

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

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

12FE4M5

EDEN AREA UNITED DEMOCRATIC CAMPAIGN AKA E A U D C

ADDRESS (number and street)

PO BOX 56503

☐(Check if address
is changed)

HAYWARD

CITY ▲

CA

STATE ▲

94545

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒(Check if address
is changed)

alliancecampaignstrategies@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address
is changed)

2. DATE

MM / DD / YYYY
06 / 13 / 2017

3. FEC IDENTIFICATION NUMBER ►

C C00339226

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 Ramirez Holmes, Angela, , ,

Signature of Treasurer

Ramirez Holmes, Angela, , ,

[Electronically Filed]

Date

MM / DD / YYYY
06 / 13 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

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

Write or Type Committee Name

EDEN AREA UNITED DEMOCRATIC CAMPAIGN AKA E A U D C

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

Ramirez Holmes, Angela, , ,

Mailing Address

1811 Santa Rita Road

Suite 224

Pleasanton

CA

94566

Title or Position

CITY

STATE

ZIP CODE

Telephone number

925

264

8164

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

Ramirez Holmes, Angela, , ,

Mailing Address

1811 Santa Rita Road

Suite 224

Pleasanton

CA

94566

Title or Position

CITY

STATE

ZIP CODE

Telephone number

925

264

8164

Full Name of
Designated
Agent

Torello, Robin, , ,

Mailing Address

356 Bowling Green Street

San Leandro

CITY

CA

STATE

94577

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

510

635

3121

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.

US Bank

Mailing Address

4663 Clayton Road

Concord

CITY

CA

STATE

94521

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F1N

Transaction ID :

This is an amendment to Form 1 on file

Form/Schedule:

Transaction ID: