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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Shahid Buttar for Congress Committee 1769 15th Street ADDRESS (number and street) (Check if address is changed) San Francisco 94103 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS filings@seowenscompany.com (Check if address is changed) Optional Second E-Mail Address senior-staff@shahidforchange.us COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00670463 FEC IDENTIFICATION NUMBER > 3. X 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. Buttar, Shahid, , , Type or Print Name of Treasurer Buttar, Shahid, , , [Electronically Filed] 07 2020 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

FEC I	Form 1 (Revised 02/2009) Page 2
	COMMITTEE  Ite Committee:
(a) <b>x</b>	This committee is a principal campaign committee. (Complete the candidate information below.)
(b) Name of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)  Buttar, Shahid, , ,
Candidate Candidate Party Affili	Office State CA
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee:
(d)	(National, State (Democratic, This committee is a or subordinate) committee of the 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 Fu	ndraising 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.
Co	mmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	
4.	

FEC <b>Form 1</b> (Revis	ed 02/2009)	Page <b>3</b>
Write or Type Committee N	ame	
Shahid Buttar	for Congress Committee	
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
None		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representa	tive Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the pe	erson in possession of committee
Owens Full Name	s, Stacy, , ,	
	1390 Market Street, Suite 200	
Mailing Address		
	San Francisco CA	94102
Title or Position	CITY STATE	ZIP CODE
Custodian of Records		510 - 423 - 4300
3. <b>Treasurer:</b> List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; g., assistant treasurer).	and the name and address of
Full Name Buttar, of Treasurer	Shahid, , ,	
Mailing Address	1552-A Haight Street	
	San Francisco CA	94117
Title or Position	CITY STATE	ZIP CODE
	Telephone number	115 - 857 - 5357 - 1 - 1 - 5357

FEC Form	<b>1</b> (Revised 02/2009)	Page <b>4</b>		
Full Name of Designated Agent	None, , , , ,			
Mailing Address				
	CITY STATE ZIF	P CODE		
Title or Position				
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 Republic Bank  44 Montgomery Street				
Mailing Address	San Francisco   CA   94104			
		P CODE		
Name of Bank, D	Depository, etc.			
Mailing Address				
	CITY STATE ZII	P CODE		

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' + H9 A = N5 H + CB

Form/Schedule: F1A Transaction ID:

The committee has changed its treasurer.

Form/Schedule: Transaction ID: