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2017 AUG 23 AM 11:01

America's Urban Future  
P.O Box 1964  
Brick, NJ 08723

August 16, 2017

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Re: Form 1, Statement of Organization – Unlimited Contributions

To Whom It May Concern:

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

Respectfully Submitted,



Stephanie Wohlrab, Treasurer

2017-08-23 00:17:24 8

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

AMERICA'S URBAN FUTURE

ADDRESS (number and street)

PO BOX 1964



(Check if address  
is changed)

BRICK

CITY ▲

NJ

STATE ▲

08723

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address  
is changed)

SWOHLRAB1@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address  
is changed)

2. DATE

08

16

2017

3. FEC IDENTIFICATION NUMBER ►

C

4. 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.

Type or Print Name of Treasurer STEPHANIE WOHLRAB

Signature of Treasurer



Date

08

16

2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.  
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE

**Candidate 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 Affiliation

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 Committee:**

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

**Political 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
- ☐ 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 party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (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.

**Committees Participating in Joint Fundraiser**

- |    |                          |               |                          |
|----|--------------------------|---------------|--------------------------|
| 1. | <input type="checkbox"/> | FEC ID number | <input type="checkbox"/> |
| 2. | <input type="checkbox"/> | FEC ID number | <input type="checkbox"/> |
| 3. | <input type="checkbox"/> | FEC ID number | <input type="checkbox"/> |
| 4. | <input type="checkbox"/> | FEC ID number | <input type="checkbox"/> |

Write or Type Committee Name

AMERICA'S URBAN FUTURE

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

STEPHANIE WOHLRAB

Mailing Address

PO BOX 1964

BRICK

NJ

08723

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

## 8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name  
of Treasurer

STEPHANIE WOHLRAB

Mailing Address

PO BOX 1964

BRICK

NJ

08723

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

732

674

4199

2017-08-21 03:00:17 2251

Full Name of  
Designated  
Agent

PABLO CIFUENTES

Mailing Address

PO BOX 1964

BRICK

CITY

NJ

STATE

08723

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

732

- 674

- 4199

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.

TD BANK

Mailing Address

1049 CEDARBRIDGE AVE

BRICK

CITY

NJ

STATE

08723

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

## 5(g) or (h). Joint Fundraising Participant:

1. \_\_\_\_\_  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_  
 4. \_\_\_\_\_

FEC ID number

FEC ID number

FEC ID number

FEC ID number

C
C
C
C

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

\_\_\_\_\_  
 \_\_\_\_\_

Mailing Address

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☐

Joint Fundraising Representative

☐

Leadership PAC Sponsor

## 8. Designated Agent: Identify by name, address (phone number – optional)

Full Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

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.

\_\_\_\_\_

Mailing Address

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

2017-08-21 00:17:21

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STEPHANIE WOHLRAB  
(732) 674-4199  
PO BOX 1964  
BRICK NJ 08723

0.2 LBS  
SHP WT: LTR  
DATE: 22 AUG 2017

LTR-1.0

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WASHINGTON DC 20463-0002

MD 201 9-83



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Federal Election Commission  
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 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <span style="margin-left: 20px;">UPS</span> <div style="float: right; text-align: right;">                 Shipping Date                  8/22/2017                  Next Business Day Delivery <input checked="" type="checkbox"/> </div>	
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PREPARER <span style="font-family: cursive; font-size: 1.5em; margin-left: 10px;">MP</span>	8/23/2017 DATE PREPARED

(3/2015)

2017-08-23 10:01:01 AM