FEC FORM 1	STATEMEN ORGANIZA	-	PAGE 1 / 5 —— Office Use Only
1. NAME OF COMMITTEE (in fu	l) X (Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
Nevada Cou	nty Democratic Centra	al Committee	
ADDRESS (number and	5429 Madison Avenue		
(Check if add is changed)			
is changed)	Sacramento CITY ▲		CA 95841 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL	ADDRESS		
(Check if add is changed)	ess campaigns@rcbs.us		
	Optional Second E-Mail Addre	SS	
COMMITTEE'S WEB PA			
2. DATE 03	/ D D / Y Y Y Y 27 2017		
3. FEC IDENTIFICAT	ION NUMBER ► C COOR	568667	
4. IS THIS STATEME	IT NEW (N) OR	X AMENDED (A)	
I certify that I have exa	nined this Statement and to the best of	my knowledge and belief it is	true, correct and complete.
Type or Print Name of	reasurer Copeland, Rita, , ,		
Signature of Treasurer	Copeland, Rita, , ,	[Electronically Filed]	Date 03 / 27 / 2017
NOTE: Submission of fals	e, erroneous, or incomplete information ma ANY CHANGE IN INFORMATION		s Statement to the penalties of 2 U.S.C. §437g. HIN 10 DAYS.
Office Use Only		For further information con Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	tact: FEC FORM 1 (Revised 06/2012)

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F	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	E OF C	OMMITTEE	
Can	didate	e 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. (Complet information below.)	e the candidate
Name Cand			
Cand Party	lidate Affiliati	on Office Sought: House Senate President	State District
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	ty Con	nmittee:	
(d)	×		mocratic, publican, etc.) Party
Polit	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization Trade Association C	ooperative
		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)	gated 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	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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Write or Type Committee Name

Nevada County Democratic Central Committee

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

None			
Mailing Address			
	CITY	STATE ZIP CODE	
	ted Organization Affiliated Committee Joint Fund	d position of the person in possession of commi	
	nd, Rita, , ,		
Full Name	.5429 Madison Avenue		
Mailing Address			
	Sacramento	CA 95841	
Title or Position	CITY	STATE ZIP CODE	
L Custodian of Records		∣ 916 348 9100)

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).

Telephone number

Full Name of Treasurer	Copeland, Rita, , ,
Mailing Address	5429 Madison Avenue
	Sacramento CA 95841
	CITY STATE ZIP CODE
Title or Position Treasurer	Image:

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Full Name of Designated Agent	None, , , ,]
Mailing Address																											
]
																	L							-[
						CIT	Y										ST	ATE				ZIF	P C	ODE	Ξ		
Title or Position																											
												Те	lepl	non	ie n	um	ber							-			ļ

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.

Com	munity 1st Bank	
Mailing Address	2250 Douglas Boulevard, Suite 190	
	Roseville	CA 95661
	CITY	STATE ZIP CODE
Name of Bank, Deposito	ry, etc.	
Mailing Address		
	CITY	STATE ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011)

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Banks or Other Deposito safety deposit boxes or ma					
Name of Bank, Depository]	ADDITIONAL]
US,E	Bank				
Mailing Address	2360 Grass Valley	Highway			
					603
		CITY 🗖	STA	TE 🗖	ZIP CODE 🔺
Name of Any Connected	Organization, Affiliated	l Committee, Joint Fund	raising Representat	ive, or Leade	[ADDITIONAL rship PAC Sponsor
Mailing Address					
otionohini					
ationship: Connected Organization		_	I I I I I I I I I I I I I I I I I I I		LILIII - LILII ZIP CODE A Jership PAC Sponsor
Connected Organization	Affiliated Com	_			
Connected Organization Designated Agent	Affiliated Com	_			lership PAC Sponsor
Connected Organization Designated Agent Full Name		_			lership PAC Sponsor
Connected Organization Designated Agent		_			lership PAC Sponsor
Connected Organization Designated Agent Full Name	Affiliated Com	_			lership PAC Sponsor
Connected Organization Designated Agent Full Name		_			lership PAC Sponsor
Connected Organization Designated Agent Full Name		_	Indising Representativ		lership PAC Sponsor
Connected Organization Designated Agent Full Name Mailing Address			Indising Representativ		Aership PAC Sponsor
Connected Organization Designated Agent Full Name Mailing Address			Indising Representativ		Aership PAC Sponsor