FEC FORM 1

STATEMENT OF ORGANIZATION

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

ALAMEDA CITY UNITED DEMOCRATIC CAMPAIGN

ADDRESS (number and street)   702 WINDMILL COURT

X (Check if address is changed)

CONCORD   CA   94518-2331

CITY   STATE   ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

X (Check if address is changed)   gsanborn@att.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE   05 / 24 / 2009

3. FEC IDENTIFICATION NUMBER   C00382564

4. IS THIS STATEMENT   NEW (N)   OR   X 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   Gregory E. Sanborn

Signature of Treasurer   _____   Date   05 / 24 / 2009

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 Use Only

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

FEC FORM 1
(Revised 02/2009)

29030009348

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   Office   State
Party Affiliation   Sought: House   Senate   President

                                                                                                          District

(c)   This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Party Committee:

                                                    (National, State   (Democratic,
(d)   This committee is a   or subordinate) committee of the   Republican, etc.) Party.

Political Action Committee (PAC):

(e)   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.

(f)   X   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:

(g)   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.

(h)   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

Write or Type Committee Name

Alameda City United Democratic Campaign

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

N O N E

Mailing Address

CITY	STATE	ZIP CODE

Relationship: Connected Organization   Affiliated Committee   Joint Fundraising Representative   Leadership PAC Sponsor

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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   GREGORY E SANBORN

Mailing Address   702 WINDMILL COURT

CONCORD   CA   94518-2331

Title or Position   CITY   STATE   ZIP CODE

TREASURER   Telephone number   510-305-7377

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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   GREGORY E. SANBORN

Mailing Address   702 WINDMILL COURT

CONCORD   CA   94518-2331

Title or Position   CITY   STATE   ZIP CODE

TREASURER   Telephone number   510-305-7377

Full Name of Designated Agent: MICHAEL MCMAHON

Mailing Address: 333 HAIGHT STREET

ALAMEDA   CA   94501 -

CITY   STATE   ZIP CODE

Title or Position: ASST. TREASURER

Telephone number: (510)-(727)-(3142)

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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.

Mailing Address

CITY   STATE   ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY   STATE   ZIP CODE

29030094351

Federal Election Commission
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PREPARER

DATE PREPARED 6/2/05

(3/2005)

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