Only

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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) is changed) over the lines. NORCAL WATER JOBS LIBERTY PAC 9458 TREELAKE RD. ADDRESS (number and street) (Check if address is changed) **GRANITE BAY** CA 95746 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address DAVID@THEAGENCY.US is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00576249 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. Type or Print Name of Treasurer BAUER, DAVID, , Date 05 2024 Signature of Treasurer BAUER, DAVID, , , 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 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 COMMITTEE:							
Candidate Committee:	P I. d A						
(a) This committee is a principal campaign committee. (Complete the candidate inform	nation below.)						
(b) This committee is an authorized committee, and is NOT a principal campaign cominformation below.)	nmittee. (Complete the candidate						
Name of Candidate							
Candidate Office Sought: House Senate	State President District						
(c) This committee supports/opposes only one candidate, and is NOT an authorized of							
Name of Candidate							
Party Committee:							
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party						
Corporation Corporation w/o Capital Stock  Membership Organization Trade Association  In addition, this committee is a Lobbyist/Registrant PAC.  This committee supports/opposes more than one Federal candidate, and is NOT a 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)	e 6.)						
This committee is an independent expenditure-only political committee (Super PAC).  In addition, this committee is a Lobbyist/Registrant PAC.							
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:							
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.							
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						

Treasurer

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٧	Vrite or Type Committee Name					
	NORCAL WATE	R JOBS LIBERTY PAC				
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
	Doug LaMalfa					
	Mailing Address	16 LaMalfa Ln.				
		Biggs	C.	A   95917	-	
		CITY ▲	STA		ZIP CODE ▲	
	Relationship: X Connected	Organization Affiliated Organization	Joint Fundraising Rep	resentative	Leadership PAC Sponso	
	Trelationship.	Organization Allinated Organization	John Fundraising Nep	resentative	Leadership 1 AO Oponso	
7.	7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.					
	DAVID, BA	UER, , ,				
	Full Name					
	Mailing Address	9458 TREELAKE RD				
		1				
		GRANITE BAY	C	95746		
		CITY ▲	STA	 ΓΕ <b>Δ</b>	ZIP CODE ▲	
	Title or Position ▼	0111 =	OIA.		211 0002 =	
	Custodian of Records		Telephone number	916 –	847 - 4783	
8.		d address (phone number optional) of the	ne treasurer of the com	mittee; and the n	ame and address of	
	any designated agent (e.g., a	ssistant treasurer).				
	Full Name BAUER, DA	\VID, , ,				
		<sub>1</sub> 9458 TREELAKE RD.				
	Mailing Address					
		GRANITE BAY		A   95746		
		0.000112 0.00		93740		
	Title or Position ▼	CITY ▲	STA	ΓE ▲	ZIP CODE ▲	

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916

Telephone number

4298

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Full Name of Designated None,,,, Agent Link						
Mailing Address						
Tille ou Desition —	CITY ▲	STATE ▲	ZIP CODE ▲			
Title or Position ▼						
		Telephone number				
Banks or Other Depositori safety deposit boxes or main	es: List all banks or other depositories intains funds.	n which the committee deposits for	unds, holds accounts, rents			
Name of Bank, Depository,	etc.					
WELLS	FARGO					
Mailing Address	1532 W. EL CAMINO					
	SACRAMENTO	CA	95833			
	CITY ▲	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY ▲	STATE ▲	ZIP CODE ▲			