

**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

DemsVote

ADDRESS (number and street)

5025 J Street #203

☐(Check if address
is changed)

Sacramento

CITY ▲

CA

STATE ▲

95819

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐(Check if address
is changed)

algerhardt@sbcglobal.net

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address
is changed)

www.demsvote.org

2. DATE

MM / DD / YYYY
01 / 24 / 2018

3. FEC IDENTIFICATION NUMBER ►

C C00667055

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 McElroy, Jim, , ,

Signature of Treasurer

McElroy, Jim, , ,

[Electronically Filed]

Date

MM / DD / YYYY
03 / 15 / 2020

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

DemsVote**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

McElroy, Jim, , ,

Mailing Address

5025 J Street #203

Sacramento

CA

95819

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

916

216

5505

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

McElroy, Jim, , ,

Mailing Address

5025 J Street #203

Sacramento

CA

95819

Title or Position
Treasurer

CITY

STATE

ZIP CODE

Telephone number

916

216

5505

Full Name of
Designated
Agent

Gerhardt, Ann, , ,

Mailing Address

5025 J Street #203

Sacramento

CITY

CA

STATE

95819

ZIP CODE

Title or Position

Designated Agent

Telephone number

916

616

4406

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.

El Dorado Savings Bank

Mailing Address

4768 J Street

Sacramento

CITY

CA

STATE

95819

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE