

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

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Office Use Only

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

Sandra Mendoza for Congress

ADDRESS (number and street) 35 S. Sierra Madre Blvd., Unit A  
 (Check if address is changed)  
Pasadena CA 91107  
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS  
 (Check if address is changed) claudiagonzalezmiranda@outlook.com  
Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)  
 (Check if address is changed)

2. DATE 01 / 09 / 2017

3. FEC IDENTIFICATION NUMBER C

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 and complete.

Type or Print Name of Treasurer Claudia Gonzalez

Signature of Treasurer  Date 01 / 09 / 2017

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.

NON-PROFIT ORGANIZATION

5. 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. (Complete the candidate information below.)

Name of Candidate Sandra Mendoza

Candidate Party Affiliation  DEM  Office Sought:  House  Senate  President State  CA District  34

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

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

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - 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 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.)

Joint Fundraising Representative:

- (g)  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.
- (h)  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

1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C

2014-01-01 10:00:00

Write or Type Committee Name

Sandra Mendoza for Congress

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

None

Mailing Address

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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 Claudia Gonzalez

Mailing Address 35 S. Sierra Madre Blvd., Unit A

Pasadena

Title or Position CITY STATE ZIP CODE

Custodian of Records Telephone number 323 270 4456

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 Claudia Gonzalez

Mailing Address 35 S. Sierra Madre Blvd., Unit A

Pasadena CA 91107

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 323 270 4456

NON-PROFIT ORGANIZATION

Full Name of Designated Agent

None

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

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 S. Hope Street

Los Angeles

CA

90071

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

2017-01-12 PM 00:00:00

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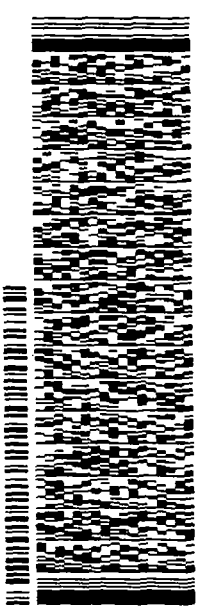
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WASHINGTON DC 20463

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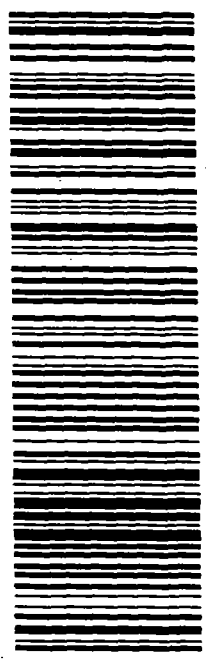
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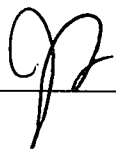
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PREPARER  
(3/2015)



11/12/17  
DATE PREPARED

2017-11-17 10:00:00 AM