Image# 201801319091162797				01/31/2016 17 . 24
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 5 —
				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Brad Westmorel	and for Congress	S 		
DDRESS (number and street)	Post Office Box 580488			
 (Check if address is changed) 				
	Elk Grove └		CA STATE ▲	25758
OMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)	campaigns@rcbs.us			
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE AL	DDRESS (URL)			
 (Check if address is changed) 				
	b / Y Y Y Y 2018			
. FEC IDENTIFICATION N	IUMBER ► C C	00653097		
. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
contify that I have even in ad			it is true sourcet a	nd complete
centry that I have examined	this Statement and to the best	tor my knowledge and belief	it is true, correct a	nd complete.
ype or Print Name of Treasur	er Copeland, Rita, , ,			
Signature of Treasurer	eland, Rita, , ,	[Electronically Filed]	Date 01	/ D D / Y Y Y Y 16 2018
IOTE: Submission of false, error	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing		he penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

01/31/2018 17 : 24

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	FEC Fo	Page 2
ΤYI	PE OF C	COMMITTEE
Ca	indidate	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. (Complete the candidate information below.)
	me of ndidate	Westmoreland, Brad, , ,
	ndidate ty Affiliati	ion DEM Office Sought: X House Senate President District 07
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	me of ndidate	
Pa	rty Con	nmittee:
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
Ро	litical A	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.)
Joi	nt Func	draising 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.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number
	3.	FEC ID number
	4.	

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Write or Type Committee Name

Brad Westmoreland for Congress

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

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	Mailing Address																										
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	Relationship:	Con	necteo	d Orgai	nization	At	ffiliate	ed Co	mm	ittee		Jo	int F	undr	aisir	ig Ri	epre	sen	tativ	е	L	eade	ershi	ip PA	IC S	spon	sor
7.	Custodian of Rebooks and record		: Ider	ntify by	name,	addres	ss (pl	hone	nur	mbei	· (optio	nal)	and	pos	ition	of	the	pers	son	in p	osse	ssio	n of	con	nmit	tee
	Full Name	None	€, , , , │																								
	Mailing Address											1															
	Title or Position						(CITY								S	TAT	E				ZI	P C(ODE			
			_ _					_					Telej	ohon	e nı	imbe	er	L			-[-L			
8.	Treasurer: List the any designated a						ımbeı	· 0	ptio	nal)	of th	ne tr	easi	urer	of th	ie co	omm	nittee	e; ar	nd t	he r	name	and	d ad	dres	s of	F
	Full Name of Treasurer	Соре	eland,	Rita, ,	,																		<u> </u>				
	Mailing Address			5429	Madiso	n Aver	nue																<u> </u>				
				Sacr	amento		(S ⁻				95	841	ZI	 > C(- L			
I	Title or Position											٦	Felep	hon	e nu	mbe	er		916	; 	- [34	B 	- [9′	100	
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FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Lewis, Denise, , ,
Mailing Address	5429 Madison Avenue
	Sacramento CA 95841
	CITY STATE ZIP CODE
Title or Position	Irer 916 916 916 Telephone number 916 9100

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.

	First Foundation Bank	
Mailing Address	2250 Douglas Boulevard, Suite 190	
	Roseville	CA 95661 -
	CITY	STATE ZIP CODE
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

Amend to Update Banking and Officer Information

Form/Schedule: Transaction ID: