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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) California Cattlemen's Association Federal PAC 1221 H Street ADDRESS (number and street) (Check if address is changed) Sacramento 95814 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS scarter@eichmancpa.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 30 2020 C00518787 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. Eichman, J. Richard, , , Type or Print Name of Treasurer Eichman, J. Richard, , , [Electronically Filed] 06 30 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 Only Local 202-694-1100

EEO F	1 (Revised 02/2000)	Page 2
	COMMITTEE	Page 2
Candidat	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	<i>'</i> .)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Coninformation below.)	mplete the candidate
Name of Candidate		
Candidate Party Affilia	Office Sought: House Senate President	State CA District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e) <b>x</b>	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	segregated 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 committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.		
4.		

$\Gamma$			
FEC Form 1 (Revis	sed 02/2009)		Page <b>3</b>
Write or Type Committee N	Vame		
California Ca	ttlemen's Association	Federal PAC	
6. Name of Any Connect	ted Organization, Affiliated Committee, J	oint Fundraising Representat	ive, or Leadership PAC Sponsor
California Cattleme	n's Association		
	1221 H Street		
Mailing Address			
	Community		95814
	Sacramento	CA	93814
	CITY	STATE	ZIP CODE
Relationship: x Conno	ected Organization  Affiliated Committee	Joint Fundraising Represe	entative Leadership PAC Sponsor
books and records.	Identify by name, address (phone number	· optional) and position of th	e person in possession of committee
Full Name	nan, J. Richard, , ,		
Mailing Address	1127 11th Street, Suite 300		
J	1		
	Sacramento	CA	95814
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		Telephone number	916 442 - 2280
8. <b>Treasurer:</b> List the name any designated agent (e.	e and address (phone number optional) e.g., assistant treasurer).	of the treasurer of the commit	tee; and the name and address of
Full Name Eichm of Treasurer	nan, J. Richard, , ,		
Mailing Address	1127 11th Street, Suite 300		
	Sacramento	, , , , , , , , CA	95814
	CITY	STATE	ZIP CODE
Title or Position Treasurer	1		916   442   2280
		Telephone number	

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Full Name of Designated Agent No	one, , , ,	
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	1 1 1	1 1 1
	Telephone number	-
safety deposit boxes  Name of Bank, Depo		noids accounts, rents
safety deposit boxes  Name of Bank, Depo	or maintains funds.  ository, etc.  & M BANK  CAPITOL OFFICE, 1303 J STREET	
safety deposit boxes  Name of Bank, Depo	or maintains funds. psitory, etc.  MBANK	
safety deposit boxes  Name of Bank, Depo	or maintains funds.  ository, etc.  & M BANK  CAPITOL OFFICE, 1303 J STREET	
safety deposit boxes  Name of Bank, Depo	CAPITOL OFFICE, 1303 J STREET  SACRAMENTO  CITY  STATE	314
safety deposit boxes  Name of Bank, Depo	CAPITOL OFFICE, 1303 J STREET  SACRAMENTO  CITY  STATE	314
safety deposit boxes  Name of Bank, Depo	CAPITOL OFFICE, 1303 J STREET  SACRAMENTO  CITY  STATE	314
safety deposit boxes  Name of Bank, Depo	CAPITOL OFFICE, 1303 J STREET  SACRAMENTO  CITY  STATE	314
safety deposit boxes  Name of Bank, Depo	CAPITOL OFFICE, 1303 J STREET  SACRAMENTO  CITY  STATE	314

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

Amending Banking Information

Form/Schedule: Transaction ID: