## FEC FORM 1

## STATEMENT OF ORGANIZATION

FEC MAIL CENTER

/ Office Use Only Day on an

1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FÉ4M5	11 01 11 CY
NJ7 Citizens For Cha	inge	<u> </u>	· <u>                                     </u>	
ADDRESS (number and street)	PO Box 1754			
(Check if address is changed)				
COMMITTEE'S E-MAIL ADDRE  (Check if address is changed)	Cranford     CITY ▲		N.   07016 STATE ▲ 2	 ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	ESS			
		<del></del>		لينيا
	Optional Second E-Ma	il Address		1
		<del>.   .   .   .   .   .   .   .   .   .  </del>	<u> </u>	<del></del>
7	DRESS (UBL)			
(Check if address				
is changed)	I			1
;#  -  -				
2. DATE 02 / 1	2 2020			,
3. FEC IDENTIFICATION N	UMBER ▶	00640458		
4. IS THIS STATEMENT	NEW (N) OI	R AMENDED (A)		
I certify that I have examined the	his Statement and to the	best of my knowledge and belief	it is true, correct and comple	te.
Type or Print Name of Treasure	Gregg J Jaco	obs		
Signature of Treasurer			Date 02 / 12	2020
NOTE: Submission of false, erron		ation may subject the person signing		of 52 U.S.C. §30109
Office Use Only		For further Information Federal Election Commis Toil Free 800-424-9530 Local 202-694-1100	sion FEC	FORM 1 ed 06/2012)

	FEC Fo	orm 1 (Revised 02/2009) Page 2	! 
5.		COMMITTEE 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. (Complete the candidate information below.)	
	Name of Candidate		
	Candidate Party Affiliati	Office State I Senate President District	
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		لـــٰــ
	Party Con	mmittee:  (National, State (Democratic,	
	(d)	This committee is a committee of the committee of the Republican, etc.) Page 1	arty.
	Political A	Action Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	is a:
		Corporation Corporation w/o Capital Stock Labor Organization	n
		Membership Organization Trade Association Cooperative	
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or procommittee. (i.e., nonconnected committee)	arty
		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:	٠
	(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.	
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

<b>6</b> .		Nar	ne	of	Α	ny	С	ОГ	ıne	ct	ed	O	ga	mi	zai	tio	n,	A	Hil	iat	tei	d (	Co	m	mi	itte	æ,	Jo	in	t Fı	ın	dra	isi	ing	R	epr	es	en	tati	ive	, o	r i	.ea	adı	ers	shi	p F	) <b>A</b> (	C S	ро	กร	or
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							_								_											_									_									_								
7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of cobooks and records. Gregg J Jacobs															om	nitt																																				
	f	-ult	Na	am	е			L	G	re	gg	<u></u>	J,	Ja	CC	ot	S	1		_1		1.	1		<u>.                                    </u>	┸	_1	1			L.	1	ı	L		_1			1	<u>_</u>			_,	<u></u>	_ـــــــــــــــــــــــــــــــــــــ	ı						
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| Granford

Title or Position

CITY

Page 3

L07016 L - L

ZIP CODE

STATE

Telephone number

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

or(h).	5(g) c	
1. L 2. L 3. L 4. L		
Name of	6.	
Rela  Designate Full N  Mailing	8.	Corros os ochretio
mu L		

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page	of	

5(a)	or (h). Joint Fundraising Participant:	
(3)	1.   FEC ID number	,
	2. FEC ID number	
	3. FEC ID number	-
	4. FEC ID number	<del></del>
		_
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponso	)r
	Mailing Address	,
		<del></del>
		Т.
	Relationship: CITY ▲ STATE ▲ ZIP CODE ▲	
	Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sport	nec
	Full Name	
	Mailing Address	
	<u> </u>	,
	TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	
	Telephone Number	
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.	1_
	Mailing Address	丄
		L
	[,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1
1	CITY ▲ STATE ▲ ZIP CODE ▲	

FEC MAIL CENTER 2020 FEB 25 PM 12: 07



Mr. Gregg Jacobs 6 Timothy Field Rd. New Providace, NJ 07974-1237

FEC 1

Federal Election Commi-1050 Frest St, NE Washington DC 20463

TO FEB 20





ENVELOPE REPLAC		ission NCOMING DOCUMENTS to indicate how it was received.
Hand Delivered		Date of Receipt
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USPS Priority Mail Expre	ss	Postmarked
Postmark Illegible		
No Postmark		
Overnight Delivery Service	ce (Specify):	Shipping Date
	Ne	ext Business Day Delivery
Received from House Re	cords & Registration (	Date of Receipt Office
Received from Senate Pu	ublic Records Office	Date of Receipt
Received from Electronic	Filing Office	Date of Receipt
Other (Specify):		Date of Receipt or Postmarked
Jm		2/25/20
PREPARER (3/2015)		DATE PREPARED
(5/2010)		