)						

FEC F	orm 1 (Revised 02/2009) Page 2												
TYPE OF	COMMITTEE												
Candidat	didate Committee:												
(a) <u></u>	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 Affilia	tion Office State President District												
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.												
Name of Candidate													
Party Co	·												
(d) X	This committee is a Cty (National, State or subordinate) committee of the DEM (Democratic, Republican, etc.) Party.												
Political Action Committee (PAC):													
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)												
	In addition, this committee is a Lobbyist/Registrant PAC.												
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)												
Joint Fun	draising Representative:												
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.												
Cor	mmittees Participating in Joint Fundraiser												
1.	FEC ID number												
2.	FEC ID number C												
3.	FEC ID number C												
4.	FEC ID number												

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FEC Form 1 (Revised	J 02/2009)	Page 3
Write or Type Committee Nan	me	
Dallas County [	Democratic Party	
······································	d Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
Mailing Address		
		1
	CITY STATE	ZIP CODE
П.		<del></del>
Relationship: Connect	eted Organization Affiliated Committee Joint Fundraisinġ Represen	ntative Leadership PAC Sponsor
7. Custodian of Records: ld books and records.	dentify by name, address (phone number optional) and position of the	person in possession of committee
. I De	orlana Ewina	
Full Name	arlene Ewing	
Mailing Address	4209 Parry Ave.	
	[Dallas [TX]	75223
Title or Position	CITY STATE	ZIP CODE
County Chair	Telephone number	214_   _
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committe, assistant treasurer).	e; and the name and address of
Full Name of Treasurer	id W. Bradley	
Mailing Address	4209 Parry Ave.	
	[Dallas TX]	75223
Title or Position	CITY STATE	ZIP CODE
Title or Position	Telephone number	214_   -  213_   -  1994
1		,

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Name of Bank, Depository, etc.

 $\label{eq:condition} (x,y,y) = \frac{1}{2} \left( \frac{1}{2} \sum_{i=1}^{n} \frac{1}{2} \left( \frac{1}{2} \sum_{i=1}^{n} \frac{1}{2} \left( \frac{1}{2} \sum_{i=1}^{n} \frac{1}{2} \sum_{i=1}^{n}$ 

FEC Form 1 (Revised 02/2009)

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	CITY								STATE						ZIP CODE																

STATE

ZIP CODE

CITY

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 8/31/12
Delivery Confirmation™ or Signature Confirm	mation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	-
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	s Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
Im N	9/7/12
(3/2005)	DATE PREPARED