

FEC
FORM 1

STATEMENT OF ORGANIZATION

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OPERATIONS CENTER

2006 APR 18 A 7 59

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

ORREN FOR CONGRESS

ADDRESS (number and street)

14765 VIA BETTONA

(Check if address
is changed)

SAN DIEGO

CA

92127

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

scott@arrenforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.arrenforcongress.com

COMMITTEE'S FAX NUMBER

858-759-7933

2. DATE

04 / 12 / 2006

3. FEC IDENTIFICATION NUMBER ►

C00421834

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

SCOTT C. ORREN

Signature of Treasurer



Date

04 / 12 / 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
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Only

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

FEC FORM 1
(Revised 02/2003)

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

SCOTT C. ORREN

Candidate Party Affiliation

REP

Office Sought:

☒

House

☐

Senate

☐

President

State

CA

District

50

- (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.

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

ORREN 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 SCOTT C ORRENMailing Address 14765 VIA BETTONASAN DIEGO CA 92127

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

CANDIDATETelephone number 858-472-7571

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 SCOTT C ORRENMailing Address 14765 VIA BETTONASAN DIEGO CA 92127

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

CANDIDATETelephone number 858-472-7571Full Name of Designated Agent SCOTT C ORRENMailing Address 14765 VIA BETTONASAN DIEGO CA 92127

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

CANDIDATETelephone number 858-472-7571

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.

NAVY FEDERAL CREDIT UNION

Mailing Address

P.O. Box 3000

MERRIFIELD

VA

22119-3000

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission
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PREPARER
(3/2005)

gjc

4/18/06

DATE PREPARED

26039044769