Image# 202107019450940953				PAGE 1/4
FEC FORM 1	STATEMEI ORGANIZ			Dffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
	epublican Central		4)	
ADDRESS (number and street	4166 Burgundy Way			
(Check if address is changed)				
	Napa			558
	CITY 🔺		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADD		aat		
<ul><li>(Check if address is changed)</li></ul>	jblev8344@sbcglobal.r			
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE (Check if address is changed)	ADDRESS (URL)			
2. DATE 07 /	01 / Y Y Y Y 01 2021			
3. FEC IDENTIFICATION	NUMBER ► C C	00455659		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examine	d this Statement and to the best	of my knowledge and belief	it is true, correct an	d complete.
Type or Print Name of Treas	urer Blevins, Joseph, D, ,			
Signature of Treasurer	levins, Joseph, D, ,	[Electronically Filed]	Date 07	/ D D / Y Y Y Y 01 2021
NOTE: Submission of false, er	roneous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing		e penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	contact:	FEC FORM 1 (Revised 06/2012)

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FEC Fo	orm 1 (Revised 02/2009) Page 2
TYPE OF C	COMMITTEE
Candidate	e 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 candida information below.)
Name of Candidate	
Candidate Party Affiliati	tion Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Con	mmittee:
(d) ×	This committee is aSUB(National, State or subordinate) committee of theREP(Democratic, Republican, etc.)
Political A	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization
	Corporation Corporation w/o Capital Stock Labor Organiza
	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 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 Fund	draising Representative:
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politica 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.
Com	nmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number
(g) () h) () Com 1. 2. 3.	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) draising Representative: 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. 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. In addition, 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. In mittees Participating in Joint Fundraiser FEC ID number FEC ID number C FEC ID number C FEC ID number C FEC ID number C

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Title or Position

## Napa County Republican Central Committee (Fed)

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

California Reput	lican Party Federal Acct.		
Mailing Address	1001 K St. Floor 4		
	Sacramento	CA	95814 
	CITY	STATE	ZIP CODE
Relationship:	onnected Organization 🗶 Affiliated Committee 🚺 Joint R	Fundraising Representa	tive Leadership PAC Sponsor
7. Custodian of Reco books and records.	rds: Identify by name, address (phone number optional)	) and position of the $pertiad eq$	erson in possession of committee
B	levins, Joseph, D, ,		
Full Name			
Mailing Address	4166 Burgundy Way		
	<b>∖Napa</b>		94558

STATE

**ZIP CODE** 

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).

CITY

Full Name of Treasurer	Blevins, Joseph, D, ,
Mailing Address	4166 Burgundy Way
	Napa CA94558
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number     707     226     5820

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent														I									1			
Mailing Address																										
																			L				_			
						C	:IT)	(								STA	ΤE				ZII	ΡC	OD	١E		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

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.

Ur	mpqua Bank	
Mailing Address	1500 Soscol Avenue	
	Napa	CA94559
	CITY	STATE ZIP CODE
Name of Bank, Depos	sitory, etc.	
Mailing Address		
	CITY	STATE ZIP CODE