

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Nadler Victory Fund

ADDRESS (number and street) 200 West 79th Street, #8N

(Check if address is changed)

New York CITY ▲ NY STATE ▲ 10024 ZIP CODE ▲

### COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) rgottheim@gmail.com

Optional Second E-Mail Address

### COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 10 / 20 / 2018

3. FEC IDENTIFICATION NUMBER ▶ C C00657205

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 Weissman, Lewis, , ,

Signature of Treasurer Weissman, Lewis, , , [Electronically Filed] Date 10 / 20 / 2018

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.

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. | DEBBIE FOR CONGRESS       | FEC ID number | C | C00652065 |
| 2. | SUSAN WILD FOR CONGRESS   | FEC ID number | C | C00658567 |
| 3. | FRIENDS OF LUCY MCBATH    | FEC ID number | C | C00672295 |
| 4. | KATIE PORTER FOR CONGRESS | FEC ID number | C | C00636571 |

Write or Type Committee Name

# Nadler Victory Fund

**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 Gottheim, Robert, M, ,

Mailing Address 200 West 79th Street, #8N

New York NY 10024

Title or Position CITY STATE ZIP CODE

Counsel 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 Weissman, Lewis, , ,

Mailing Address 200 West 79th Street, #8N

New York NY 10024

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 212 352 0370

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for 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.

Citibank, NA

[Grid for Name of Bank, Depository, etc.]

Mailing Address

200 Varick Street

[Empty grid for Mailing Address line 2]

New York NY 10014

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

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

5(g) or (h).

Joint Fundraising Participant:

- 1. SHARICE FOR CONGRESS
- 2. NADLER FOR CONGRESS
- 3. KENDRA HORN FOR CONGRESS
- 4. ELIZABETH PANNILL FLETCHER FOR CONGRESS

|               |           |
|---------------|-----------|
| FEC ID number | C00670034 |
| FEC ID number | C00290825 |
| FEC ID number | C00648915 |
| FEC ID number | C00640045 |

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

Name of organization field

Mailing Address field

Relationship: CITY STATE ZIP CODE and checkboxes for Connected Organization, Affiliated Committee, Joint Fundraising Representative, Leadership PAC Sponsor

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

Designated Agent fields: 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.

Banks or Other Depositories fields: Name of Bank, Depository, etc., Mailing Address, CITY, STATE, ZIP CODE

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

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

- 1. JERRY'S POLITICAL ACTION COMMITTEE (JERRY'S PAC)
- 2. LAUREN UNDERWOOD FOR CONGRESS
- 3. DR KIM SCHRIER FOR CONGRESS
- 4. CINDY AXNE FOR CONGRESS

|               |   |           |
|---------------|---|-----------|
| FEC ID number | C | C00363317 |
| FEC ID number | C | C00652719 |
| FEC ID number | C | C00652628 |
| FEC ID number | C | C00646844 |

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

[Empty text field for organization name]

Mailing Address [Empty text field]

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 [Empty text field]  
Mailing Address [Empty text field]  
TITLE OR POSITION CITY STATE ZIP CODE  
Telephone Number [Empty text field]

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. [Empty text field]  
Mailing Address [Empty text field]  
CITY STATE ZIP CODE