FEC FORM 1	STATEMEN ORGANIZ		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
ADDRESS (number and street)	501 W. Broadway Ste A 192		
(Check if address is changed)	San Diego CITY ▲		CA 92101 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	ESS		
<ul> <li>(Check if address is changed)</li> </ul>	campaigns@rcbs.us		
	Optional Second E-Mail Add marcela@winbackpa	lress ic.org	
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)		
	2 / Y Y Y Y 2020		
3. FEC IDENTIFICATION N	UMBER ► C co	00762856	
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	er Lewis, Denise, , ,		
Signature of Treasurer	s, Denise, , ,	[Electronically Filed]	Date 11 / D D / Y Y Y Y 2020
NOTE: Submission of false, error		may subject the person signing ON SHOULD BE REPORTED W	this Statement to the penalties of 2 U.S.C. §437g. VITHIN 10 DAYS.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	

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TYPE OF	COMMITTEE			
Candida	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	ommittee:			
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party			
Political	Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is			
	Corporation Corporation w/o Capital Stock Labor Organization			
	Membership Organization Trade Association Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.			
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party 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 Fur	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.			
Со	mmittees Participating in Joint Fundraiser			
1.	FEC ID number			
2.	FEC ID number			
3.	FEC ID number			
4.	FEC ID number			

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Write or Type Committee Name

## Win Back PAC

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

Mailing Address					
	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.

Lewis, Der	nise, , ,
Full Name	
Mailing Address	5429 Madison Avenue
	Sacramento         CA         95841
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number     916     348     9100

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	Lewis, Denise, , ,
Mailing Address	5429 Madison Avenue
	Sacramento
	CITY STATE ZIP CODE
Title or Position	Telephone number 916 916 9100

Full Name of Designated Agent	Miranda-Caballero, Marcela, , ,		
Mailing Address	501 W. Broadway Ste A 192		
	∣ San Diego	, , CA , , 92101 , ,	

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.

Firs	t Foundation Bank		
Mailing Address	2233 Douglas Blvd Ste 300		
	Roseville		95661
	CITY	STATE	ZIP CODE
Name of Bank, Deposite	pry, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE