

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2012 MAY 23 AM 8:52

FEC MAIL CENTER

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

GOTTLEB FOR CONGRESS

ADDRESS (number and street)

150-14 JEWEL AVENUE

(Check if address is changed)

FLUSHING

NEW YORK NY 11362

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

GOTTLEB FOR CONGRESS a Not mail.com

2. DATE

05 / 17 / 2012

3. FEC IDENTIFICATION NUMBER

C000519330

4. IS THIS STATEMENT

(Check if NEW)

NEW (N)

OR

(Check if AMENDED)

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

Jack Rosenblum

Signature of Treasurer

Jack Rosenblum

Date

05 / 17 / 2012

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 02/2009)

12030813345

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 JERREY GOTTLOB

Candidate Party Affiliation DEM Office Sought: House Senate President State NY District 06

- (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	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

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Write or Type Committee Name

Gottlieb 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

JACK ROSENBLUM

Mailing Address

150-14 JEWEL AVENUE Apartment A
FLUSHING NY
FLUSHING NY NY 11367-1434

Title or Position

CITY

STATE

ZIP CODE

TRISTAN V. RITA

Telephone number 718-544-2933

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

JACK ROSENBLUM

Mailing Address

150-14 JEWEL AVENUE
FLUSHING NY
NEW YORK NY 11362-2933

Title or Position

CITY

STATE

ZIP CODE

TRISTAN V. RITA

Telephone number 718-544-2933

12030813347

Full Name of Designated Agent

CHASE BANK - Mir F. Rubio

Mailing Address

47-11 Queens Boulevard

SUNNYSIDE NY

NEW YORK

CITY

NY STATE

11104-1604 ZIP CODE

Title or Position

ASSISTANT VICE PRESIDENT

Telephone number

718-353-3150

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.

CHASE BANK

Mailing Address

47-11 Queens Boulevard

SUNNYSIDE NY

NEW YORK

CITY

NY STATE

11104-1604 ZIP CODE

Name of Bank, Depository, etc.

[Empty line for bank name]

Mailing Address

[Empty line for address]

[Empty line for address]

[Empty line for address]

CITY

STATE

ZIP CODE

12030813548

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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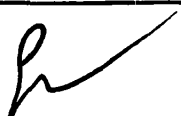
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PREPARER
(3/2005)

5/23/11
DATE PREPARED

12030813349