FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		I I MAINE	111011			
		(See instruction	ns)		Office use only	
1. NAME OF COMMITTEE (i	n full)	(Check if name is changed)	Example: If typying, typ over the lines	e 12FE4M5		
VANDENBEF	G FOR CONGRES	s 	<u> </u>	11111		
	<u> </u>	<u> </u>	<u> </u>			
ADDRESS (number an	d street)	S. Victory Blvd.				
X (Check if addischanged)		J J J J J J J BAŅK		ÇA	91502 , , , ,	
			CITY ▲	STATE ▲	ZIP CODE ▲	
COMMITTEE'S E-M	AIL ADDRESS			01/112_	211 0002 =	
kinde@durke	eandassociates.c	om 				
COMMITTEE'S WEI	B PAGE ADDRESS (U	RL)			·	
2. DATE M 0	M / D D / Y	Y 0 Y 7 Y				
3. FEC IDENTIFICATION NUMBER C C00403154						
4. IS THIS STATE	MENT NEV	/ (N) OR	X AMENDED (A	A)		
I certify that I have example	mined this Statement and	to the best of my know	wledge and belief it is true, cor	rect and complete		
Type or Print Name o	of Treasurer	Kinde Durkee				
Signature of Treasure	er Electronically File	d by Kinde Dur	kee	Date 0,5	16 / 2007	
NOTE: Submission of			v subject the person signing th	·	-	
Office Use Only			For further inform Federal Election Co Toll Free 800-424-5 Local 202-694-110	ommission 9530	FEC FORM 1 (Revised 02/2003)	

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5.	TYPE OF COMMITTEE (Check One)					
	(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 cal information below.)	ndidate				
	Name of LOUIS VANDENBERG Candidate					
	Candidate Party Affiliation Office Sought: X House Senate President	State CA District 44				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate					
	(d) This committee is a (National, State (Or subordinate) committee of the Repu	nocratic, ublican,etc.) Party.				
	(e) This committee is a separate segregated fund					
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated function committee.	d or party				
6.	Name of Any Connected Organization or Affiliated Committee					
ı		1				
 		.				
_	<u> </u>					
	Mailing Address					
	CITY STATE Z	IP CODE A				
	Relationship					
	Type of Connected Organization:					
	Corporation Corporation w/o Capital Stock Labor Organization	า				
	Membership Organization Trade Association Cooperative					

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٧	Vrite or Type Committee Name						
	VANDENBERG FOR CO	NGRESS					
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 Kinde Durkee						
	Mailing Address	1212 S. Victory Blvd.					
		Burbank	CA	91502			
	Title or Position ♥	CITY A	STATE	ZIP CODE A			
	Treasurer		Telephone number				
8.		and address (phone number optio designated agent (e.g., assistant tre Durkee 1212 S. Victory Blvd.					
		Burbank	CA	91502 _			
	Title or Position ♥	CITY ▲	STATE▲	ZIP CODE A			
	Treasurer		Telephone number 818				
	Full Name of Designated Agent						
	Mailing Address						
	Title or Position ♥	CITY A	STATE A	ZIP CODE A			
			Telephone number	_ = =			

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9.	 Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts safety deposit boxes or maintains funds. 						
	Name of Bank, Depository, etc						
	Merca	ntile National Bank					
	Mailing Address	1880 Century Park East					
		Los Angeles CA 9006	7 -				
		CITY A STATE A ZIP	CODE △				