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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. BRIDGE THE GAP PAC PO Box 83142 ADDRESS (number and street) (Check if address is changed) Gaithersburg 20883-3142 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS vwinpisinger@gmail.com (Check if address is changed) Optional Second E-Mail Address levymark22@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00655423 FEC IDENTIFICATION NUMBER > 3. X 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. Levy, Mark, A.,, Type or Print Name of Treasurer Levy, Mark, A.,, [Electronically Filed] 09 2017 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Car	ndidate	e Committee:	
(a)	Ш	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. (Complinformation below.)	ete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	
(d)		· · · · · ·	emocratic, epublican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected 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 segrecommittee. (i.e., nonconnected committee)	egated 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.		
	4.		

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Write or Type Committee Name		
BRIDGE THE GA	AP PAC	
6. Name of Any Connected Org	anization, Affiliated Committee, Joint Fundraising Representative, or Leade	rship PAC Sponsor
Schneider, Bradley, S., ,	PO Box 1318	
_ 	Deerfield IL 60015 CITY STATE	ZIP CODE
Relationship: Connected O	organization Affiliated Committee Joint Fundraising Representative	eadership PAC Sponsor
 Custodian of Records: Identify books and records. 	y by name, address (phone number optional) and position of the person in p	ossession of committee
Mailing Address	Vickie, L., , PO Box 83142 Gaithersburg MD 20883	
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer		947 0278
3. Treasurer: List the name and a any designated agent (e.g., ass	address (phone number optional) of the treasurer of the committee; and the r istant treasurer).	name and address of
Full Name Levy, Mark, A of Treasurer	.,, 	
Mailing Address	850 Ridgelee Road	
	Highland Park	
L	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	997 - 5363

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit box Name of Bank, De		
safety deposit box Name of Bank, De	es or maintains funds.	
safety deposit box Name of Bank, De	es or maintains funds. epository, etc. Congressional Bank	
safety deposit box Name of Bank, De	es or maintains funds. epository, etc. Congressional Bank	54
safety deposit box Name of Bank, De	es or maintains funds. epository, etc. Congressional Bank 7963 Tuckerman Lane	54 ZIP CODE
safety deposit box Name of Bank, De	Pepository, etc. Congressional Bank 7963 Tuckerman Lane Bethesda CITY STATE	
safety deposit box Name of Bank, De Mailing Address	Pepository, etc. Congressional Bank 7963 Tuckerman Lane Bethesda CITY STATE	
safety deposit box Name of Bank, De Mailing Address	Pepository, etc. Congressional Bank 7963 Tuckerman Lane Bethesda CITY STATE	
safety deposit box Name of Bank, De Mailing Address	Pepository, etc. Congressional Bank 7963 Tuckerman Lane Bethesda CITY STATE	
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safety deposit box Name of Bank, De Mailing Address	Pepository, etc. Congressional Bank 7963 Tuckerman Lane Bethesda CITY STATE	