Only

PAGE 1 / 4

STATEMENT OF **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) LINCOLN CLUB OF RIVERSIDE COUNTY 4201 Brockton Ave Ste 100 ADDRESS (number and street) (Check if address is changed) Riverside 92501 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS dhulbert@trscpas.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 06 2023 C00241323 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. Jacobs, Doug, , , Type or Print Name of Treasurer Jacobs, Doug,,, [Electronically Filed] 03 09 2023 Signature of Treasurer Date 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

FEC Form 1 (Revised 03/2022)	Page 2	
TYPE OF COMMITTEE:		
Candidate Committee:		
(a) This committee is a principal campaign committee. (Complete t	he candidate information below.)	
(b) This committee is an authorized committee, and is NOT a princinformation below.)	cipal campaign committee. (Complete the candidate	
Name of Candidate		
Candidate Office Party Affiliation Sought: House	Senate President District	
(c) This committee supports/opposes only one candidate, and is N	OT an authorized committee.	
Name of Candidate		
Party Committee:		
(d) This committee is a (National, State or subordinate) committee	(Democratic, e of the Republican, etc.) Party	
Political Action Committee (PAC):		
(e) This committee is a separate segregated fund. (Identify connect	ted organization on line 6.) Its connected organization is a:	
Corporation Corporation w/o	Capital Stock Labor Organization	
Membership Organization Trade Association		
In addition, this committee is a Lobbyist/Registrant PA	AC.	
(f) This committee supports/opposes more than one Federal candi committee. (i.e., nonconnected committee)	date, and is NOT a separate segregated fund or party	
In addition, this committee is a Lobbyist/Registrant PA	AC.	
In addition, this committee is a Leadership PAC. (Iden	ntify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political con	nmittee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.		
(h) This committee is a political committee with both contribution a	nd non-contribution accounts (Hybrid PAC).	
In addition, this committee is a Lobbyist/Registrant PA	NC.	
Joint Fundraising Representative:		
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.		
(j) 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.		
Committees Participating in Joint Fundraiser		
1.	C	
- 1	C	

	_			
ı	FEC Form 1	1 (Revised 02/2009)	Page 3	
٧	Vrite or Type Comm			
	LINCOL	N CLUB OF RIVERSIDE COUNTY		
6.		onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor	
	Mailing Address			
		CITY ▲ STATE ▲	ZIP CODE ▲	
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso	
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.			
		Teaman, Richard, , ,		
	Full Name			
	Mailing Address	4201 Brockton Ave		
		Ste 100		
		Riverside CA 929	501	
		CITY ▲ STATE ▲	ZIP CODE ▲	
	Title or Position ▼	▼		
	CPA	Telephone number 951	9500	
8.		he name and address (phone number optional) of the treasurer of the committee; and tragent (e.g., assistant treasurer).	ue name and address of	
	Full Name	Jacobs, Doug, , ,		
	of Treasurer			
	Mailing Address	6820 Indiana Ave		
		Ste 210		
		Riverside CA 92	506	
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲	
			- 780 - 1097	

FEC Form 1 (Revised (02/2009)		Page 4			
Full Name of Designated Agent						
Mailing Address						
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲			
		lephone number]			
Banks or Other Depositorion safety deposit boxes or main	es: List all banks or other depositories in which tains funds.	the committee deposits funds	, holds accounts, rents			
Name of Bank, Depository, e	etc.					
Financial Partners Credit Union						
Mailing Address	7800 East Imperial Highway					
	Downey	CA 9	0242			
	CITY ▲	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY ▲	STATE ▲	ZIP CODE ▲			