FEC FORM 1

STATEMENT OF ORGANIZATION

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2006 MAR 13 A 9:17

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

CITIZENS TO ELECT BYRON DE LEAR FOR CONGRESS

ADDRESS (number and street) ▼

4322 MATILIJA AVE #6

☐ (Check if address is changed)

SHERMAN OAKS CA 91423-3677

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

info@DeLearforCongress.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.DeLearforCongress.org

COMMITTEE'S FAX NUMBER

818-986-4946

2. DATE 02 / 23 / 2006

3. FEC IDENTIFICATION NUMBER ▶ C

4. 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 Rebecca Tobias

Signature of Treasurer Rebecca Tobias Date 03 / 03 / 2006

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 Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

FE3AN042

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5. TYPE OF COMMITTEE (Check One)

(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: BYRON DE LEAR

Candidate Party Affiliation: GRE

Office Sought: ☑ House ☐ Senate ☐ President

State: CA

District: 28

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

(e) ☐ This committee is a separate segregated fund.

(f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

24593425989

6. **Name of Any Connected Organization or Affiliated Committee**

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization

☐ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

CITIZENS TO ELECT BYRON De LEAR FOR CONGRESS

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: REBECCA TOBIAS

Mailing Address: 4322 MATILIJA AVE #6

SHERMAN OAKS | CA | 91423-3677

Title or Position▼: CAMPAIGN COORDINATOR

CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number: 310-916-8888

26039612569

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: REBECCA TOBIAS

Mailing Address: 4322 MATILIJA AVE #6

SHERMAN OAKS | CA | 91423-3677

Title or Position▼: CAMPAIGN COORDINATOR

CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number: 310-916-8888

Full Name of Designated Agent:

Mailing Address:

Title or Position▼

CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number

FE3AN042

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.

WASHINGTON MUTUAL

Mailing Address SHERMAN OAKS PLAZA

13949 VENTURA BLVD.

SHERMAN OAKS | CA | 91423-3677

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission

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(3/2005)

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