FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Tri-Valley United Democratic Campaign PO Box 348 ADDRESS (number and street) (Check if address is changed) San Jose 95103 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address jordan@eldridgepolitical.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00449645 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. Type or Print Name of Treasurer Eldridge, Jordan, , 09 20 2023 Signature of Treasurer Eldridge, Jordan, , , Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

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TYPE OF COMMITTEE:					
Candidate Committee:					
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 Office Sought: House Senate President	State CA District				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate					
rty Committee:					
(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party					
litical Action Committee (PAC):					
This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a:				
Corporation Corporation w/o Capital Stock Labor	r Organization				
	erative				
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 segregated fund or party 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.)					
(g) This committee is an independent expenditure-only political committee (Super PAC).					
In addition, this committee is a Lobbyist/Registrant PAC.					
This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).					
In addition, this committee is a Lobbyist/Registrant PAC.					
nt Fundraising Representative:					
(i) 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.					
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					
1C					

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٧	Vrite or Type Committee Name	Dana anatia Gama aina			
_	•	Democratic Campaign	Fundaciona Denacent	ativa ay Laaday	ahin DAC Changer
6.	None	ganization, Affiliated Committee, Joint	Fundraising Representa	ative, or Leader	snip PAC Sponsor
	Mailing Address				
			<u> </u>		
					-
		CITY ▲	STAT	 E ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising Repre	esentative	Leadership PAC Sponso
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Eldridge, Jo	ordan, , ,			
	Full Name	PO Box 348			
	Mailing Address	O BOX 340			
		San Jose	CA	95103	
		CITY ▲	STAT	E ▲	ZIP CODE ▲
	Title or Position ▼				
	Custodian of Records		Telephone number	408	766
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 Eldridge, Jo	ordan, , ,			
		75 E Santa Clara Street, Suite 900			
	Mailing Address				
		San Jose		Λ 05112	
		San Jose	C/	A 95113	
	Till D III	CITY ▲	STAT	E ▲	ZIP CODE ▲
	Title or Position ▼			, 100 -	766
	Treasurer		Telephone number	408	766 3761

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Full Name of Designated Agent	None, , , ,					
Mailing Address						
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲				
	Telephone number					
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.						
First Republic Bank						
Mailing Address	3991 MacArthur Blvd, Suite 300					
	Newport Beach CA	92660				
	CITY ▲ STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.						
Mailing Address						
	CITY ▲ STATE ▲	ZIP CODE ▲				