FEC

STATEMENT OF

PAGE 1/5

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Calaveras County Democratic Central Committee-Federal 5445 Madison Avenue ADDRESS (number and street) (Check if address is changed) Sacramento 95841 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS campaigns@rcbs.us (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) calaverasdemocrats.org (Check if address is changed) DATE 2021 C00754234 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. Lewis, Denise, , , Type or Print Name of Treasurer Lewis, Denise,,, [Electronically Filed] 01 29 2021 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 Only

Local 202-694-1100

1	FEC Fo	rm 1 (Revised 02/2009)	Page 2				
		OMMITTEE c 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							
	didate / Affiliati	on Office Sought: House Senate President	State CA District				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate							
Par	ty Con	nmittee:	Domocratic				
(d)	×	CLID ' ' DEM '	Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its control	nected 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 secommittee. (i.e., nonconnected committee)	gregated 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.)					
Join	t Fund	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw	o or more political				
(h)		committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political				
	Com	Committees Participating in Joint Fundraiser					
	1.						
	2.						
	3.	FEC ID number C					
	4.						

FEC Form 1 (Revis	ed 02/2009)	Page 3					
Write or Type Committee N	lame						
Calaveras Co	ounty Democratic Central Committee-	Federal					
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative	ve, or Leadership PAC Sponsor					
None							
Mailing Address							
		1					
	CITY STATE	ZIP CODE					
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Represer	ntative Leadership PAC Sponsor					
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the	person in possession of committee					
Lewis,	, Denise, , ,						
Full Name	,5445 Madison Avenue						
Mailing Address							
	Sacramento	95841					
Title or Position	CITY STATE	ZIP CODE					
Custodian of Records	Telephone number	916 348 9100					
	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 Lewis, of Treasurer	Denise, , ,						
Mailing Address	5445 Madison Avenue						
	Sacramento	95841					
Title or Position	CITY STATE	ZIP CODE					
Treasurer	Telephone number	916 348 - 9100					

Full Name of			Page 4			
Designated Agent	Bassett, Janice, , ,					
Mailing Address	2997 Cedar Court					
	Valley Springs	, CA	95252			
	CITY	STATE	ZIP CODE			
Title or Position Assistant Treasure	er Telephone	number 8	31 - 239 - 6490			
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. First Foundation Bank						
Mailing Address	2233 Douglas Blvd, Suite 300					
	Roseville	CA	95661			
	CITY	STATE	ZIP CODE			
Name of Bank, De	pository, etc.					
L						
Mailing Address						
Mailing Address						

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F1A Transaction ID:

Amend to update committee and treasurer address and assistant treasurer information

Form/Schedule: Transaction ID: