**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. Reform Leaders Victory Fund 7185 Navajo Rd Ste P ADDRESS (number and street) (Check if address is changed) San Diego 92119-1695 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS april@aprilboling.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 25 2020 C00715383 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. Boling, C. April, , , Type or Print Name of Treasurer Boling, C. April, , , [Electronically Filed] 80 25 2020 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

FE	EC <b>Fo</b> r	m 1 (Revised 02/2009)	Page <b>2</b>
TYPE	OF C	DMMITTEE	
Cand	lidate	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. (Complinformation below.)	ete the candidate
Name Candid			
Candid Party A		Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	Com	mittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, epublican, etc.) Party
Politic	cal A	ction Committee (PAC):	
(e)	П	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is
			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 seg committee. (i.e., nonconnected committee)	regated 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	Fund	raising Representative:	
(g)	x	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Comr	mittees Participating in Joint Fundraiser	
	1.	Gen-Next GOP Leaders Fund FEC ID number C C007	5375
	2.	CARL DEMAIO FOR CONGRESS FEC ID number C C0071	5029
	3.	FEC ID number	
	4.		

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Write or Type Committee N		
Reform Leade	ers Victory Fund	
	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	rship PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Representative L	eadership PAC Sponsor
. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the person in p	ossession of committee
	, C. April, , ,	ı
Full Name	7185 Navajo Rd Ste P	
Mailing Address		
	San Diego , CA , 92119	-1695
Title or Position	CITY STATE	ZIP CODE
		713 6888
3. <b>Treasurer:</b> List the name any designated agent (e.	and address (phone number optional) of the treasurer of the committee; and the rg., assistant treasurer).	name and address of
Full Name Boling, of Treasurer	C. April, , ,	
Mailing Address	7185 Navajo Rd Ste P	
	San Diego CA 92119-	1695
Title or Position	CITY STATE	ZIP CODE
		713 - 6888

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Full Name of Designated	T	, , , ,
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Mailing Address	Bank of San Francisco  575 Market St Ste 900	
-	San Francisco CA 1 94105	
	San Francisco CA 94105	
		ZIP CODE
Name of Bank,	CITY STATE	ZIP CODE
	CITY STATE	ZIP CODE
	CITY STATE  Depository, etc.	ZIP CODE
Name of Bank,	CITY STATE  Depository, etc.	ZIP CODE
Name of Bank,	CITY STATE  Depository, etc.	ZIP CODE