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FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

DEMOCRATIC CLUB OF CENTRAL ORANGE COUNTY
DCCOC

ADDRESS (number and street) 1038 N. TUSTIN ST. #236

(Check if address is changed)

ORANGE CA 92867-5958

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER
714-744-3577

2. DATE 05 15 2004

3. FEC IDENTIFICATION NUMBER ▶ C00399410

4. IS THIS STATEMENT NEW (N) OR X 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.

Type or Print Name of Treasurer Anne M. Pearson

Signature of Treasurer Anne M. Pearson Date 05 15 2004

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 Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

FE3AH042.PDF

5. TYPE OF COMMITTEE (Check One)

(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

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) This committee is a separate segregated fund.

(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. **Name of Any Connected Organization or Affiliated Committee**

NONE

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

Write or Type Committee Name

Democratic Club of Central Orange County

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 ANNE M. PEARSON – TREASURER

Mailing Address 1723 N FERN ST

ORANGE CA 92867-4013

Title or Position▼ CITY ▲ STATE ▲ ZIP CODE ▲

TREASURER Telephone number 714-637-5564

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 ANNE M. PEARSON

Mailing Address 1723 N FERN ST

ORANGE CA 92867-4013

Title or Position▼ CITY ▲ STATE ▲ ZIP CODE ▲

TREASURER Telephone number 714-637-5564

Full Name of Designated Agent SHARON OHARA

Mailing Address 700 W WALNUT #21

ORANGE CA 92868-

Title or Position▼ CITY ▲ STATE ▲ ZIP CODE ▲

PRESIDENT Telephone number 714-744-6187

3. **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.

WELLS FARGO BANK N.A.

Mailing Address P.O. BOX 6995

PORTLAND OR 97228-6995

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission

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AA
PREPARER

6-4-04
DATE PREPARED

(5/2004)