Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Golden State Political Action Committee 12501 Imperial Hwy. ADDRESS (number and street) (Check if address Ste. 200 is changed) Norwalk 90650 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS dlgould@gouldorellana.com (Check if address is changed) Optional Second E-Mail Address iorellana@gouldorellana.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00145342 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. Gould, David, , , Type or Print Name of Treasurer Gould, David, , , [Electronically Filed] Date 03 2023 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

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. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information be	elow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. information below.)	(Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate Pre	State CA esident District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	
Name of Candidate	
Party Committee:	
(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 separa committee. (i.e., nonconnected committee)	ate segregated 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution account	ts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, at least one of which is an authorized committee of a federal call.	•
(j) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.	· ·
Committees Participating in Joint Fundraiser	
1 C	
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٧	Vrite or Type Committee Name	9	
	Golden State I	Political Action Committee	
6.	<u>=</u>	Organization, Affiliated Committee, Joint Fundraising Represer	ntative, or Leadership PAC Sponsor
	NONE		
	Mailing Address		
		CITY A STA	TATE ▲ ZIP CODE ▲
	Deletienskie Osmosto		
	Relationship: Connected	d Organization Affiliated Organization Joint Fundraising Re	epresentative Leadership PAC Spon
7.	Custodian of Records: Ider books and records.	atify by name, address (phone number optional) and position of the	e person in possession of committee
	Gould, Da	vid, , ,	
	Full Name		
	Mailing Address	12501 Imperial Hwy. Ste. 200	
		I	
		Norwalk C	CA 90650
		CITY A STA	TATE ▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	r 213 - 489 - 4792
8.	Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the cor assistant treasurer).	mmittee; and the name and address of
	Full Name Gould, Da	vid, , ,	
	of Treasurer		
	Mailing Address	12501 Imperial Hwy. Ste. 200	
		Norwalk	CA 90650
		CITY ▲ STA	TATE ▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	r 213 - 489 - 4792

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Full Name of Designated Agent	Modesto (Asst. Treasurer), Nadia, , ,		
Mailing Address	12501 Imperial Hwy. Ste. 200		
	Norwalk 	CA CA	90650
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasure	or I	Telephone number 213	489 4792
Banks or Other I safety deposit box	Depositories: List all banks or other depositories in which es or maintains funds.	n the committee deposits funds	s, holds accounts, rents
Name of Bank, De	epository, etc.		
I	City National Bank		
Mailing Address	555 S. Flower St.		
	Los Angeles	CA S	90071
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, De	epository, etc.		
l			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(a)	or(h). Joint Fundraisin	g Participant:		
(0)	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative,	or Leadership PAC Sponsor
	Mailing Address			
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
				П
	Connected	I Organization Affiliated Committee Joint	t Fundraising Representati	Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number – optional)	t Fundraising Representati	ve Leadership PAC Sponsor
3.	Designated Agent: Identify		t Fundraising Representati	Ve Leadership PAC Sponsor
3.	Designated Agent: Identify Orellana(by name, address (phone number – optional) Asst. Treasurer), Ingrid, , ,	t Fundraising Representati	Leadership PAC Sponsor
3.	Designated Agent: Identify Orellana(Full Name	r by name, address (phone number – optional) Asst. Treasurer), Ingrid, , ,	t Fundraising Representati	Leadership PAC Sponsor
3.	Designated Agent: Identify Orellana(Full Name	r by name, address (phone number – optional) Asst. Treasurer), Ingrid, , ,	t Fundraising Representati	
3.	Designated Agent: Identify Orellana(Full Name Mailing Address	by name, address (phone number – optional) Asst. Treasurer), Ingrid, , , 12501 Imperial Hwy. Ste. 200 Norwalk		
3.	Designated Agent: Identify Orellana(Full Name	by name, address (phone number – optional) Asst. Treasurer), Ingrid, , , 12501 Imperial Hwy. Ste. 200 Norwalk CITY	CA STATE A	90650
3.	Designated Agent: Identify Orellana(Full Name Mailing Address TITLE OR POSITION Assistant Treasurer Banks or Other Depositor safety deposit boxes or mail	r by name, address (phone number – optional) Asst. Treasurer), Ingrid, , , 12501 Imperial Hwy. Ste. 200 Norwalk CITY Te	CA STATE ▲	90650 ZIP CODE A
	Designated Agent: Identify Orellana(Full Name Mailing Address TITLE OR POSITION Assistant Treasurer Banks or Other Depositor	r by name, address (phone number – optional) Asst. Treasurer), Ingrid, , , 12501 Imperial Hwy. Ste. 200 Norwalk CITY Te	CA STATE ▲	90650 ZIP CODE A
	Designated Agent: Identify Orellana(Full Name	r by name, address (phone number – optional) Asst. Treasurer), Ingrid, , , 12501 Imperial Hwy. Ste. 200 Norwalk CITY Te	CA STATE ▲	90650 ZIP CODE A
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	Designated Agent: Identify Orellana(Full Name	r by name, address (phone number – optional) Asst. Treasurer), Ingrid, , , 12501 Imperial Hwy. Ste. 200 Norwalk CITY Te	CA STATE ▲	90650 ZIP CODE A