**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. SIMI VALLEY DEMOCRATIC CLUB P.O. BOX 586 ADDRESS (number and street) (Check if address is changed) SIMI VALLEY 93062 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address simivalleydemclub@gmail.com is changed) Optional Second E-Mail Address controller@simivalleydems.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00567818 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. Type or Print Name of Treasurer Bunker, Stephanie, , Bunker, Stephanie, . . Date 12 13 2023 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

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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 t information below.)	he candidate	
Name of Candidate		
Candidate Party Affiliation Office Sought: House Senate President	State	
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District	
Name of Candidate		
Party Committee:		
(d) X This committee is a SUB (National, State or subordinate) committee of the DEM (Democrat Republican	ic, n, etc.) Party	
Political Action Committee (PAC):		
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:	
Corporation Corporation w/o Capital Stock Labor	Organization	
Membership Organization Trade Association Cooper	rative	
In addition, this committee is a Lobbyist/Registrant PAC.		
This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund o 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.)		
(g) This committee is an independent expenditure-only political committee (Super PAC).		
In addition, this committee is a Lobbyist/Registrant PAC.		
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid F	PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.		
Joint Fundraising Representative:		
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political	
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. C		

CONTROLLER

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V	Write or Type Committee Name				
		EMOCRATIC CLUB			
6.		Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor			
	VENTURA COUNTY	Y DEMOCRATIC CENTRAL COMMITTEE			
	Mailing Address	816 CAMARILLO SPRINGS ROAD			
		CAMARILLO	93012		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	d Organization X Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso		
<ol> <li>Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commodes and records.</li> </ol>					
	QUIGLEY	7, SCOTT, , ,			
	Full Name				
	Mailing Address	716 Muirfield Ave.			
		SIMI VALLEY CA	93065		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	RECORDING SECRETARY	Telephone number 818	912 7773		
8.	<b>Treasurer:</b> 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 Bunker, S of Treasurer	itephanie, , ,			
	Mailing Address	3097 Lamplighter St			
		<u> </u>			
		SIMI VALLEY CA	93065		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼	Unit =			

818

Telephone number

518

5025

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Full Name of Designated Agent	Ayala, Javad, , ,			
Mailing Addres	4171 Angela St S			
	SIMI VALLEY	CA 93063		
Title or Position	CITY ▲	STATE ▲ ZIP CODE ▲		
PRESIDENT		number 818 - 749 - 6456		
	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.			
Mailing Addres	WELLS FARGO  2740 COCHRAN ST			
	SIMI VALLEY	CA 93065		
	CITY A	STATE ▲ ZIP CODE ▲		
Name of Bank, Depository, etc.				
Mailing Addres	3			
	CITY ▲	STATE ▲ ZIP CODE ▲		