| Image# 201906179150068314 | | | | 00/1//2019 13 . 29 |
|---|--------------------------------|--|------------------------|---------------------------------------|
| FEC FORM 1 | STATEMEI ORGANIZ | _ | | PAGE 1 / 4 🗕 |
| | | | (| Office Use Only |
| 1. NAME OF COMMITTEE (in full) | (Check if name is changed) | Example:If typing, type over the lines. | 12FE4M5 | |
| Real Justice PAC | C | | | |
| | | | | |
| | 3041 Mission St. #327 | | | |
| ADDRESS (number and street) | | | | |
| is changed) | . San Francisco | | CA94 | i i i i i i i i i i i i i i i i i i i |
| | | | STATE ▲ | |
| | | | STATE | |
| COMMITTEE'S E-MAIL ADDRE | | | | |
| (Check if address is changed) | beckybond@gmail.com | n | | |
| | Optional Second E-Mail Ad | dress | | |
| | | | | |
| (Check if address is changed) | | | | |
| | 7 / Y Y Y Y 2019 | | | |
| 3. FEC IDENTIFICATION N | UMBER ► C c | 00632554 | | |
| I. IS THIS STATEMENT | NEW (N) OR | × AMENDED (A) | | |
| | | af my longer lander and to the first | it is the second | d complet- |
| certify that I have examined t | inis Statement and to the best | or my knowledge and belief | it is true, correct an | la complete. |
| Type or Print Name of Treasure | Bond, Rebecca, , , | | | |
| Signature of Treasurer | l, Rebecca, , , | [Electronically Filed] | Date 06 | / D D / Y Y Y 17 2019 |
| NOTE: Submission of false, error | | may subject the person signing | | e penalties of 2 U.S.C. §437 |
| Office Use Only | | For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100 | | FEC FORM 1 (Revised 06/2012) |

06/17/2019 13 : 29

| - | |
|----------------------------|--|
| FEC F | Form 1 (Revised 02/2009) Page 2 |
| TYPE OF | COMMITTEE |
| Candidat | te 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 candidate information below.) |
| Name of Candidate | |
| Candidate Party Affilia | ation Office Sought: House Senate President District |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. |
| Name of Candidate | |
| Party Co | mmittee: |
| (d) | This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Provide the |
| Political | 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 Organization |
| | Membership Organization Trade Association Cooperative |
| | 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 p 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 Fun | ndraising 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. |
| (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. |
| Cor | mmittees Participating in Joint Fundraiser |
| 1. | FEC ID number |
| 2. | FEC ID number |
| 3. | FEC ID number |
| 4. | FEC ID number |

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

Real Justice PAC

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

| Mailing Address | 45 Powers Ave | | | | | | | |
|---|---------------|----------------|--|--|--|--|--|--|
| | | | | | | | | |
| | San Francisco | CA 94110 | | | | | | |
| | 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.

| , E | Bond, Rebecca, , , |
|-------------------|------------------------------------|
| Full Name | |
| Mailing Address | 3041 Mission St. #327 |
| | |
| | San Francisco CA 94110 |
| Title or Position | CITY STATE ZIP CODE |
| Treasurer | Telephone number |

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 | Bond, Rebecca, , , | | |
|--------------------------------|--|--------------------------------|---|
| Mailing Address | 3041 Mission St. #327 | | |
| | | | |
| | San Francisco CA 94110 – / <th <="" th=""> <th <="" th=""> /</th></th> | <th <="" th=""> /</th> | / |
| | CITY STATE ZIP CODE | | |
| Title or Position Treasurer | Image: Telephone number 415 595 0040 | | |

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FEC Form 1 (Revised 02/2009)

| Full Name of Designated Agent | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------|--|--|--|--|--|--|----|----|--|--|------|-----|-----|-----|----|-----|-----|---|---|----------|----|-----|-------|--|--|
| Mailing Address | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | | | | | | CI | TΥ | | | | | | | | ST | ATE | | | | ZI | P (| DE | | |
| Title or Position | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | Tele | eph | one | e n | um | ber | | L | | - [_ | | | | | |

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. |
|------|----|-------|-------------|------|
|------|----|-------|-------------|------|

| Wells F | argo Bank | | |
|-----------------------------|-----------------|---------|----------|
| Mailing Address | 1 California St | | |
| | | | |
| | San Francisco | CA 9411 | 1 |
| | CITY | STATE | ZIP CODE |
| Name of Bank, Depository, e | etc. | | |
| | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| | CITY | STATE | ZIP CODE |