

FEC
FORM 1STATEMENT OF
ORGANIZATION

(See instructions)

Office use only

1. NAME OF
COMMITTEE (in full)(Check if name
is changed)Example: If typing, type
over the lines12FE4M5**Haze For Congress**

ADDRESS (number and street)

P O Box 707 (Check if address
is changed)**Auberry****CA****93602**CITY STATE ZIP CODE 

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

 (Check if address
is changed)**stevehaze007@gmail.com**

COMMITTEE'S WEB PAGE ADDRESS (URL)

 (Check if address
is changed)**hazeforcongress.us**2. DATE

M	M
1	2

 /

D	D
0	3

 /

Y	Y	Y	Y
2	0	0	9

3. FEC IDENTIFICATION NUMBER

C C004226424. IS THIS STATEMENT NEW (N) 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

Lisbeth B Bundli CPA MBA

Signature of Treasurer

Electronically Filed by **Lisbeth B Bundli CPA MBA**

Date

M	M
1	2

 /

D	D
0	3

 /

Y	Y	Y	Y
2	0	0	9

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2009)

5. TYPE OF 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 the candidate information below.)

Name of Candidate

Ernest Steven Haze

Candidate Party Affiliation

DEM

Office Sought:

House

Senate

President

State
District**CA
20**

(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

(f) In addition, this committee is a Lobbyist/Registrant PAC.
 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.)

Joint Fundraising 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.

(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.

Committees Participating in Joint Fundraiser

1.
2.
3.
4.

FEC ID number

C

FEC ID number

C

FEC ID number

C

FEC ID number

C

Write or Type Committee Name

Haze For Congress**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 Committee 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.

Full Name

Lisbeth B Bundli CPA MBA

Mailing Address

36224 Cressman Road**Shaver Lake****CA****93664**

Title or Position ▼

Treasurer**CITY▲****STATE▲****ZIP CODE ▲**Telephone number **559** - **841** - **8900****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
of Treasurer**Lisbeth B Bundli CPA MBA**

Mailing Address

36224 Cressman Road**Shaver Lake****CA****93664**

Title or Position ▼

Treasurer**CITY▲****STATE▲****ZIP CODE ▲**Telephone number **559** - **841** - **8900**

Full Name of
Designated
Agent**Oscar J Garcia CPA**

Mailing Address

3472 Dockery Street**Selma****CA****93662**

Title or Position ▼

CITY ▲**STATE ▲****ZIP CODE ▲****Agent**

Telephone number

559**696****1245**

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.

Wells Fargo Bank MAC A0856-011

Mailing Address

710 East Shaw Ave**CA****93710****CITY ▲****STATE ▲****ZIP CODE ▲**

Name of Bank, Depository, etc.

Central Valley Community Bank

Mailing Address

29430 Auberry Road**CA****93651****CITY ▲****STATE ▲****ZIP CODE ▲**