Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Brian Forde for Congress 2913 El Camino Real ADDRESS (number and street) #616 (Check if address is changed) Tustin 92782 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS fec@forde.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.forde.com/ (Check if address is changed) DATE 30 2019 C00650911 FEC IDENTIFICATION NUMBER > 3. X 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. Forde, Brian, , , Type or Print Name of Treasurer Forde, Brian, , , [Electronically Filed] 01 30 2019 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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|---------------|---------------------|--|--|
| | | OMMITTEE • 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. (Con information below.) | nplete the candidate |
| Name Cand | | Forde, Brian, , , | |
| Cand Party | idate Affiliatio | on DEM Office Sought: X House Senate President | State CA District 45 |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Name Cand | | | |
| Part | y Con | nmittee: | |
| (d) | | (National, State or subordinate) committee of the | (Democratic, Republican, etc.) Party. |
| Polit | ical A | ction Committee (PAC): | |
| (e) | | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co | nnected 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 s committee. (i.e., nonconnected committee) | egregated 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 | Fund | raising Representative: | |
| (g) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 to committees/organizations, none of which is an authorized committee of a federal candidate. | wo or more political |
| | Com | mittees Participating in Joint Fundraiser | |
| | 1. | FEC ID number | |
| | 2. | FEC ID number | |
| | 3. | FEC ID number | |
| | 4. | | |

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| Write or Type Committee Nan | ne | |
| Brian Forde for | r Congress | |
| | Organization, Affiliated Committee, Joint Fundraising Representative, or Lea | adership PAC Sponsor |
| NONE | | |
| | | |
| Mailing Address | | |
| | | |
| | CITY STATE | ZIP CODE |
| Relationship: Connecte | ed Organization Affiliated Committee Joint Fundraising Representative | Leadership PAC Sponsor |
| Custodian of Records: Ide books and records. | entify by name, address (phone number optional) and position of the person in | n possession of committee |
| Full Name | rian, , , , , , , , , , , , , , , , , , , | |
| Mailing Address | #616 | |
| | Tustin CA 927 | 782 |
| Title or Position | CITY STATE | ZIP CODE |
| Treasurer | Telephone number | - 682 - 9544 |
| . Treasurer: List the name a any designated agent (e.g., | and address (phone number optional) of the treasurer of the committee; and the assistant treasurer). | ne name and address of |
| Full Name Forde, Br | rian, , , | |
| Mailing Address | 2913 El Camino Real | |
| | #616 | |
| | Tustin CA 927 CITY STATE | ZIP CODE |
| Title or Position Treasurer | Telephone number 949 | - 682 9544 - 1 9544 |

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| | III 1 (NOVISCU 02/2003) | i aye 🕶 |
| Full Name of Designated Agent | | |
| Mailing Address | | |
| | | |
| | | |
| | CITY STATE | ZIP CODE |
| Title or Position | Telephone number | |
| Banks or Other safety deposit bo Name of Bank, I | | iolas accounts, rents |
| Mailing Address | Bank of America 6519 Quail Hill Pkwy | |
| Mailing Address | ,6519 Quail Hill Pkwy | |
| Mailing Address | ,6519 Quail Hill Pkwy |)3 |
| Mailing Address | 6519 Quail Hill Pkwy | 23 |
| Mailing Address Name of Bank, I | 6519 Quail Hill Pkwy Irvine CA 9260 CITY STATE | |
| | 6519 Quail Hill Pkwy Irvine CA 9260 CITY STATE | ZIP CODE |
| | 6519 Quail Hill Pkwy Irvine CA 9260 CITY STATE Depository, etc. | ZIP CODE |
| Name of Bank, I | 6519 Quail Hill Pkwy Irvine CA 9260 CITY STATE Depository, etc. | ZIP CODE |
| Name of Bank, I | 6519 Quail Hill Pkwy Irvine CA 9260 CITY STATE Depository, etc. | ZIP CODE |