

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED BY THE SENATE

2017 FEB -1 AM 9:13

Office Use Only

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

12FE4M5

JOHN MELENDEZ FOR SENATE

ADDRESS (number and street)

21817 UNIT A PLUMMER STREET

(Check if address is changed)

CHATSWORTH

CITY ▲

CA

STATE ▲

91311

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

JOHNMELENDEZFORSENATE@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

JOHNMELENDEZFORSENATE.COM

2. DATE

12 19 2016

3. FEC IDENTIFICATION NUMBER ▶

TO BE ASSIGNED

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

ROYCE D'ORAZIO

Signature of Treasurer

Date

12 19 2016

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.

Office Use Only					
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

201702010200050171

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 JOHN MELENDEZ

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

- (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

201702010200050172

Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for 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

ROYCE D'ORAZIO

Mailing Address

21817 UNIT A PLUMMER STREET

[Empty grid lines for address]

CHATSWORTH CA 91311

Title or Position

CITY

STATE

ZIP CODE

CAMPAIGN MANAGER

Telephone number 818-624-8816

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

ROYCE D'ORAZIO

Mailing Address

21817 UNIT A PLUMMER STREET

[Empty grid lines for address]

CHATSWORTH CA 91311

Title or Position

CITY

STATE

ZIP CODE

CAMPAIGN MANAGER

Telephone number 818-624-8816

201702010200050173

Full Name of Designated Agent

MEGAN KELLY

Mailing Address

21817 UNIT A PLUMMER STREET

CHATSWORTH

CITY

CA

STATE

91311-

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

818-389-7809

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.

UNION BANK

Mailing Address

21821 DEVONSHIRE ST

CHATSWORTH

CITY

CA

STATE

91311-

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

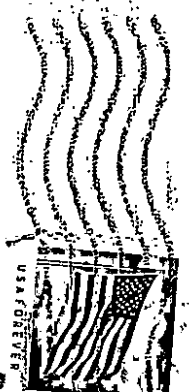
ZIP CODE

201702010200050174

21817-A PLUMMER ST
CHATEWORTH, CA 91311

SANTA CLARITA, CA 91311

26 JAN 2013 PM 2:11



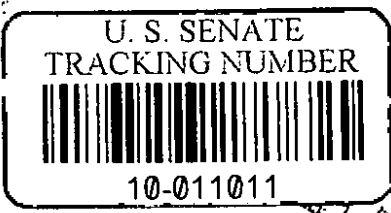
SECRET
BY THE SENATE
OFFICE

SECRETARY OF THE SENATE

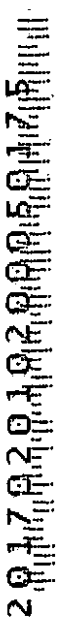
OFFICE OF PUBLIC RECORDS

P.O. Box 77578

WASHINGTON, DC 20013-7578



20013-857878



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

2/1/17

1/26/17

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

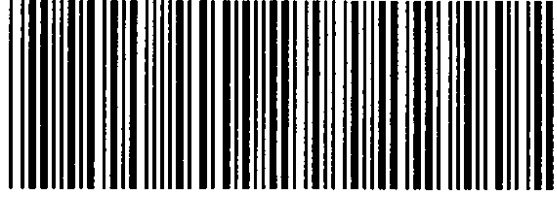
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

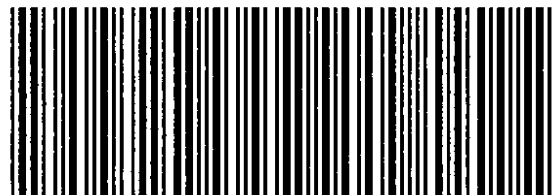
OTHER _____
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 2/1/17

201702010200050176



SEN PATCH



SEN PATCH

201702010200050177