## **STATEMENT OF**

FORM 1	ORGANIZATION (See instructions)	Office use only
NAME OF     COMMITTEE (in f	(Check if name Example: If typying is changed) over the lines	
John Tavaglio	ne for Congress	
ADDRESS (number and s	4201 Brockton Ave Ste 100	
(Check if address is changed)	Riverside	CA 92501 - 1
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI  (Check if address is changed)	L ADDRESS (Please provide only one e-mail address)  SGriffith@trscpas.com	
COMMITTEE'S WEB (Check if address is changed)	PAGE ADDRESS (URL)  www.johntavaglioneforcongress.com	
2. DATE 0.8	25 2011	
<ul><li>3. FEC IDENTIFICA</li><li>4. IS THIS STATEM</li></ul>		ED (A)
I certify that I have examine Type or Print Name of	ned this Statement and to the best of my knowledge and belief it is true  TreasurerRichard Teaman	e, correct and complete
Signature of Treasurer	Electronically Filed by Richard Teaman	Date 08 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signin	
Office Use Only	For further int Federal Election Toll Free 800-4	424-9530 (Revised 02/2009)

	F	EC F	Form 1 (Revised 02/2009)	Page 2
5.	TYPE	OF CC	OMMITTEE (Check One)	
	Candi	date C	Committee:	
	(a)	Х	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 information below.)	candidate
	Name Candid		John F Tavaglione	
	Candid Party A		on REP Office X House Senate President	State CA District 41
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candid			
	Party (	Comm	nittee:	
	(d)			emocratic, epublican,etc.) Party.
	Politic	al Act	tion Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected or	rganization is a:
			Corporation Corporation w/o Capital Stock Labor	Organization
			Membership Organization Trade Association Coop	erative
			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 fu committee. (i.e., nonconnected committee)	and or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint F	undra	nising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, at least one of which is an authorized committee of a federal candidate.	ore political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, none of which is an authorized committee of a federal candidate.	ore political
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number C	
			2. FEC ID number	
			3. FEC ID number	
			4.   FEC ID number C	

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Write or Type Committee Name					
John Tavaglione for Co	ngress				
6. Name of Any Connected Org	ganization, Affiliated Committee,	Joint Fundraising Represe	ntative, or Lea	dership PAC Sponsor	
	1 1 1 1 1 1 1 1 1 1				
Mailing Address					
	CITY▲		STATE A	ZIP CODE	
Relationship:	_	_		_	
Connected Organization	Affiliated Committee	Joint Fundraising Rep	presentative	Leadership PAC Sponsor	
possession of Committee	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.  Mr. Richard Teaman				
Mailing Address	4201 Brockton	Ave Ste 100			
	Riverside		CA	92501 _	
Title or Position ♥  Treasurer	CITY A	Telephone nun	STATE	ZIP CODE A  - 274 - 9500	
8. <b>Treasurer:</b> List the name	and address (phone number	· 		mitton; and the	
	designated agent (e.g., assist		a or the com	mittee, and the	
Full Name of Treasurer Richar	d Teaman				
Mailing Address	4201 Brockton	Ave Ste 100			
	Riverside		CA	92501 _	
Title or Position ♥	CITY A		STATE	ZIP CODE A	
Treasurer		Telephone nur	951	_ 274 _ 9500	

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Full Name of Designated Agent	Javier Carrillo		
Mailing Address	4201 Brockton Ave Ste	100	
	Riverside	CA	92501 –
Title or Position ▼	CITY A	STATE A	ZIP CODE A
A	asst. Treasurer	Telephone number	
Banks or Other I safety deposit box	es or maintains funds. epository, etc.	vhich the committee deposits funds, ho	lds accounts, rents
	City National Bank  3484 Central Ave		
Mailing Address			
	Riverside	CA L	92506
	Riverside CITY 🗖	CA CA	92506 ZIP CODE
 Name of Bank, De	CITY 🗖		
Name of Bank, De	CITY 🗖		
Name of Bank, De	epository, etc.		ZIP CODE Δ
	epository, etc.	STATE <b>△</b>	ZIP CODE A
	epository, etc.	STATE <b>△</b>	ZIP CODE A