Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Club at Westpark Democrats 2040 DEVONPORT LOOP ADDRESS (number and street) (Check if address is changed) **ROSEVILLE** 95747 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS the.clubatwestparkdems@gmail.com (Check if address is changed) Optional Second E-Mail Address mileibowitz@ucdavis.edu COMMITTEE'S WEB PAGE ADDRESS (URL) facebook.com/clubwestparkdems (Check if address is changed) DATE 03 2011 C00757229 FEC IDENTIFICATION NUMBER > 3. 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. Leibowitz, Michael, J,, MD, PhD Type or Print Name of Treasurer Leibowitz, Michael, J,, MD, PhD [Electronically Filed] 09 2020 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

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TYPE OF (	COMMITTEE e 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 Party Affilia	Office Sought: House Senate President	State		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Co		(Domogratic		
(d) <b>x</b>	This committee is a SUB (National, State or subordinate) committee of the DEM	(Democratic, Republican, etc.) Party.		
Political A	Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected 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)	egregated 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.)			
Joint Fun	draising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political		
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political		
Cor	nmittees Participating in Joint Fundraiser			
1.	FEC ID number			
2.	FEC ID number			
3.	FEC ID number			
4.				

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Write or Type Committee	Name	•
Club at West	park Democrats	
	ted Organization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STAT	TE ZIP CODE
Relationship: Conr	nected Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
Custodian of Records books and records.	: Identify by name, address (phone number optional) and position of t	he person in possession of committee
Leibo	owitz, Michael, J, , MD, PhD	
Mailing Address	2040 DEVONPORT LOOP	
-		
	ROSEVILLE	95747
Title or Position	CITY STATE	ZIP CODE
Treasurer		916 474 5313
	ee and address (phone number optional) of the treasurer of the comme.g., assistant treasurer).	ittee; and the name and address of
Full Name Leibo	witz, Michael, J, , MD, PhD	
Mailing Address	2040 DEVONPORT LOOP	
	ROSEVILLE	95747
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	916 474 5313

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Full Name of Designated Agent	arr, Henry, P, , Esq					
Mailing Address	2120 Benton Loop					
	222-1111	2.				
	ROSEVILLE	STATE	25747 ZIP CODE			
Title or Position Chair	Telep	shone number 916	_   -   899   -   5450			
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.						
JF	PMorgan Chase Bank, NA P.O. Box 182051					
Mailing Address	1. 3. BOX 102001					
	Columbia	, 011	43218			
	Columbus	OH L	T-02-10			
	CITY	STATE	ZIP CODE			
Name of Bank, Depository, etc.						
Lı						
Mailing Address						