**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Visual Disobedience Campaign Committee 650-B Fremont Ave. 317 ADDRESS (number and street) (Check if address is changed) Los Altos 94024 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS philshemanski@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00723148 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. Shemanski, Philip, L,, Type or Print Name of Treasurer Shemanski, Philip, L,, [Electronically Filed] 02 2021 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

information below.)  Name of Candidate  Candidate  Party Affiliation  Candidate  President  Office Sought: House Senate President  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 Republican, etc.) F  Political Action Committee (PAC):  (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	FEC	Form 1 (Revised 02/2009)	Page <b>2</b>	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)  Name of Candidate  Candidate  Candidate  Candidate  Candidate  Candidate  Party Affiliation  Committee supports/opposes only one candidate, and is NOT an authorized committee.  Name of Candidate  Party Committee: (d) This committee is a Candidate or subordinate) committee of the Republican, etc.) Fe  Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on individual or property of the committee of the committee of the committee organization on line 6.) Its connected organization on line 6.) Its connected organization on line 6.) Its committee organization on line 6.) Its connected organization on line 6.) Its committee organization on line 6.) Its connected organization on line 6.) Its committee organization on on line 6.) Its committee organization on line 6.) Its committee organiza				
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2. FEC ID number	Co	ommittees Participating in Joint Fundraiser		
2. FEC ID number				
3. FEC ID number		FEC ID number		
4.				

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Write or Type Committee Name		. ago u
Visual Disobedi	ence Campaign Committee	
	Organization, Affiliated Committee, Joint Fundraising Representative, o	r Leadership PAC Sponsor
NONE		
Mailing Address		
<b>3</b>		
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	ve Leadership PAC Sponsor
. Custodian of Records: Iden books and records.	ntify by name, address (phone number optional) and position of the personal	son in possession of committee
I	i, Philip, L, ,	
Full Name Mailing Address	1455 Arbor Ave	
Mailing Address		
	Los Altos CA	94024
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	0 9714
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; a assistant treasurer).	nd the name and address of
Full Name Shemanski of Treasurer	i, Philip, L, ,	
Mailing Address	1455 Arbor Ave	
	Los Altos CA	94024
Title or Position	CITY STATE	ZIP CODE
Treasurer		0

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Full Name of Designated Agent	Shemanski, Philip, , ,				
Mailing Address	1455 Arbor Ave				
	L 12 Aller				
	Los Altos CITY STATE ZI	P CODE			
Title or Position Treasurer		3 9714			
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	Wells Fargo Bank 23000 Homestead Rd				
-					
	Cupertino CA 95014				
_	CITY STATE ZI	IP CODE			
Name of Bank, D	epository, etc.				
	<u> </u>				
Mailing Address					
	CITY STATE ZI	IP CODE			