28039924399

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2008 NOV 26 AM 8: 38

			Office	Use Only		
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5			
HAST Deficing	sa palitica	LI ACTION	COMMITTE	الساعد		
ADDRESS (number and street)	141 x 68.0.9	29811111				
(Check if address						
is changed)	Siminallay		CA ABIOAY-LILL			
COMMITTEE'S E-MAIL ADDRE	CIT	Υ	STATE	ZIP CODE		
	idafensciona			1		
Lisa a la	NOCTED SCORE	Judam III				
						
COMMITTEE'S WEB PAGE ADD	ORESS (URL)					
Lastide fier as	1019 100m					
COMMITTEE'S FAX NUMBER						
805-5aa-57	24			,		
	•					
2. DATE 10 3 à 2008						
3. FEC IDENTIFICATION NUMBER C.						
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)						
I certify that I have examined th	nis Statement and to the best of	my knowledge and belief it	is true, correct and co	omplete.		
Time or Print Name of Treasurer 1 STEVE AGUILAR						
Type or Print Name of Treasurer						
Signature of Treasurer Date 10 32 2008						
NOTE: Submission of false, errone	eous, or incomplete information may		-	nalties of 2 U.S.C. §437g.		
Office Use Only FE3AN042.PDF		For further information of Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	n FI	EC FORM 1 Revised 12/2007)		

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F	EC Fo	orm 1 (Revised 12/2007)	Page 2				
		COMMITTEE ce Committee:					
(a)		This committee is a principal campaign committee. (Complete the candidate info	rmation below.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name Candi							
Candi Party	idate Affiliat	Office tion Sought: House Senate	State President District				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized	committee.				
Name Candi	_						
Part	y Cor	mmittee:	(Danas and)				
(d)		This committee is a (National, State or subordinate) committee of the					
Polit	ical A	Action Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization or	n line 6.) Its connected organization is a				
		Corporation Corporation w/o Capital Stock	Labor Organization				
		. Membership Organization Trade Association	Cooperative				
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT committee. (i.e., nonconnected committee)	a separate segregated fund or party				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint	Func	draising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, at least one of which is an authorized committee of a fed					
(h)	•	This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal care.	proceeds for two or more political ndidate.				
	Com	nmittees Participating in Joint Fundraiser					
	1.	FEC ID numb	per C				
	2.	FEC ID number	per C				
	3.	FEC ID numb	per C				
	4.	FEC ID numb	er C				
	5.		er C				

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Write or Type Committee Nam	e	
6. Name of Any Connected	Organization, Affiliated Committee, Leadership PAC Sp	consor or Joint Fundraising Representative
	<u> </u>	
Mailing Address		
Relationship:	CITY	STATE ZIP CODE
. Connected Organization	Affiliated Committee Leadership PAC Spo	onsor Joint Fundraising Representative
books and records. Full Name Mailing Address	a. Gay schimmel P. D. Box: 7,412918 Simi Valley	
Title or Position	Telephone	number 805]- 501]- 89:(60
8. Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of assistant treasurer).	the committee; and the name and address of
Full Name of Treasurer	ve Agulao	<u></u>
Mailing Address	19.0.30x 941398	
		<u> </u>
	Bimilalley	1 ICH 93094-1
Title or Position	CITY	STATE ZIP CODE
treasure	Telephone i	number 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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CITY

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ZIP CODE

STATE

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Full Name of Designated Agent

Mailing Address

ST. TIME	DESTINATION NUMBER	DESTINATION ID	NO.	MODE		PGS.	RES	SULT
01/01 00:40	5790905		0001	TRANSMIT	COL	0	NG	00'00
					-		0	#018
01/01 00:50	5790905		0002	TRANSMIT	l	0	NG	00'00
							0	STOP
01/01 00:59	5790905		0003	TRANSMIT		0	NG	00'00
							0	#018
01/01 01:12	5790905		0005	TRANSMIT	ECM	1	OK	00'12
01/01 01:21	5790905		1 1	TRANSMIT	ECM	1	OK	00'10
01/01 01:27			5001	AUTO RX	ECM	1	OK	00'18
10/24 08:27	12022190174		0007	TRANSMIT	ECM	1	NG	00'14
·	·				ĺ		1	STOP
10/24 08:29	12022190174		l l	TRANSMIT	ECM	1	OK	00'26
10/24 08:31	12022190174		0009	TRANSMIT	ECM	4	OK	00'32

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No Postmark				
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N	ext Business Day Delivery			
Date of Receipt Received from House Records & Registration Office				
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
IMB	11/24/08			
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