Image# 202307289584136035				PAGE 1 / 5
FEC FORM 1	STATEMEI ORGANIZ	-		Office Use Only
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
Solano United-S	CDCC Federal A	ccount		
	5445 Madison Avenue			
ADDRESS (number and street)				
is changed)				
	CITY A		STATE 🔺	ZIP CODE▲
COMMITTEE'S E-MAIL ADDR				
 (Check if address is changed) 	campaigns@rcbs.us			
	Optional Second E-Mail Ad	dress		
(Check if address is changed)	www.solanodemocrats.com			
	26 / Y Y Y Y 2023			
3. FEC IDENTIFICATION N	IUMBER ► C c	00455865		
4. 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 ar	nd complete.
	Lucia Destas			
Type or Print Name of Treasur	er Lewis, Denise, , ,			
Signature of Treasurer	is, Denise, , ,	[Electronically Filed]	Date 07	/ D D / Y Y Y Y 26 2023
NOTE: Submission of false, error		may subject the person signing TION SHOULD BE REPORTED		ne penalties of 52 U.S.C. §3010
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

07/28/2023 18 : 10

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
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. (Com information below.)	plete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate Presider	
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
(d) This committee is a SLIP	mocratic, publican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its c	connected organization is a:
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization	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 se committee. (i.e., nonconnected committee)	egregated fund or party
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.	
(h) This committee is a political committee with both contribution and non-contribution accounts (H	lybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (i) 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 (j) committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser 1.

_____ 2.

С		1	1	1	1	1	
	-	-	-	-	-	-	-
C			1.1		1		

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	

Solano United-SCDCC Federal Account

Name of Any	Conn	ected	Org	aniz	atio	n, A	\ffili	ate	d C	Con	ımi	ttee	e, J	oint	F	uno	drai	isir	ng	Re	ore	ser	ntat	ive	, o	r L	ead	ders	ship	PA	C	Spo	onse	or	
None																																			
Mailing Addres	s		L																																
			L																																
			L																												-				
										Cľ	ΤY											STA	ΑΤΕ						ZIF	o C	OD	E 🔺			
Relationship:	Co	onnect	ed O	rgan	izatio	n		Affil	iate	ed C	Drga	aniza	atio	n		Jo	oint	Fu	ndr	aisi	ng	Re	ores	sen	tativ	/e			Lea	ders	hip	PA	c s	pons	30
	None	None	None	None	None	None	None Mailing Address	None Mailing Address	None	None	None Mailing Address	None	None Mailing Address	None	None Mailing Address	None Mailing Address L L CITY ▲	None Mailing Address L L CITY ▲	None Mailing Address L L CITY ▲	None Mailing Address Image: Control of the second	None Mailing Address Image: City Image:	None Mailing Address L CITY ▲ STATE ▲	None Mailing Address L L CITY ▲ STATE ▲	None Mailing Address Image: City ▲ State ▲ ZIP CODE ▲												

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

Lewis, Den	ise, , ,
Full Name	
Mailing Address	5445 Madison Avenue
	Sacramento CA 95841
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Custodian of Records	Telephone number 916 348 9100

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	Rogers, Karen, , ,						
of Treasurer							
Mailing Address	406 Timber Creek Drive						
	Rio Vista CA 94571 - - -						
	CITY ▲ STATE ▲ ZIP CODE ▲						
Title or Position ▼							
Treasurer	Image: Image of the second						

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent	Lewis, Denise, , ,	
Mailing Address	5445 Madison Avenue	
	Sacramento CA 95841 Image: I	
	CITY A STATE A ZI	P CODE 🔺
Title or Position	7	
Assistant Treasu	rer Telephone number	8 9100

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.

	First Foundation Bank		
Mailing Address	18101 Von Karman Ave, Suite 750		
			12
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, I			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

Amend Officer, Bank information and committee address

Form/Schedule: Transaction ID: