

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED  
FEC MAIL CENTER

2015 DEC 14 AM 11:37  
Office Use Only

1. NAME OF COMMITTEE (in full)



(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

RON COHEN FOR CONGRESS 2016

ADDRESS (number and street)

39270 PASEO PADRE PARKWAY #249



(Check if address is changed)

FREMONT

CITY ▲

CA

STATE ▲

94538

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address is changed)

RONCOHENFORCONGRESS2016@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address is changed)

WWW.RONCOHENFORCONGRESS2016.COM

2. DATE

12

09

2015

3. FEC IDENTIFICATION NUMBER ►

C00591784

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

RONALD H. COHEN

Signature of Treasurer

Ronald H. Cohen

Date

12

09

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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)

NOV 12 11 41 AM '15

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 RONALD H. COHEN

Candidate Party Affiliation REP Office Sought:  House  Senate  President State CA District 17

- (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> _____

NON-FEDERAL ORGANIZATION

Write or Type Committee Name

RON COHEN FOR CONGRESS 2016

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

RONALD H. COHEN

Mailing Address

40535 DOLORES PLACE

FREMONT

CA

94539-3636

Title or Position

CITY

STATE

ZIP CODE

CANDIDATE

Telephone number

510-621-5174

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

RONALD H. COHEN

Mailing Address

40535 DOLORES PLACE

FREMONT

CA

94536-3636

Title or Position

CITY

STATE

ZIP CODE

CPA

Telephone number

510-797-8661

NON-FINANCIAL CONTRIBUTION

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]

[Empty grid for Mailing Address line 4]

[Empty grid for Mailing Address line 5]

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.

BANK OF THE WEST

Mailing Address

39533 PASEO PADRE PARKWAY

[Empty grid for Mailing Address line 2]

FREMONT

CA

94538

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]

[Empty grid for Mailing Address line 4]

[Empty grid for Mailing Address line 5]

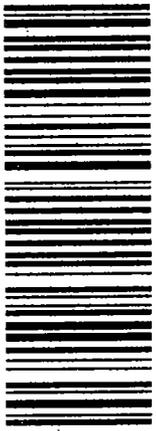
CITY

STATE

ZIP CODE

1-800-411-1414

GENERAL MAIL DIVISION



7014 2870 0000 7628 0617



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0004246314 DEC 09 2015  
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2015 DEC 14 AM 11:37

**REN COHEN**  
**GREENSTEIN, ROGOFF,**  
**GROCO OLSEN & CO., LLP**  
 39159 PASEO PADRE PARKWAY, #315  
 FREMONT, CA 94538-1600  
[www.groco.com](http://www.groco.com)

**FEDERAL ELECTION COMMISSION**  
 999 E. STREET N.W.  
 WASHINGTON, DC 20463

