

RECEIVED  
FEC MAIL CENTER  
2017 AUG 23 AM 11:01

Committee Name:

Make California Great PAC

If registered, FEC ID:

Today's Date:

8/21/2017

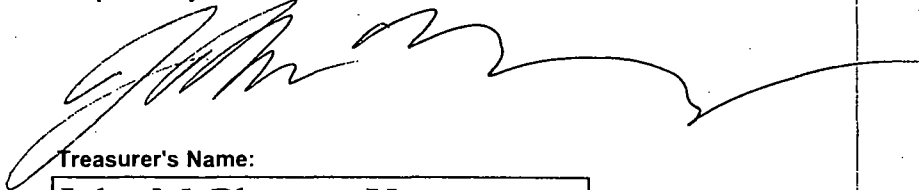
Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,



Treasurer's Name:

John McPherson Young

, Treasurer

20170823 11:01 AM

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE: (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Make California Great PAC

ADDRESS: (number and street) 2973 Harbor Blvd. Num. 621

(Check if address is changed)

Costa Mesa CA 92626 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS:

(Check if address is changed)

talk@makecaliforniagreatpac.org

Optional Second E-Mail Address:

COMMITTEE'S WEB PAGE ADDRESS: (URL)

(Check if address is changed)

2. DATE: 08 21 2017

3. FEC IDENTIFICATION NUMBER: C

4. IS THIS STATEMENT X 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: John McPherson Young

Signature of Treasurer: [Handwritten Signature] Date: 08 21 2017

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.

Table with 5 columns for Office Use Only

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

FEC FORM 1 (Revised 06/2012)

2017-08-23 11:01 AM

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: \_\_\_\_\_

Candidate: Party Affiliation	Office Sought:	House	Senate	President	State District
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(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):**

(a) 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.

(b)  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:**

(a) 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.

(b) 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

2014-08-10 10:00 AM

Write or Type Committee Name

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

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:

John McPherson Young

Mailing Address:

2973 Harbor Blvd, Num. 621

Costa Mesa

CA

92626

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

415 - 412 - 5826

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

John McPherson Young

Mailing Address:

2973 Harbor Blvd, Num. 621

Costa Mesa

CA

92626

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

415 - 412 - 5826

2017-08-21 00:17:22 43

Full Name of Designated Agent

John McPherson Young

Mailing Address

2973 Harbor Blvd. Num. 621

Costa Mesa

CITY

CA

STATE

92626

ZIP CODE

Title or Position

Treasurer

Telephone number

415 - 412 - 5826

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.

US Bank

Mailing Address

2300 Harbor Blvd.

Costs Mesa

CITY

CA

STATE

92626

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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DATE: 22 AUG 2017

JIM YOUNG  
(530) 269-1047  
THE UPS STORE #4149  
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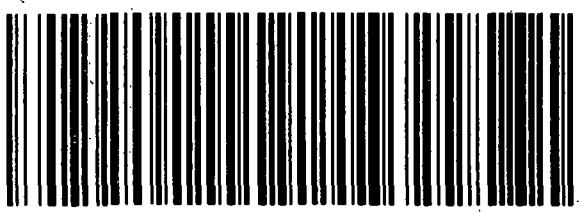
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WASHINGTON DC 20463-0001

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2017-08-22 09:01:17

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

2017-08-23 10:00:00 AM EDT

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>UPS</i>	Shipping Date <i>8/22/2017</i>
	Next Business Day Delivery <input checked="" type="checkbox"/>
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER *mp*  
 (3/2015)

*8/23/2017*  
 DATE PREPARED