1408 - 155 - 4717

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2014 DEC 11 PN 2: 40

			<u> </u>	Office upo pay CENTE			
NAME OF COMMITTEE (in full)	x (Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	alamontum at most			
Simi Valley Police Office		ral Political Action Comm	nittee				
ADDRESS (number and street)	20 Galli Drive STE						
(Check if address is changed)	Novato		CA	949495731			
		CITY	STATE	ZIP CODE			
COMMITTEE'S E-MAIL ADDRES							
	nwarren@warrenanda:	ssoc.com 					
(Check if address is changed)	1			1			
		<u> </u>	1.1.1				
COMMITTEE'S WEB PAGE ADD	COMMITTEE'S WEB PAGE ADDRESS (URL)						
(Check if address		<u> </u>					
is changed)							
2. DATE 12 08	2014						
3. FEC IDENTIFICATION NU	JMBER <u>С</u>	C00569657					
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)					
I certify that I have examined th	nis Statement and to the b	est of my knowledge and belief	it is true, correct	and complete.			
Type or Print Name of Treasurer Nancy L Warren							
Signature of Treasurer anges committee name, trea	Mus All surer and assistant	treasurer and email addr	Date 12	07 2014			
NOTE: Submission of false, errone		on may subject the person signing					
Office Use		For further information Federal Election Commit Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)			

	FE	≘C For	rm 1 (Revised 02/2009)	Page 2				
.	TYPE	OF C	OMMITTEE					
	Cand	lidate	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. (Complinformation below.)	ete the candidate				
	Name Candio							
	Candid Party /	date Affiliatio	on Sought: House Senate President	State				
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name Candio							
	Party	Con	nmittee:					
	(d)			Democratic, epublican, etc.) Party.				
	Politi	ical A	ction Committee (PAC):					
	(e)	х	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	ected organization is a:				
	` ,	Same	ппппппппппппппппппппппппппппппппппппппп	,				
			Corporation Corporation w/o Capital Stock	Labor Organization				
			Membership Organization Trade Association	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 seg committee. (i.e., nonconnected committee)	regated 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	Fund	Iraising Representative:					
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political				
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.					
		Com	mittees Participating in Joint Fundraiser					
		1.						
		2.						
		3.	FEC ID number					
		4.	FEC ID number C					

	FEC Form	1 (Revised 0	2/2009)		Page	3
W	rite or Type Comr	mittee Name				
Sim	ni Valley Poli	ce Officer	s Association Federal Political Action Committee			
6.	Name of Any C	onnected O	rganization, Affiliated Committee, Joint Fundraising Representative, or	Leadersh	nip PAC S	ponsor
Si	mi Valley Pdl:	ice Office	rs Association			
	Mailing Address		4252 Valley Fair Drive			
					111	
				93063	. I-I	
			CITY STATE		ZIP CODE	E
	Relationship: X	Connected	Organization Affiliated Committee Joint Fundraising Representative	llea	: dership P	AC Snonsor
		·	Organization Dynamical Committee Com		G0.01.1.p 1 7	чо оролоог
7.	Custodian of Rebooks and record		tify by name, address (phone number optional) and position of the perso	on in poss	session of	f committee
	Full Name	Nancy L.	Warren			
	Mailing Address		20 Galli Drive, STE A			
				1 1 1	1 1 1	1 1 1
			Novato	949495	731	
	Title on Decition					
	Title or Position		CITY STATE	•	ZIP CODE	=
	Custodian of		415 		- [5500
_						
8.			l address (phone number optional) of the treasurer of the committee; an ssistant treasurer).	d the nan	me and ac	dress of
	Full Name of Treasurer	Nancy L	Warren	111	1 1 1	
	Mailing Address		20 Galli Drive, STE A		1 1 1	
				111	111	1 1 1
			Novato	94949	-	_
	Title or Position		CITY STATE		ZIP CODE	

Telephone number

Treasurer

CITY

STATE

ZIP CODE

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Reference#1: Simi FED FEC1 amendment

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PRÉPARER	DATE PREPARED

PREPARER (8/2013)