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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. Central Valley's Future 49197 Road 426 ADDRESS (number and street) Ste C - 401 (Check if address is changed) Oakhurst 93644 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS rp3@henryalan.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00688267 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. Phillips, Robert, , , III Type or Print Name of Treasurer Phillips, Robert, , , III [Electronically Filed] 09 2018 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

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	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected 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) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

1		
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Write or Type Committee Name	_	
Central Valley's	Future	
6. Name of Any Connected O	ganization, Affiliated Committee, Joint Fundraising Representative, o	r Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Identification books and records. 	ify by name, address (phone number optional) and position of the pers	son in possession of committee
Phillips, Ro	pert, , , III	
	49197 Road 426	
Mailing Address	Ste C - 401	
	Oakhurst , CA ,	,93644
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	2 866 8229
8. Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; a sistant treasurer).	nd the name and address of
Full Name Phillips, Rol	pert, , , III	
of Treasurer	49197 Road 426	
Mailing Address	Ste C - 401	
		193644
	Oakhurst CITY STATE	2IP CODE
Title or Position	OII I SIAIE	LIF CODE

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE ZIF	P CODE
Title or Position		
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds, holds a pixes or maintains funds.	iccounts, rents
	oxes or maintains funds.	
safety deposit bo Name of Bank, [Depository, etc. Huntington National Bank 17 S. High Street Columbus OH 43215	P CODE
safety deposit bo Name of Bank, [Depository, etc. Huntington National Bank 17 S. High Street Columbus CITY STATE ZII	
safety deposit bo Name of Bank, [Mailing Address	Depository, etc. Huntington National Bank 17 S. High Street Columbus CITY STATE ZII	
safety deposit bo Name of Bank, [Mailing Address	Depository, etc. Huntington National Bank 17 S. High Street Columbus CITY STATE ZII	
Name of Bank, I	Depository, etc. Huntington National Bank 17 S. High Street Columbus CITY STATE ZII	
Name of Bank, I	Depository, etc. Huntington National Bank 17 S. High Street Columbus CITY STATE ZII	

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Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit's decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: