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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. The Democratic Club of the High Desert PO Box 1718 ADDRESS (number and street) (Check if address is changed) Lancaster 93539 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS treasurer@avdemocrats.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.avdemocrats.com/ (Check if address is changed) DATE 01 2018 C00673442 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. Brody, Scott,,, Type or Print Name of Treasurer Brody, Scott,,, [Electronically Filed] 03 15 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 Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

ı	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE 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. (Cominformation below.)	plete the candidate			
Name Cand	e of didate					
	didate / Affiliati	on Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand	e of lidate					
Part	ty Con	nmittee: (National, State	(Democratic,			
(d)	×	CLID ' ' DEM	Republican, etc.) Party			
Poli	tical A	ction 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 p 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.)				
Join	t Fund	Iraising Representative:				
(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw	vo or more political			
(h)		committees/organizations, at least one of which is an authorized committee of a federal candidate. 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			
	Committees Participating in Joint Fundraiser					
	1.					
	2.					
	3.	FEC ID number				
	4.	FEC ID number C				

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Write or Type Comn		- age o
	ocratic Club of the High Desert	
	onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	rship PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative	_eadership PAC Sponsor
. Custodian of Re books and record	ccords: Identify by name, address (phone number optional) and position of the person in pls.	possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
Treasurer: List the any designated ac	e name and address (phone number optional) of the treasurer of the committee; and the gent (e.g., assistant treasurer).	name and address of
Full Name	Brody, Scott, , ,	1
of Treasurer	37732 Clark Ct.	
Mailing Address	<u> </u>	
	L Delmdele	
	Palmdale	ZIP CODE
Title or Position Treasurer		

Full Massac C			Page 4
E. II. N · · · · · ·			
Full Name of Designated			
Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Fitle or Position			
		Telephone number	
Mailing Address	2831 W. Ave L		
	Lancaster	CA 935	36
	Lancaster	CA 9353	36
Name of Bank, Deposito	CITY		
Name of Bank, Deposito	CITY		
	CITY cry, etc.	STATE	
Name of Bank, Deposito	CITY cry, etc.	STATE	
	CITY cry, etc.	STATE	