

2009 JUL 27 AM 10: 01

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

Office Use Only

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

ADDRESS (number and street) PO BOX 841  
(Check if address is changed) DIXON CA 95620-0841  
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)  
X (Check if address is changed) GARY@CLIFTFORCONGRESS.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)  
(Check if address is changed) ~~HTTP://CLIFTFORCONGRESS.COM~~  
HTTP://CLIFTFORCONGRESS.COM

2. DATE 07 20 2009

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT X 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 Myong C. Oleson

Signature of Treasurer Myong Oleson Date 07 20 2009

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.

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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 GARY CLIFT

Candidate Party Affiliation REP Office Sought:  House  Senate  President State CA District 10

- (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	<u>C</u>
2.	_____	FEC ID number	<u>C</u>
3.	_____	FEC ID number	<u>C</u>
4.	_____	FEC ID number	<u>C</u>

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Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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

MYONG C OLESON

Mailing Address

P.O. BOX 841

DIXON

CA

95620-0841

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

916-806-2808

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

MYONG C OLESON

Mailing Address

P.O. BOX 841

DIXON

CA

95620-0841

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

916-806-2808

29030130797

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

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.

GOLDEN ONE CREDIT UNION

Mailing Address

196 NUT TREE PKY

[Grid for Mailing Address Line 2]

VACAVILLE CA 95687

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

29030130798

**Federal Election Commission**  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked  
7/22/09

USPS Registered/Certified Postmarked (R/C)

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No Postmark

Overnight Delivery Service (Specify): Shipping Date  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

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Other (Specify): Date of Receipt or Postmarked

*JWS* 7/27/09  
 PREPARER DATE PREPARED  
 (3/2005)

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