**FEC** 

## 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. Yolanda Brown for Congress 525 E. Seaside Way ADDRESS (number and street) Suite 101-C (Check if address is changed) Long Beach 90802 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 07 2017 C00654905 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. Crummitt, Gary, , , Type or Print Name of Treasurer Crummitt, Gary,,, [Electronically Filed] 09 2017 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 Only

Local 202-694-1100

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	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE te Committee:	
(a) <b>x</b>	This committee is a principal campaign committee. (Complete the candidate information below	<i>i.</i> )
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Coinformation below.)	mplete the candidate
Name of Candidate	Brown, Yolanda, , ,	
Candidate Party Affilia	tion DEM Office Sought: X House Senate President	State CA District 08
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		
(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 co	onnected 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 scommittee. (i.e., nonconnected committee)	segregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
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Write or Type Committee Na		9
	n for Congress	
	d Organization, Affiliated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
NONE		
Mailing Address		
-		
	CITY STAT	E ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
. Custodian of Records: I books and records.	dentify by name, address (phone number optional) and position of the	he person in possession of committee
	itt, Gary, , ,	
Full Name Mailing Address	525 E. Seaside Way	
Mailing / Idai 655	Suite 101-C	
	Long Beach CA	90802
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	562 - 983 - 0815
3. <b>Treasurer:</b> List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the commi	ittee; and the name and address of
Full Name Crumm of Treasurer	itt, Gary, , ,	
Mailing Address	525 E. Seaside Way	
	Suite 101-C	
	Long Beach CA	90802
Title or Position , Treasurer	CITY STATE	
	Telephone number	562 983 - 0815

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE 2	ZIP CODE
Title or Position		
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds.  Depository, etc.  California Bank & Trust	
safety deposit bo	oxes or maintains funds.  Depository, etc.	accounts, rents
safety deposit be Name of Bank, I	California Bank & Trust  550 S. Hope St.  Suite 100	
safety deposit be Name of Bank, I	California Bank & Trust    550 S. Hope St.     Suite 100     Los Angeles   CA   90071	ZIP CODE
safety deposit be Name of Bank, I	California Bank & Trust    Suite 100	
safety deposit be Name of Bank, I Mailing Address	California Bank & Trust    Suite 100	
safety deposit be Name of Bank, I Mailing Address	California Bank & Trust    Suite 100	
safety deposit be Name of Bank, I	California Bank & Trust    Suite 100	
safety deposit be Name of Bank, I Mailing Address	California Bank & Trust    Suite 100	
safety deposit be Name of Bank, I  Mailing Address  Name of Bank, I	California Bank & Trust    Suite 100	