

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

Damien Nichols for Congress

ADDRESS (number and street) 1807 N Las Palmas ave no. 402

(Check if address is changed)

Los Angeles

CITY ▲

CA

STATE ▲

90028

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

damienCalifornia@dmnlat.com

Optional Second E-Mail Address

KatieCalifornia@DMNLAT.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

DamienNichols.com

2. DATE

02 / 08 / 2017

3. FEC IDENTIFICATION NUMBER ►

C C00632703

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 Rubin, Kathleen, Alexandra, ,

Signature of Treasurer

Rubin, Kathleen, Alexandra, ,

[Electronically Filed]

Date

02 / 14 / 2017

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 06/2012)

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 Nichols, Damien, Michael, ,

Candidate Party Affiliation DEM Office Sought: House Senate President State CA District 28

- (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

Write or Type Committee Name

Damien Nichols for Congress

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

NONE

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 Rubin, Kathleen, Alexandra, ,

Mailing Address 9986 1/2 Tujunga Cyn Blvd

Apt. B

Tujunga CA 91042

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 818 281 8246

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 Rubin, Kathleen, Alexandra, ,

Mailing Address 9986 1/2 Tujunga Cyn Blvd

Apt. B

Tujunga CA 91042

Title or Position of Treasurer CITY STATE ZIP CODE

Treasurer Telephone number 818 281 8246

Full Name of Designated Agent Morrison, Brandon, , ,

Mailing Address 10154 Santa Anita
Montclare CA 91763
CITY STATE ZIP CODE

Title or Position Telephone number 323 - 448 - 1057

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.

Paypal

Mailing Address 2211 North First Street
San Jose CA 95131
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

USAA

Mailing Address 2178 Vista Way STE E5
OCEANSIDE CA 92054
CITY STATE ZIP CODE

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1A
Transaction ID :

NICHOLS, DAMIEN MICHAEL Candidate ID : H8CA28169

Form/Schedule:
Transaction ID: