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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) over the lines. is changed) National Committee of Asian American Republicans (NCAAR PAC) 24710 Marshy Hope Street ADDRESS (number and street) (Check if address is changed) Stone Ridge 20105 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS cliff.li@asian.gop (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.asian.gop (Check if address is changed) DATE 2019 C00620500 FEC IDENTIFICATION NUMBER 3. 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. Li, Zhonggang, , , Type or Print Name of Treasurer Li, Zhonggang, , , [Electronically Filed] 04 12 2019 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 Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

| Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization | FEC | Form 1 (Revised 02/2009) | Page 2 |
|--|----------|--|-------------------------|
| (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Candidate Candidate Candidate Candidate Candidate Candidate Party Affiliation Committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (number of Candidate) Condidate Candidate Party Committee: (number of Candidate) This committee is a load of subordinate of the light of | | | |
| Name of Candidate Candidate Party Affiliation City This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (d) This committee is a "(National, State or subordinate) committee of the "Republican, etc.) F Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization Corporation Corporation Corporation w/o Capital Stock Labor Organization In addition, this committee is a Lobbyist/Registrant PAC. (f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or promittee. (i.e., nonconnected committee) In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) Joint Fundraising Representative: (g) 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. Committees Participating in Joint Fundraiser 1. FEC ID number C FEC ID number C | (a) | This committee is a principal campaign committee. (Complete the candidate information below. |) |
| Candidate Party Affiliation Office Sought: House Senate President District Co This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (d) This committee is a | (b) | | nplete the candidate |
| Party Affiliation | | | |
| Party Committee: (d) This committee is a (National, State or subordinate) committee of the Republican, etc.) F Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization Corporation Corporation No 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 segregated fund or procommittee. (i.e., nonconnected committee) 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 sponsor on line 6.) Joint Fundraising Representative: (g) 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. Committees Participating in Joint Fundraiser 1. FEC ID number C FEC ID number C | | ***** | |
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| 2. FEC ID number | Co | ommittees Participating in Joint Fundraiser | |
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| 3. FEC ID number | | FEC ID number | |
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| 4. | | | |

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| Write or Type Committee Nam | e | |
| National Comm | nittee of Asian American Republicans (NCAA | AR PAC) |
| 6. Name of Any Connected | Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi | p PAC Sponsor |
| NONE | | |
| | | |
| Mailing Address | | |
| 3 | | |
| | | |
| | CITY STATE Z | IP CODE |
| Relationship: Connecte | d Organization | ership PAC Sponsor |
| ivelationship. | d Organization Anniated Committee Source understand Representative Lead | cramp i Ac aponadi |
| Custodian of Records: Ide books and records. Li, Zhonge | ntify by name, address (phone number optional) and position of the person in possegang, , , | ession of committee |
| Full Name | 24710 Marshy Hope Street | |
| Mailing Address | 247 to Maistry Hope Street | |
| | | |
| | Stone Ridge VA 20105 | |
| Title or Position | CITY STATE ZI | IP CODE |
| Treasurer | Telephone number 954 - 23 | 33 0672 |
| 8. Treasurer: List the name an any designated agent (e.g., | nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer). | e and address of |
| Full Name Li, Zhongo | gang, , , | . |
| Mailing Address | 24710 Marshy Hope Street | |
| Ü | | |
| | Stone Ridge VA 20105 | |
| T11 8 11 | CITY STATE ZI | P CODE |
| Title or Position _I Treasurer | | 33 0672 |

Telephone number

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|---|---|------------------|
| | | |
| Full Name of Designated | | |
| Agent | | |
| Mailing Address | | |
| | | |
| | CITY STATE Z | ZIP CODE |
| Title or Position | | 1 1 |
| | Telephone number | |
| Banks or Other safety deposit bo Name of Bank, I | Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds. Depository, etc. Bank of America | accounts, rents |
| safety deposit bo | Depository, etc. | accounts, rents |
| safety deposit bo Name of Bank, [| Depository, etc. Bank of America 600 N Washington St Alexandria VA 22314 | zaccounts, rents |
| safety deposit bo Name of Bank, [| Depository, etc. Bank of America 600 N Washington St Alexandria CITY STATE | |
| safety deposit bo Name of Bank, [Mailing Address | Depository, etc. Bank of America 600 N Washington St Alexandria CITY STATE Depository, etc. | |
| Name of Bank, I | Depository, etc. Bank of America 600 N Washington St Alexandria CITY STATE | |
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