Image# 202201079474889360				PAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ			
	· · · · ·		Offic	e Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Dave Goodman	For Congress			
	3401 West 5th Street			
ADDRESS (number and street)	210			
is changed)	Oxnard		CA93030	)
			STATE	ZIP CODE▲
COMMITTEE'S E-MAIL ADDF	RESS			
(Check if address is changed)	fec@davegoodmanfor	-		
	Optional Second E-Mail Ad  dgoodman61@gmai			
COMMITTEE'S WEB PAGE A (Check if address is changed)	davegoodmanforcongress.co	m 		
2. DATE 01	07 Y Y Y Y 2022			
B. FEC IDENTIFICATION	NUMBER ► C C	00799882		
. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
certify that I have examined	this Statement and to the best	of my knowledge and belief it	is true, correct and c	complete.
Type or Print Name of Treasu	rer Goodman, David, , ,			
Signature of Treasurer Go	odman, David, , ,	[Electronically Filed]	Date 01 /	07 / Y Y Y Y Y 2022
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing t ION SHOULD BE REPORTED W		enalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	on 🔽	EC FORM 1 (Revised 06/2012)

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	TYPE	OF C	OMMITTEE	
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 Candio		Goodman, David, W, ,	
	Candio		on IND Office State CA Sought: K House Senate President	
	Faily	Affiliatio	on IND Sought: X House Senate President District 26	
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candio			
	Party	/ Com	imittee:	
	(d)		This committee is a(National, State 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 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 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	Fund	raising 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.	
		Com	mittees Participating in Joint Fundraiser	
		1.	FEC ID number	
		2.	FEC ID number	
		3.	FEC ID number	
		4.	FEC ID number	

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Write or Type Committee Name

## Dave Goodman For Congress

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

Mailing Address					
	CITY	STATE	ZIP CODE		
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor					

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Goodman,	David, , ,
Full Name	
Mailing Address	3401 W 5Th Street
	Oxnard CA 93030
Title or Position	CITY STATE ZIP CODE
Custodian of Records	Telephone number

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	Goodman, David, , ,
Mailing Address	3401 W 5Th Street
	210
	Oxnard
	CITY STATE ZIP CODE
Title or Position	
	Image: Telephone number 805 518 3888

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Full Name of Designated Agent	Goodman, David, , ,	
Mailing Address	3401 W 5th Street	
	Ste 210	
	Oxnard CA 93030	
	CITY STATE ZIP CODE	
Title or Position	Telephone number 805 - 518 - 3888	

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.

l	Bank of America, N.A.		
Mailing Address	1130 S Victoria Avenue		
	Ventura		3003
	CITY	STATE	ZIP CODE
Name of Bank, De	epository, etc.		
l			
Mailing Address			
	CITY	STATE	ZIP CODE