

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2014 Use Only APR 11 2014

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5 FEC MAIL CENTER

ALLEN FOR CONGRESS

ADDRESS (number and street)

140 BEACH 128th Street

(Check if address is changed)

BELLE HARBOR

NY

11694

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

ALLENFORCONGRESS@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

N/A

2. DATE

06/06/2014

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

Lauren J. MARTINEZ

Signature of Treasurer

Lauren J. Martinez

Date

06/06/2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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)

1403124429A

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 ALLEN, FRANK STEINHARDT

Candidate Party Affiliation Office Sought: House Senate President State NY District 05

- (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.	_____	FEC ID number	<u>C</u>
2.	_____	FEC ID number	<u>C</u>
3.	_____	FEC ID number	<u>C</u>
4.	_____	FEC ID number	<u>C</u>

14031244295

Write or Type Committee Name

ALLEN FOR CONGRESS

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for 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

PEDRO JUNIOR MARTINEZ

Mailing Address

1140 BEACH 128th STREET

BELLE HARBOR NY 11694

Title or Position

CITY

STATE

ZIP CODE

CAMPAIGN MANAGER

Telephone number 516-497-5072

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

LAUREN JOANNE MARTINEZ

Mailing Address

1140 BEACH 128th STREET

BELLE HARBOR NY 11694

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 516-497-5072

14031244296

Full Name of Designated Agent

PEDR0 JUNIOR MARTINEZ

Mailing Address

140 BEACH 128th STREET

BELE HARBOR NY 11694

CITY

STATE

ZIP CODE

Title or Position

CAMPAIGN MANAGER

Telephone number

516-497-5072

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

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

1403124297

14031244208

U.S. POSTAGE
PAID
ROCKAWAY PARK, NY
11694
JUN 07, 14
AMOUNT

\$1.40
00017074-04



20463



1060

Post Office
Rockaway Park, NY
11694

2014 JUN 13 PM 1:10

EINHARDT
ST
ROCK, NY 11694

TO:

FEDERAL ELECTION COMMISSION
999 E. Street, NW
WASHINGTON, DC 20463

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"/> Other (Specify):	Date of Receipt or Postmarked

PA

PREPARER
(8/2013)

6/13/14

DATE PREPARED

14031244299