**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Jordan Brandman for Congress 174 W. Lincoln Ave., #109 ADDRESS (number and street) (Check if address is changed) Anaheim 92805 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS gary@crummittandassociates.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00580928 FEC IDENTIFICATION NUMBER > 3. X 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. **Gary Crummitt** Type or Print Name of Treasurer Gary Crummitt [Electronically Filed] 80 2015 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 02/2009)	Page <b>2</b>		
TYPE OF COMMITTEE  Candidate Committee:			
(a) This committee is a principal campaign committee. (Complete th	ne candidate information below.)		
(b) This committee is an authorized committee, and is NOT a princi information below.)	ipal campaign committee. (Complete the candidate		
Name of Jordan Brandman Candidate			
Candidate Party Affiliation  DEM  Office Sought:  House	Senate President State CA  District 46		
(c) This committee supports/opposes only one candidate, and is NC	OT an authorized committee.		
Name of Candidate			
Party Committee: (National, State	(Democratic,		
(d) This committee is a or subordinate) committ	` '		
Political Action Committee (PAC):			
(e) This committee is a separate segregated fund. (Identify connected	ed organization on line 6.) Its connected organization is a		
Corporation Corporation v	v/o Capital Stock Labor Organization		
Membership Organization Trade Associa	ation Cooperative		
In addition, this committee is a Lobbyist/Registrant	PAC.		
(f) This committee supports/opposes more than one Federal candid committee. (i.e., nonconnected committee)	date, and is NOT a separate segregated fund or party		
In addition, this committee is a Lobbyist/Registrant PAC.	In addition, this committee is a Lobbyist/Registrant PAC.		
In addition, this committee is a Leadership PAC. (Identify s	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Joint Fundraising Representative:			
(g) This committee collects contributions, pays fundraising expenses a committees/organizations, at least one of which is an authorized co			
(h) This committee collects contributions, pays fundraising expenses a committees/organizations, none of which is an authorized committee			
Committees Participating in Joint Fundraiser			
1. [	FEC ID number C		
2.	FEC ID number		
3.	FEC ID number C		
	FEC ID number C		

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FEC Form 1 (Revised C		Page 3
Write or Type Committee Name		
	an for Congress	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
None		
Mailing Address		
<b>3</b>		
	CITY STATE ZIF	P CODE
D. 11.	io i ii Daggi io ii Divis ii ii o ii Divis	nahin DAO Carana
Relationship: Connected	I Organization Affiliated Committee Joint Fundraising Representative Leader	rship PAC Sponsor
<ol><li>Custodian of Records: Iden books and records.</li></ol>	tify by name, address (phone number optional) and position of the person in posses	ssion of committee
. Gary Crum	umitt	
Full Name	,525 E. Seaside Way, #101-C	
Mailing Address	325 L. Seaside Way, #101-C	
	Long Beach CA 90802	
Title or Position	CITY STATE ZIP	CODE
Custodian of Records	562   983	8   0815
	Telephone number	
8. <b>Treasurer:</b> List the name and	d address (phone number optional) of the treasurer of the committee; and the name	and address of
8. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name ssistant treasurer).	and address of
8. Treasurer: List the name and any designated agent (e.g., a  Full Name Gary Crum of Treasurer	assistant treasurer).	and address of
any designated agent (e.g., a	assistant treasurer).	and address of
any designated agent (e.g., a  Full Name Gary Crum  of Treasurer	mitt	and address of
any designated agent (e.g., a  Full Name Gary Crum  of Treasurer	mitt	and address of
any designated agent (e.g., a  Full Name Gary Crum  of Treasurer	mitt    525 E. Seaside Way, #101-C    Long Beach   CA   90802	and address of

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Full Name of Designated Agent	None	
Mailing Address		
	CITY STA	TE ZIP CODE
Title or Position	J SIA	222
	Telephone number	
Name of Bank,	California Bank & Trust	
Mailing Address	550 S. Hope St.	
	Los Angeles	CA   90071   -
	CITY STA	TE ZIP CODE
Name of Bank,	Depository, etc.	
Mailing Address		

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

Amending suite number

Form/Schedule: Transaction ID: