

5. TYPE OF COMMITTEE (Check One)

Candidate 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. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State
 District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State (or subordinate) committee of the (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
- (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 Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising 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.

Committees Participating in Joint Fundraiser

1.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

Write or Type Committee Name

LIVABLE COMMUNITIES PAC

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

REP. RAUL M GRIJALVA

Mailing Address **PO Box 1242**

Tucson **AZ** **85702**

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship:

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Diane Evans**

Mailing Address **1831 Bay Street, SE**

Washington **DC** **20003**

CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number **202** - **548** - **0880**

8. 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 **Elizabeth Martinez-Baldick**

Mailing Address **3207 Flushing Meadows Terrace**

Chevy Chase **MD** **20815**

CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number **301** - **469** - **7571**

Full Name of Designated Agent

Diane Evans

Mailing Address

1831 Bay Street, SE

Washington

DC

20003

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

Telephone number

202

548

0880

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.

Bank of America

Mailing Address

201 Pennsylvania Avenue, SE

Washington

DC

20003

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE