Image# 1	11932312596
----------	-------------

FEC FORM 1	STATEMENT OF ORGANIZATION (See instructions)	Office use only		
1. NAME OF COMMITTEE (in f	ull) (Check if name Example: If typying, type over the lines	12FE4M5		
Farmers' Rice	Cooperative Fund			
	reet) P.O. Box 15223			
(Check if address is changed)	 Saçramento			
		STATE▲ ZIP CODE ▲		
(Check if address is changed)	ADDRESS (Please provide only one e-mail address)			
(Check if address is changed)				
2. DATE Mom / Dob / Y Y Y Y Y 3. FEC IDENTIFICATION NUMBER C C00146605 4. IS THIS STATEMENT X 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 Bill Tanimoto Signature of Treasurer Electronically Filed by Bill Tanimoto Date Date Date Date Date Date Date Date				
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing this Stater ANY CHANGE IN INFORMATION SHOULD BE REPORTED W			
Office	For further information co	ontact:		

Office Use Only			Federal El Toll Free 8	er information contact: lection Commission 800-424-9530 -694-1100	FEC FORM 1 (Revised 02/2009)
-----------------------	--	--	---------------------------	--	---------------------------------

(h)

FEG	Form 1 (Revised 02/2009)	Page 2
TYPE OF C	COMMITTEE (Check One)	
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 information below.)	the candidate
Name of Candidate		
Candidate Party Affilia	tion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Com	(National, State	(Democratic,
(d)	This committee is a (or subordinate) committee of the	Republican,etc.) Party
	ction Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:
	Corporation Corporation w/o Capital Stock	abor Organization
	Membership Organization Trade Association X O	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 segregate committee. (i.e., nonconnected committee)	ed 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 Fundr	aising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two	

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.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.	L	FEC ID number	C

FEC Form 1 (Revised 0	02/2009)		Page 3
Write or Type Committee Name			
Farmers' Rice Coopera	ative Fund		
Name of Any Connected O	rganization, Affiliated Committee, Joint Fu	undraising Representative, o	or Leadership PAC Sponsor
Farmers' Rice Cooperat	tive Fund		
Mailing Address	P.O. Box 15223		
	Sacramento	ÇA	95851 _
	СІТҮ	STATE	ZIP CODE
Relationship: X Connected Organization	Affiliated Committee	oint Fundraising Representati	ve Leadership PAC Sponsor
possession of Committe		per optional), and positi	on of the person in
Full Name	m Huffman		
Mailing Address	P.O. Box 15223		
	Sacramento	CA	95851 _
	CITY A	STATE	
Title or Position ▼		01/112	

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).

Tre	asurer		Telephone number	5684332
Title or Position ¥			STATE	
		Sacramento	CA	95833 _
Mailing Address		P.O. Box 15223		
Full Name of Treasurer	Bill Tanimoto			

FEC Form 1 (Revis	ed 02/2009)		
Full Name of Designated Agent	William Huffman		
Mailing Address	P.O. Box 15223		
	Sacramento	CA	95851
Title or Position ♥	CITY A	STATE 🛦	ZIP CODE A
Assista	nt Treasurer Telep	hone number	7684416
Banks or Other Deposit safety deposit boxes or m Name of Bank, Depository	aintains funds. y, etc. Ink of the West	ommittee deposits funds, h	olds accounts, rents
safety deposit boxes or m Name of Bank, Depository	aintains funds. y, etc. Ink of the West 500 Capitol Mall 500 Capitol Mall Sacramento		
safety deposit boxes or m Name of Bank, Depository	aintains funds. y, etc. Ink of the West	ommittee deposits funds, h	olds accounts, rents
safety deposit boxes or m Name of Bank, Depository	aintains funds. y, etc. 500 Capitol Mall Saçramento CITY Δ		
safety deposit boxes or m Name of Bank, Depository Ba Mailing Address	aintains funds. y, etc. 500 Capitol Mall Saçramento CITY Δ		
safety deposit boxes or m Name of Bank, Depository Ba Mailing Address	aintains funds. y, etc. 500 Capitol Mall 500 Capitol Mall Sacramento CITY A y, etc.		
Safety deposit boxes or m Name of Bank, Depository Mailing Address	aintains funds. y, etc. 500 Capitol Mall 500 Capitol Mall Saçramento CITY ▲ y, etc.		95814 _ _ , _ , _ , _ , _ , _ , _ , _ , _
Safety deposit boxes or m Name of Bank, Depository Mailing Address	aintains funds. y, etc. 500 Capitol Mall 500 Capitol Mall Saçramento CITY ▲ y, etc.	CA CA STATE ▲	95814

Title or Position ¥

Joint Fundraiser Participant

Treasurer

FEC Form 1 (Revised (02/2009)		Page 5
Banks or Other Depositorie safety deposit boxes or mainta		-	
Name of Bank, Depository, etc		ĺ	ADDITIONAL]
Mailing Address			
		STATE⊿	ZIP CODE 🔺
Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising	Representative, or Leader	[ADDITIONAL] ship PAC Sponsor
Mailing Address			
Relationship:	CITY	STATE 🛦	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraising	g Representative	lership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name	Fanimoto		
Mailing Address	P.O. Box 15223		
	Sacramento	СА	95833 _

CITY 🗛

STATE 🖌

Telephone number

FEC ID number

916

С

ZIP CODE 🛦

568

[ADDITIONAL]

4332