Only

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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) NEWPORT BEACH WOMEN'S DEMOCRATIC CLUB FEDERAL PAC 1400 N. Harbor Blvd ADDRESS (number and street) Suite 550 (Check if address is changed) Fullerton 92835 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mikellef@gmail.com (Check if address X is changed) Optional Second E-Mail Address t-mac-consulting@pacbell.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00570168 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. Fish, Mikelle, , , Type or Print Name of Treasurer Fish, Mikelle, , , [Electronically Filed] 12 13 2021 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 C	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 Affiliation	Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Com	nmittee: (National, State (Democratic,
(d)	This committee is a committee of the committee of the committee of the committee is a committee of the commi
Political A	action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or par 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.)
Joint Fund	draising Representative:
(g)	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.
(b)	
(h)	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.
ш	
ш	committees/organizations, none of which is an authorized committee of a federal candidate.
	committees/organizations, none of which is an authorized committee of a federal candidate. mittees Participating in Joint Fundraiser
Com	committees/organizations, none of which is an authorized committee of a federal candidate. Imittees Participating in Joint Fundraiser

Title or Position Treasurer

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Write or Type C						
NEWPO	ORT BE	ACH WO	MEN'S DE	MOCRATIC	CLUB	FEDERAL PAC
6. Name of Ar	y Connected (Organization, Aff	iliated Committee, Jo	oint Fundraising Rep	resentative, oi	Leadership PAC Sponsor
NONE						
Mailing Addre	ess					
			CITY		STATE	ZIP CODE
Relationship:	Connecte	d Organization	Affiliated Committee	Joint Fundraising	Representativ	e Leadership PAC Sponsor
Custodian o		ntify by name, add	dress (phone number	optional) and posit	ion of the pers	son in possession of committee
Full Name	McIntyre,	Tammi, , ,				
Mailing Addre	ess	1440 N. Harbor	Blvd.			
		Suite 707				
		Fullerton			CA	92835
Title or Posit	ion		CITY		STATE	ZIP CODE
Designated	Agent			Telephone nun	949 nber	9 - 697 - 7532
		d address (phone assistant treasure		of the treasurer of the	e committee; ai	nd the name and address of
Full Name of Treasurer	Fish, Mike	lle, , ,				
Mailing Addre	ess	1968 Church St				
		Costa Mesa			CA	92627
			CITY		STATE	ZIP CODE

514

Telephone number

5173

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Full Name of Designated Agent	McIntyre, Tammi, , ,	
Mailing Address	1440 N. Harbor Blvd.	
	Suite 707	
	Fullerton CA 92835 CITY STATE Z	IP CODE
Title or Position Asst Treasurer		97 7532
safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, holds exes or maintains funds.	accounts, rents
Name of Bank, [
	Pacific Premier Bank	
Name of Bank, I	Pacific Premier Bank	
	Pacific Premier Bank	
	Pacific Premier Bank 200 W Commonwealth Ave Fullerton CA 92832	IP CODE
	Pacific Premier Bank 200 W Commonwealth Ave Fullerton CA 92832 CITY STATE Z	IP CODE
Mailing Address	Pacific Premier Bank 200 W Commonwealth Ave Fullerton CA 92832 CITY STATE Z	IP CODE
Mailing Address	Pacific Premier Bank 200 W Commonwealth Ave Fullerton CA 92832 CITY STATE Z	IP CODE
Mailing Address Name of Bank, [Pacific Premier Bank 200 W Commonwealth Ave Fullerton CA 92832 CITY STATE Z	IP CODE
Mailing Address Name of Bank, [Pacific Premier Bank 200 W Commonwealth Ave Fullerton CA 92832 CITY STATE Z	IP CODE