

Semi-Annual Statement of No Activity

Type or print in ink.

01/14/2021
Date Stamp

5/21
STATEMENT OF NO ACTIVITY

CALIFORNIA FORM 425

For Official Use Only

609902

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.**

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CAMPAIGN FINANCE

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.

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	818 443403

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
No Hollywood	CA	91609	818 448-3403

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

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, 20 ____ July 1, through December 31, 20 21

3. Verification

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

on contained herein

Executed on 01/14/21
DATE

PPC Form 425 (Jan/01)
telephone: 866/ASK-FPPC
866/275-3772

dc