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) over the lines. is changed) CHINESE AMERICAN LEADERSHIP POLITICAL ACTION COMMITTEE 8421 HOLLY LEAF DRIVE ADDRESS (number and street) (Check if address is changed) **MCLEAN** 22102 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS CALPAC888@GMAIL.COM (Check if address is changed) Optional Second E-Mail Address reiff@sandlerreiff.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 05 2019 C00490961 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. HA, JULIAN, , , Type or Print Name of Treasurer HA, JULIAN, , , [Electronically Filed] 03 05 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:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	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.	
(5)		_	areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	raising Representative:	
(g)		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.	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	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

			_
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Write or Type Committee N			OTIONI OOMMUTTEE
CHINESE AM	ERICAN LEADERSHII	P POLITICAL A	CHON COMMITTEE
6. Name of Any Connect	ted Organization, Affiliated Committee,	Joint Fundraising Represent	ative, or Leadership PAC Sponsor
NONE			
Mailing Address			
	CITY	STA	TE ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee	e Joint Fundraising Repre	sentative Leadership PAC Sponsor
books and records.	Identify by name, address (phone number	er optional) and position of	the person in possession of committee
HA, J Full Name	IULIAN, , ,		
Mailing Address	8421 HOLLY LEAF DRIVE		
·			
	MCLEAN	VA	22102
Title or Position	CITY	STATI	E ZIP CODE
TREASURER		Telephone number	703 485 7402
Treasurer: List the name any designated agent (e	e and address (phone number optional) e.g., assistant treasurer).	of the treasurer of the comm	nittee; and the name and address of
Full Name HA, JU of Treasurer	ULIAN, , ,		
Mailing Address	8421 HOLLY LEAF DRIVE		
	MCLEAN	VA	22102
Title or Desition	CITY	STATE	ZIP CODE
Title or Position TREASURER		Telephone number	703 - 485 - 7402

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
		is, noius accounts, rents
safety deposit boxes Name of Bank, Depo		
safety deposit boxes Name of Bank, Depo	or maintains funds. Disitory, etc. ITIBANK	
safety deposit boxes Name of Bank, Depo	or maintains funds. Disitory, etc. ITIBANK 2101 L STREET, NW	20037
safety deposit boxes Name of Bank, Depo	or maintains funds. Disitory, etc. ITIBANK 2101 L STREET, NW	
safety deposit boxes Name of Bank, Depo	or maintains funds. DC 2 CITY STATE	20037
safety deposit boxes Name of Bank, Depo CI Mailing Address	or maintains funds. DC 2 CITY STATE	20037
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