

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

California's 34th district

ADDRESS (number and street)

1823 W Pico Blvd Apt 302



(Check if address is changed)

#120

Los Angeles

CITY ▲

CA

STATE ▲

90006

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address is changed)

CA34.internship@mail.house.gov

Optional Second E-Mail Address

A\_vitela@hotmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address is changed)

CA34.internship@mail.house.gov

2. DATE

MM / DD / YYYY  
06 / 24 / 2023

3. FEC IDENTIFICATION NUMBER ►

C C00843680

4. 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.

Type or Print Name of Treasurer Unknown, Unknown, , ,

Signature of Treasurer

Unknown, Unknown, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 24 / 2023

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  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE:

**Candidate 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 Vitela, Albert, , Mr., Jr

Candidate Party Affiliation DEM

Office Sought: ☒ House

☐ Senate

☐ President

State CA

District 34

- (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 separate segregated fund or party committee. (i.e., nonconnected committee)

☐ 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 accounts (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 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

2. \_\_\_\_\_

C

Write or Type Committee Name

California's 34th district

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☐ Connected Organization ☐ Affiliated Organization ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Unknown, Unknown, , ,

Full Name

Mailing Address

Unknown

Unknown

Los Angeles

CA

90017

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Unknown

Telephone number

213

586

6538

## 8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name

Unknown, Unknown, , ,

of Treasurer

Mailing Address

Unknown

Unknown

Los Angeles

CA

90017

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

213

586

6538

Full Name of  
Designated  
Agent

Unknown, Unknown, , ,

Mailing Address

Unknown

Los Angeles

CA

90017

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

9. **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.

Unknown

Mailing Address

Unknown

Los Angeles

CA

90017

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Unknown

Mailing Address

Unknown

Los Angeles

CA

90017

CITY ▲

STATE ▲

ZIP CODE ▲

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: F1N  
Transaction ID :

Free citizen with MFA degree knowledgeable in government That no harm Come to the state. That citizens get food  
benefits. That housing be provided. That the military be well funded. And that the Republic be a free state.

Form/Schedule:  
Transaction ID:

5(g) or (h). **Joint Fundraising Participant:**

1.

2.

3.

4.

FEC ID number

FEC ID number

FEC ID number

FEC ID number

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Mailing Address

-

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☐

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)Full Name 

Mailing Address

-

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

 -  - 9. **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, **Chase**Depository, etc. 

Mailing Address

1200 S Figueroa st

Suite 100

Los Angeles  CA  90015 -

CITY ▲ STATE ▲ ZIP CODE ▲