PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Carl DeMaio for Congress 7185 Navajo Road Suite 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) https://carldemaio.com/ (Check if address is changed) DATE 05 2019 C00715029 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] 09 17 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 (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • 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. (Cominformation below.)	plete the candidate
Name Cand		DeMaio, Carl, , ,	
Cand Party	idate Affiliati	on REP Office Sought: X House Senate President	State CA District 50
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor-	nected organization is a:
		Corporation Corporation w/o 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 secommittee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC <b>Form 1</b> (Revis	ed 02/2009)	   Page <b>3</b>
Write or Type Committee N		- age •
Carl DeMaio		
	ed Organization, Affiliated Committee, Joint Fundraising Represent	ative, or Leadership PAC Sponsor
DEMAIO VICTORY		
DEIVINIO VIGIOITI		
Mailing Address	7185 NAVAJO RD STE P	
	SAN DIEGO CA CITY STA	
Relationship: Conne	ected Organization Affiliated Committee James Joint Fundraising Representation	esentative Leadership PAC Sponsor
. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of	the person in possession of committee
	, C. April, , ,	
Full Name Mailing Address	7185 Navajo Road Suite P	
	San Diego CA	92119-1695
Title or Position	CITY STAT	E ZIP CODE
Treasurer	Telephone number	619 713 6888
Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the comm g., assistant treasurer).	nittee; and the name and address of
Full Name Boling of Treasurer	, C. April, , ,	
Mailing Address	7185 Navajo Road Suite P	
	San Diego	92119-1695
Title or Position	CITY STATE	E ZIP CODE
Treasurer	Telephone number	619 713 6888

	<b>n 1</b> (Revised 02/2009)	Page <b>4</b>
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