

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

Contreras for Congress Committee

ADDRESS (number and street)

15885-150 Main Street

Suite #204



(Check if address
is changed)

Hesperia

CA

92345

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

contrerasforcongress@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.contrerasforcongress.com

COMMITTEE'S FAX NUMBER

760 - 488 - 1116

2. DATE

12

05

2005

3. FEC IDENTIFICATION NUMBER ►

C

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.

Jennifer Starbuck

Type or Print Name of Treasurer

Signature of Treasurer

Jennifer Starbuck

Date

12

05

2005

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
Use
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

Louie Alfonso Contreras

Candidate Party Affiliation

DEM

Office Sought



House



Senate



President

State

CA

District

41

- (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

None

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

Contreras 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 Jennifer Starbuck

Mailing Address 15954 Chiwi Road
Suite A
Apple Valley CA 92307

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Accountant Telephone number 760 - 242 - 9222

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 Jennifer Starbuck

Mailing Address 15954 Chiwi Road
Suite A
Apple Valley CA 92307

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 760 - 242 - 9222

Full Name of Designated Agent

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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.

Western Financial Bank

Mailing Address

12595 Hesperia Rd,

Victorville

CA

92392 - 4026

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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

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UPS *12/23/05*
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office Date of Receipt

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☐ Other (Specify): Date of Receipt or Postmarked

1/6/
PREPARER
(3/2005)

12/29/05
DATE PREPARED

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