FEC FORM 1		STATEME ORGANIZ		Office Use Only	
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Stand With		ica			
ADDRESS (number an	nd street)	455 Capitol Mall, Suite 600			
(Check if ad	ldress				
is changed)		Sacramento			95814
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MAI	address	S (Please provide only one e feccomm@bmhlaw.com	e-mail address)		
COMMITTEE'S WEB	PAGE ADDI	RESS (URL)			
(Check if a is changed					
2. DATE 06		/ Y Y Y Y 2012			
3. FEC IDENTIFIC	ATION NU	MBER C C	00520981		
4. IS THIS STATEM	MENT X	NEW (N) OR	AMENDED (A)		
I certify that I have e	xamined this	Statement and to the bes	t of my knowledge and belief it	is true, correc	t and complete.
Type or Print Name c	of Treasurer	Thomas W. Hiltachk			
Signature of Treasure	Thomas V r	V. Hiltachk	[Electronically Filed]	Date 06	M / D D / Y Y Y Y Y 20 2012
NOTE: Submission of f			may subject the person signing t		o the penalties of 2 U.S.C. §437g. 3.
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)

Image# 12971297006

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F	EC Fo	m 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Can	didate	Committee:	
(a)	Ш	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. (Cor information below.)	nplete the candidate
Name Candi			
Candi Party	idate Affiliati	on Office Sought: House Senate President	State District
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Part	y Con	imittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Part
Polit	tical A	ction Committee (PAC):	
	X		nnacted examination is
(e)	\sim	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co 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 s committee. (i.e., nonconnected committee)	egregated fund or part
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Stand With America

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

None			
Mailing Address			
	CITY	STATE ZIP COD	Έ
Relationship: Connecte	d Organization Affiliated Committee Joint Fundrais	sing Representative Leadership P	AC Sponsor

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

Thomas W	Hiltachk
Full Name	
Mailing Address	455 Capitol Mall, Suite 600
	[
	Sacramento CA 95814 - - - -
Title or Position	CITY STATE ZIP CODE
Custodian of Records	Telephone number 916 442 7757

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	Thomas W. Hiltachk
Mailing Address	455 Capitol Mall, Suite 600
	Sacramento CA 95814 -
	CITY STATE ZIP CODE
Title or Position	Image: Telephone number 916 442 7757

Full Name of Designated Agent	Ashlee N. Ti	tus																	
Mailing Address	l	455 Capitol Mall,	Suite 600									<u> </u>							
	l																		
	l	Sacramento								CA			9581	14					
			CIT	Y						STATE	Ξ				ZIP	COD	Ε		
Title or Position	urer					Tele	ephor	ne n	umt	ber									

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.

	California Bank & Trust	
Mailing Address	550 South Hope Street, Suite 100	
	Los Angeles	CA 90071
	CITY	STATE ZIP CODE
Name of Bank, D	epository, etc.	
	L	
Mailing Address		
	CITY	STATE ZIP CODE