## HAND DELIVERED

## STATEMENT OF

RECEIVED

FORM 1		ORGANIZATION			327 PM 3:02
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	•
Greenstein	for Cong	ress	1111111	<u> </u>	
		1 1 1 1 1 1 1			
ADDRESS (number a	nd street)	O Box, 492		<u> </u>	
(Check if ac is changed)		ainsboro		NJ <b>Q</b> 8	536
. •			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA	address	ease provide only one of fo@greenst	e-mail address) einforcongress.c	<b>ο</b> ҭ	
COMMITTEE'S WEB  (Check if is change	address h	•	eensteinforcongr	ess.com,	
2. DATE 02	21 27°	2014			· ·
3. FEC IDENTIFICATION NUMBER					
4. IS THIS STATE	MENT 🔀 I	NEW (N) OR	AMENDED (A)		
I certify that I have of	!	ennifer May	st of my knowledge and belief i	t is true, correct al	nd complete.
Signature of Treasure	er Je	unif M	may	Date 02	27° 2014
NOTE: Submission of	•	•	n may subject the person signing		e penalties of 2 U.S.C. §437g.
Office Use			For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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<del></del>	FEC Form 1 (Revised 02/2009)	Page 2
	E OF COMMITTEE	•
Ca	ndidate Committ <del>ae</del> :	ŗ
(a)	This committee is a principal campaign committee. (Complete the candidate information	n below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee information below.)	e. (Complete the candidate
	ne of Linda Greenstein	
-	didate  Office Sought:  House Senate Pres	State NJ sident District 12
(c)	This committee supports/opposes only one candidate, and is NOT an authorized comm	nittee.
	e of didate	
Pai	ty Committee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Pol	itical Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6	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 ser committee. (i.e., nonconnected committee)	parate segregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	•
		l
Joir	t Fundraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proced committees/organizations, at least one of which is an authorized committee of a federal care.	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proced committees/organizations, none of which is an authorized committee of a federal candidate	
	Committees Participating in Joint Fundraiser	
	1. FEC ID number	San
	2. FEC ID number	
	3. FEC ID number	and a second to consist of second parameter the second second second second second second second second second
	4.	Sandanda and made and sandand

FEC Form 1 (Revise	-d 02/2000)	Page <b>3</b>
Write or Type Committee Na		rage 3
Greenstein for		
	d Organization, Affihated Committee, Joint Fundraising Representati	ve or Leadership PAC Spansor
o. Hame of Any Connecte	a Organization, Anniated Committee, South Fundaming Representati	ve, or ecuacionip i no oponion
None		
Mailing Address		
,		
		<del>                                     </del>
i	CITY	ZIP CODE
<b></b> 1		
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
<ol> <li>Custodian of Records: I books and records.</li> </ol>	dentify by name, address (phone number optional) and position of the	e person in possession of committee
Full Name Jenr	nifer May	
Mailing Address	ıPO,Box 492	
Walling Address		
	ıPlainşboro	1 108536 1_1
•		
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
	Talephone number	
8. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committ	tee; and the name and address of
Full Name  of Treasurer  Jenr	nifer May	
	PO Box 492	
Mailing Address		
	Plainsboro	08536    _
	CITY STATE	ZIP CODE
Title or Position		
Treasurer	Telephone number	[

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							and the second s
Full Name of Designated							
Agent		<u> </u>					
Mailing Address					1 1 1 1		
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		1		1	1 . 1	1	<b> - </b>
		CIT	Y		STATE	<u> </u>	ZIP CODE
Title or Position							
				Telephone n	umber	<b></b>	
safety deposit b Name of Bank,	Depository, e	tc.			·		ı
safety deposit b Name of Bank,	Depository, e	tains funds. tc. f America					, <u>, , , , , , , , , , , , , , , , , , </u>
safety deposit b	Depository, e	tains funds. tc.					
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safety deposit b Name of Bank,	Depository, e	tains funds.  If America  656 Plainsboro R	d		N.J. STATE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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safety deposit b Name of Bank, Mailing Address	Bank C	tains funds.  If America  [656 Plainsboro R  Plainsboro  CIT	d			  0853	6
safety deposit b Name of Bank, Mailing Address	Bank C	tains funds.  If America  [656 Plainsboro R  Plainsboro  CIT	d				6
safety deposit b Name of Bank, Mailing Address	Depository, e	tains funds.  If America  [656 Plainsboro R  Plainsboro  CIT	d		STATE		6 CODE
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safety deposit b Name of Bank, Mailing Address  Name of Bank,	Depository, e	tains funds.  If America  1656 Plainsboro R  Plainsboro  CIT	d		STATE		6 CODE

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received.

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Received from Senate Public Records Office	Date of Receipt
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Other (Specify):	Date of Receipt or Postmarked
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(8/2013)	DATE PREPARED