

Semi-Annual Statement of No Activity

Type or print in ink.

STATEMENT OF NO ACTIVITY

For use by recipient committees that have not received any contributions and have not made any expenditures during the six-month period covered by a semi-annual statement. **Candidate controlled committees formed for an elective office may not use this form.**

See the Information Manual on Campaign Disclosure Provisions of the Political Reform Act for additional information and information required to be provided to you pursuant to the Information Practices Act of 1977.

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CAMPAIGN FINANCE

CALIFORNIA FORM 425

For Official Use Only

1. Committee Information I.D. NUMBER
1287619

COMMITTEE NAME
 Republicans for Rational Reform

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
 Valley Village CA 91607

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET

CITY STATE ZIP CODE AREA CODE/PHONE
 North Hollywood CA 91609 818 448-3403

OPTIONAL: FAX / E-MAIL ADDRESS
 drhassoc@earthlink.net

Treasurer(s)

NAME OF TREASURER
 David Hernandez

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
 North Hollywood CA 91609 818 448-3403

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

2. Period of No Activity

No contributions have been received and no expenditures have been made during the period covering the dates below:

Check one of the following boxes and complete the year. January 1, through June 30, 20²² July 1, through December 31, 20__

3. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the information and certify that it is true and complete. I certify under penalty of perjury under the laws of the State of California that the information furnished herein is true and complete.

Executed on 07/18/22
 DATE

By _____