

5. TYPE OF COMMITTEE

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 MARY PALLANT

Candidate Party Affiliation DEM REP LIB IND OTH

Office Sought: House Senate President

State AL AK AZ AR CA CO CT DE DC FL GA HI IA IL IN KS KY LA MA MD ME MI MN MO MS MT NE NH NJ NM NV NY NC ND OH OK OR PA RI SC SD TN TX UT VT WA WI WY

District 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

- (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
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) 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. _____ FEC ID number C _____

2. _____ FEC ID number C _____

3. _____ FEC ID number C _____

4. _____ FEC ID number C _____

NOTICE: ON-LINE COORDINATION

Full Name of Designated Agent

INGRID ORELLANA

Mailing Address

249 E OCEAN BLVD STE 685

LONG BEACH

CITY

CA

STATE

90802

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

213

489

4792

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.

CALIFORNIA BANK & TRUST

Mailing Address

550 S. HOPE ST STE 100

LOS ANGELES

CITY

CA

STATE

90071

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

NETFILE.COM

FedEx[®]

xpress

FZ
RT 695
3 16:00
3480
02.02

ORIGIN ID: LGBA (213) 489-4792
CINDY QUINONEZ
GOULD & ORELLANA, LLC
249 E. OCEAN BLVD.
SUITE 685
LONG BEACH, CA 90802
UNITED STATES US

SHIP DATE: 01FEB18
ACTWGT:
CAD: 108032954/NET3980

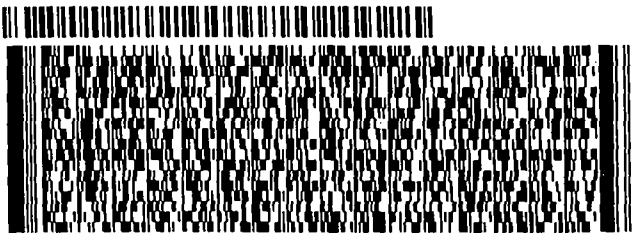
BILL SENDER

TO **FEC**
FEC
999 E STREET NW

WASHINGTON DC 20463

(202) 694-1000 REF: MARY PALLANT
INV: DEPT:

552.11/22D0CA5



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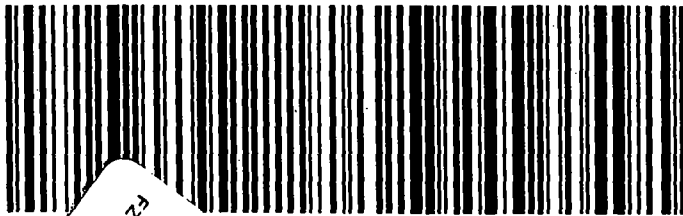
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FRI - 02 FEB 3:00P
STANDARD OVERNIGHT

TRK# 7713 8391 3480
0201

XC RDVA

20463
DC-US IAD



FZ
RT 696
2 10:30
24
02.02

Extremely Urgent

NOT A BUSINESS DAY

