Image# 12952232128 PAGE 1 / 5

FEC FORM 1		STATI ORG						0%: II (
NAME OF COMMITTEE (in	n full)	(Check if		Example over the	If typing, type lines.	12F	E4M5	Office Use C	nly	
JOSE HEF	RNANE	EZ FOR	CON	GRES	S					
ADDRESS (number a	nd street)	PO BOX 1667								
(Check if and is changed)		MODESTO				CA	95	5353	<u> </u>	
			С	CITY		STATE	.	ZIP	CODE	
COMMITTEE'S E-MA (Check if is change	address	S (Please provide info@josefor	-		s) 					
COMMITTEE'S WEB (Check if is change	address	RESS (URL) www.joseforcong	ress.com							
2. DATE 06	6 20	2012	Y							
3. FEC IDENTIFIC	CATION NUI	MBER	C coo	0502989						
4. IS THIS STATE	MENT	NEW (N)	OR	×	AMENDED (A)					
I certify that I have e	examined this	Statement and t	to the best o	of my know	ledge and belie	f it is true,	correct ar	nd complet	e.	
Type or Print Name	of Treasurer	Tom Aja								
Signature of Treasure	<i>Tom Aja</i> er			[Ele	ctronically Filed]	Date	M M M	20	/ Y	2012
NOTE: Submission of		us, or incomplete i				-		e penalties	of 2 U.S	S.C. §437g.

	Office			For further information contact:	FEC FORM 1
ı	Use			Federal Election Commission	
ᆫ	Only			Toll Free 800-424-9530	(Revised 02/2009)

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	i aye Z
Candidate Committee:	
(a) X 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. (Comple information below.)	te the candidate
Name of Candidate JOSE M HERNANDEZ	
Candidate Party Affiliation DEM Office Sought: House Senate President	State CA District 10
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
· · ·	emocratic, publican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	cted organization is a:
Corporation Corporation w/o Capital Stock	abor 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 segre committee. (i.e., nonconnected committee)	egated 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.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Committees Participating in Joint Fundraiser	
1. FEC ID number	
2. FEC ID number	
3. FEC ID number C	
4.	

			_
FEC Form 1 (Revised	d 02/2009)		Page 3
Write or Type Committee Nar	me		
JOSE HERNA	NDEZ FOR CONGRES	SS	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fo	undraising Representative, or	Leadership PAC Sponsor
RED TO BLUE MAJO	ORITY FUND		
Mailing Address	PO BOX 1174		
	SPRINGFIELD	VA	22151
	CITY	STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee X	loint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Id books and records. 	lentify by name, address (phone number opt	ional) and position of the person	on in possession of committee
Tom Aja	.		
Full Name	P.O. Box 1667		
Mailing Address			
	Modesto	, CA	95353
	Wodesto		
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	
8. Treasurer : List the name a any designated agent (e.g.	and address (phone number optional) of the , assistant treasurer).	treasurer of the committee; an	d the name and address of
Full Name Tom Aja			
Mailing Address	P.O. Box 1667		
	Modesto	CA	95353
Title on Desiries	CITY	STATE	ZIP CODE
Title or Position Treasurer		Telephone number	- - -

FEC Form 1 (R	Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
Banks or Other Depo	ositories: List all banks or other depositories in which the committee deposits funds, I	holds accounts, rents
cataty danacit haves ar	or maintaine funde	
safety deposit boxes or Name of Bank, Deposit	or maintains funds.	
Name of Bank, Deposit	or maintains funds.	
Name of Bank, Deposit	or maintains funds.	
Name of Bank, Deposi	or maintains funds. sitory, etc. unk of Stockton	
Name of Bank, Deposi	or maintains funds. sitory, etc. unk of Stockton	02
Name of Bank, Deposi	or maintains funds. sitory, etc. ank of Stockton 301 East Miner Avenue	02 ZIP CODE
Name of Bank, Deposi	or maintains funds. sitory, etc. ank of Stockton 301 East Miner Avenue Stockton CA 9520 CITY STATE	
Name of Bank, Deposition Mailing Address Name of Bank, Deposition	commaintains funds. Sitiory, etc. 301 East Miner Avenue Stockton CA 9520 CITY STATE Sitory, etc.	
Name of Bank, Deposition Mailing Address Name of Bank, Deposition	or maintains funds. sitory, etc. ank of Stockton 301 East Miner Avenue Stockton CA 9520 CITY STATE sitory, etc.	
Name of Bank, Deposition Mailing Address Name of Bank, Deposition Bar	commaintains funds. Sitiory, etc. 301 East Miner Avenue Stockton CA 9520 CITY STATE Sitory, etc.	ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011) Page 5 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. ı Bank of America 1601 I Street NW Mailing Address 95354 CA Modesto CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor JOSE HERNANDEZ VICTORY FUND PO BOX 1667 Mailing Address **MODESTO** 95353 CA **CITY** STATE 4 ZIP CODE Relationship: Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Connected Organization [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number