Image# 12950079656 PAGE 1 / 4

| FEC FORM 1 | | STATE | | | | | | | | Office | e Use (| Only | | | |
|---------------------------|---------------|-------------------------------------|----------|------------|-------------------------|-------------|------------|---------|---------------------|--------|---------|------|--------|-------|-------|
| NAME OF COMMITTEE (in | n full) | (Check if r | | | le:If typin e lines. | ıg, type | 1 | 2FE | 4M5 | | | | | | |
| SALINAS | VALLE | Y DEMO | CRAT | | LUB | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| ADDRESS (number a | nd street) | 931 E MARKET S | TREET | | | | | | | | | | | | |
| X (Check if a is changed) | | SALINAS | | | | | | CA I | | 93912 | 2 | | | | |
| | | | | | | | L | | L | | | ᠃ | - 📖 | | |
| | | | C | CITY | | | ST | TATE | | | ZIF | CC | DE | | |
| COMMITTEE'S E-MA | AIL ADDRES | S (Please provide o gsanborn@att.ne | • | mail addre | ess) | | 1 1 1 | | 1 1 | ı | | | 1 | | |
| X (Check if is change | | | | | | | | | | | | 1 1 | | | |
| COMMITTEE'S WEB | PAGE ADD | RESS (LIRL) | | | | | | | | | | | | | |
| _ | address | LIIIII | | 1 1 1 | | | | | | | | | | | |
| is change | | | | | | | | | | | | | | | |
| 2. DATE 1 | 1 30 | 2011 | | | | | | | | | | | | | |
| 3. FEC IDENTIFIC | CATION NU | MBER | C co | 0434605 | | | | | | | | | | | |
| 4. IS THIS STATE | MENT X | NEW (N) | OR | | AMEN | DED (A) | | | | | | | | | |
| I certify that I have of | examined this | s Statement and to | the best | of my kno | wledge a | and belie | f it is ti | rue, co | orrect | and c | omple | te. | | | |
| Type or Print Name | of Treasurer | Gregory E. Sanbo | orn | | | | | | | | | | | | |
| Signature of Treasure | Gregory er | E. Sanborn | | [H | Electronica | ully Filed] | Dat | e | м - м 1 <u>1</u> | ′ [| 30 | ′ | Y | 2011 | Y Y |
| NOTE: Submission of | | ous, or incomplete in | | | | | | | | the pe | nalties | of 2 | 2 U.S. | C. §4 | 437g. |

| . | Office Use | | For further information contact: Federal Election Commission | FEC FORM 1 | |
|---|---------------|--|---|-------------------|--|
| | Only | | Toll Free 800-424-9530 Local 202-694-1100 | (Revised 02/2009) | |

| | FEC Fo i | rm 1 (Revised 02/2009) | Page 2 |
|-------------|-------------------------|---|-----------------------------|
| | | OMMITTEE | |
| (a) | | This committee is a principal campaign committee. (Complete the candidate information below | <i>i.</i>) |
| (b) | | This committee is an authorized committee, and is NOT a principal campaign committee. (Coinformation below.) | mplete the candidate |
| Nam Cand | e of didate | | |
| | didate / Affiliation | Office Sought: House Senate President | State |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Nam Cand | e of didate | | |
| Par | ty Con | nmittee: (National, State | (Democratic, |
| (d) | | This committee is a or subordinate) committee of the | Republican, etc.) Party. |
| Poli | tical A | ction Committee (PAC): | |
| (e) | | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co | onnected 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) | X | This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee) | segregated 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 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 committees/organizations, none of which is an authorized committee of a federal candidate. | two or more political |
| | Com | mittees Participating in Joint Fundraiser | |
| | 1. | FEC ID number C | |
| | 2. | FEC ID number | |
| | 3. | FEC ID number C | |
| | 4. | FEC ID number | |

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|---------------------------------------|---------------------------------------|-----------------------------|---|
| FEC Form 1 (Revised | | | Page 3 |
| Write or Type Committee Nam | | CLUD | |
| | LEY DEMOCRATIC | | |
| - | Organization, Affiliated Committee, J | oint Fundraising Represer | itative, or Leadership PAC Sponsor |
| NONE | | | |
| | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| | CITY | ST | ATE ZIP CODE |
| Relationship: Connected | ed Organization Affiliated Committee | Joint Fundraising Rep | resentative Leadership PAC Sponsor |
| | _ | | |
| | entify by name, address (phone number | optional) and position of | f the person in possession of committee |
| books and records. | | | |
| Marjetka Full Name | Bagley | | |
| Mailing Address | 17562 Hillcrest Drive | | |
| | | | |
| | Salinas | C | A 93908 |
| Title or Position | CITY | STA | TE ZIP CODE |
| | | | |
| Asst. Treasurer | | Telephone number | 831 771 4329 |
| 8. Treasurer: List the name ar | nd address (phone number optional) | of the treasurer of the com | mitton, and the name and address of |
| any designated agent (e.g., | | of the deastrer of the com | militee, and the hame and address of |
| Full Name Gregory E | E. Sanborn | | |
| | 702 Windmill Court | | |
| Mailing Address | | | |
| | Concord | I I C | CA 94518 |
| | CITY | STA | |
| Title or Position Treasurer | | Telephone number | 510 305 7377 |

9.

| FEC Form 1 (Revised | 02/2009) | | Page 4 | | | | |
|---|-----------------------|-------------|---------------|--|--|--|--|
| | | | | | | | |
| Full Name of Designated Agent Marjetka Bag | gley | | | | | | |
| Mailing Address | 17562 Hillcrest Drive | | | | | | |
| l | | | | | | | |
| I | Salinas | STATE 93908 | ZIP CODE | | | | |
| Title or Position Asst. Treasurer | Telephone nui | mber 831 | 771 - 4329 | | | | |
| 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. | | | | | | | |
| Pacific V | /alley Bank | | | | | | |
| Mailing Address | 422 Main Street | | | | | | |
| | | | | | | | |
| | Salinas | CA 93901 | | | | | |
| | CITY | STATE | ZIP CODE | | | | |
| Name of Bank, Depository, etc | C. | | | | | | |
| | | | | | | | |
| Mailing Address | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | CITY | STATE | ZIP CODE | | | | |