STATEMENT OF

FORM 1	ORGANIZ (See instruct			Office use only
NAME OF COMMITTEE (in 1)	(Check if name is changed)	Example: If typying, typ over the lines	e 12FE4M5	Office use only
Huffman for C	ongress 2012 Exploratory Com	mittee 		
ADDRESS (number and s	P.O. Box 151563			
(Check if address				
is changed)	San Rafael		L CA	94915 1563
		CITY▲	STATE	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one	e-mail address)		
(Check if address is changed)	stacy@hanklevycp	a.com		
io onaligoo)				
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)				
2. DATE 0.1	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00491746		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)	
I certify that I have exami	ned this Statement and to the best of my ki	nowledge and belief it is true, cor	rect and complete	
Type or Print Name of	Treasurer Stacy Owens			
, , , , , , , , , , , , , , , , , , ,				
Signature of Treasurer	Electronically Filed by Stacy Ov	vens	_ Date 12	06 2010
NOTE: Submission of fal	se, erroneous, or incomplete information m	ay subject the person signing th	•	
Office Use Only		For further inform Federal Election Co Toll Free 800-424-5	ommission 9530	FEC FORM 1 (Revised 02/2009)

	F	EC F	Form 1 (Revised 02/2009)	Page 2			
5.	TYPE	OF CC	DMMITTEE (Check One)				
	Candi	didate Committee:					
	(a)	Х	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 information below.)	the candidate			
	Name Candi		Jared Huffman				
	Candi Party	date Affiliatio	on DEM Office X House Senate President	State CA			
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
	Name Candi						
	Party	Comm					
	(d)		(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.			
	Politic	cal Act	tion Committee (PAC):				
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connec	ted 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 segregat committee. (i.e., nonconnected committee)	ed 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 F	undrai	ising Representative:				
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political			
	(h)		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.	or more political			
		Com	mittees Participating in Joint Fundraiser				
			1. FEC ID number				
			2. FEC ID number				
			3. FEC ID number				
			4. FEC ID number				

FEC Form 1 (Revised 02	(2009)			Page 3		
Write or Type Committee Name						
Huffman for Congress 2	2012 Exploratory Committee					
6. Name of Any Connected Org	ganization, Affiliated Committee,	Joint Fundraising Represer	ntative, or Lea	ndership PAC Sponsor		
None						
Mailing Address						
	CITY▲		STATE A	ZIP CODE		
Relationship:	_	_		_		
Connected Organization	Affiliated Committee	Joint Fundraising Rep	resentative	Leadership PAC Sponsor		
7. Custodian of Records: Ide possession of Committee	ntify by name, address, (phon books and records.	e number optional), an	d position of	the person in		
Full Name Stacy E	Stacy E. Owens Full Name					
Mailing Address	5940 College Av	renue				
	Oakland		CA	94618		
Title or Position ▼	CITY A		STATE	ZIP CODE A		
Custodian	of Records	Telephone num	nber 510			
name and address of any	of Treasurer Stacy E. Owens					
	Oakland		CA	94618		
Title or Position ♥	CITY A		STATE	ZIP CODE A		
Treasurer		Telephone nur	510	_ 652 _ 1000		

FEC Form 1 (Revi	sed 02/2009)		Page 4				
Full Name of Designated Agent	Henry C. Levy						
Mailing Address	5940 College Avenue	5940 College Avenue					
	Oakland	CA	94618				
Title or Position ▼	CITY A	STATE ▲	ZIP CODE A				
Assista	ant Treasurer	Telephone number 510					
safety deposit boxes or n Name of Bank, Deposito	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. Mechanic's Bank						
Mailing Address	2301 Shattuck Avenue						
	Berkeley	CA	94704 _ [
	CITY 🛕	STATE △	ZIP CODE 🛕				
Name of Bank, Deposito	ry, etc.						
Mailing Address							
	CITY 🗖	STATE. △	ZIP CODE 🛕				