## **STATEMENT OF**

FORM 1	ORGANIZA (See instructio			Office use only
1. NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Tan Nguyen fo	or Congress			
	4700 Miles - West			
ADDRESS (number and s	street) 4720 Milano Way			
(Check if address X is changed)				
X is changed)	Oceanside		L CA	92057
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-			
(Check if address is changed)	tan.d.nguyen@sbcgl	obal.net		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address				
is changed)				
2. DATE 0.3	1 1 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00399113		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A	<b>(</b> )	
I certify that I have exami	ned this Statement and to the best of my kno	wledge and belief it is true, corn	ect and complete	
•	TAN B NOUVEN		·	
Type or Print Name of	Treasurer TAN D NGUYEN			
Signature of Treasurer	Electronically Filed by TAN D NG	UYEN	Date 03	16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fal	se, erroneous, or incomplete information ma	, ,	·	
Office Use Only		For further informa Federal Election Cor Toll Free 800-424-9	mmission 530	FEC FORM 1 (Revised 02/2009)

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5.	TYPE OF C	OMMITTEE (Check One) Committee:					
	(a) X	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 t information below.)	he candidate				
	Name of Candidate	TAN NGUYEN					
	Candidate Party Affiliat	ion REP Office X House Senate President	State CA District 47				
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate						
	Party Comr						
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.				
	Political Action Committee (PAC):						
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:				
		Corporation Corporation w/o Capital Stock La	bor Organization				
		Membership Organization Trade Association Co	ooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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 Fundra	aising Representative:					
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political				
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political				
	Com	nmittees Participating in Joint Fundraiser					
		1. FEC ID number					
		2. FEC ID number					
		3. FEC ID number					
		EEC ID number C					

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s					
anization, Affiliated Committee, Joint Fundr	raising Representative, or Lead	ership PAC Sponsor			
CITY▲	STATE A	ZIP CODE			
	_	_			
Affiliated Committee Joint	Fundraising Representative	Leadership PAC Sponsor			
Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.					
Full Name					
12955 MAIN ST					
GARDEN GROVE	CA	92840			
CITY A	STATE Telephone number 714	ZIP CODE 14 - 658 - 5065			
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  TAN D NGUYEN					
12955 MAIN ST					
GARDEN GROVE	<u>CA</u>	92840			
CITY A	STATE <b>▲</b>	ZIP CODE A			
	Telephone number	_ 658 _ 5065			
rk	anization, Affiliated Committee, Joint Fundr  CITY  Affiliated Committee  Joint  Intify by name, address, (phone number books and records.  NGUYEN  12955 MAIN ST  GARDEN GROVE  CITY A  and address (phone number optional) designated agent (e.g., assistant treasure)  NGUYEN  12955 MAIN ST  GARDEN GROVE  CITY A  CITY A	anization, Affiliated Committee, Joint Fundraising Representative, or Lead  CITY STATE STATE STATE A  Affiliated Committee Joint Fundraising Representative Intify by name, address, (phone number optional), and position of the books and records.  NGUYEN  12955 MAIN ST  GARDEN GROVE CA  CITY A STATE A  Telephone number 714  and address (phone number optional) of the treasurer of the commit designated agent (e.g., assistant treasurer).  NGUYEN  12955 MAIN ST  GARDEN GROVE CA  CITY A STATE A  Tales CA  CITY A STATE A  CITY A STATE A			

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Full Name of Designated Agent						
Mailing Addres	s					
Title or Position ▼	CITY A	STATE A	ZIP CODE A			
		Felephone number –				
9. Banks or Other safety deposit bo.	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.					
Mailing Address						
	CITY 🗖	STATE. <b>△</b>	ZIP CODE 🛕			
Name of Bank, D	epository, etc.					
Mailing Address						
	CITY 🔼	STATE <b>△</b>	ZIP CODE 🛕			