

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2011 SEP 13 AM 10:07 FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Corbett for Congress

ADDRESS (number and street) 555 Capitol Mall, Suite 1425

(Check if address is changed) Sacramento CA 95814

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) info@olsonhagel.com

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 09 09 2011

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT X 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 Ellen Corbett

Signature of Treasurer [Handwritten Signature] Date 9 9 11

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 table with 5 columns and 1 row. For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100. FEC FORM 1 (Revised 02/2009)

11030862039

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Write or Type Committee Name

Corbett 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 Lance H. Olson

Mailing Address 555 Capitol Mall, Suite 1425

Sacramento CA 95814

Title or Position CITY STATE ZIP CODE

Custodian of Records Telephone number 916 442 2952

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 Ellen Corbett

Mailing Address P.O. Box 804

San Leandro CA 94557

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number

11030862041

Full Name of Designated Agent

None

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

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.

US Bank

Mailing Address

621 Capitol Mall, Suite 800

Sacramento

CA

95814

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

11030662042

Federal Election Commission
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Am 10
 PREPARER

9/13/11
 DATE PREPARED

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