Only

## STATEMENT OF

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**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. Cory PAC, Inc. 918 Pennsylvania Ave SE ADDRESS (number and street) (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS zamore@capcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00497131 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Judith Zamore Type or Print Name of Treasurer Judith Zamore [Electronically Filed] 12 2015 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

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Car	ndidate	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. (Compleinformation below.)	ete the candidate
Nam Can	e of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		, ,	Democratic, 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 organization on line 6.)	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)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee)	regated 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	raising 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.		
	2.		
	3.	FEC ID number C	
	4.		

FEC Form 1 (Revised	02/2009)	Page <b>3</b>
Write or Type Committee Nam		T age 0
Cory PAC, Inc.		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	rship PAC Sponsor
Cory A. Booker		
	PO Box 32237	
Mailing Address		
	Newark NJ 07102	
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative X L	eadership PAC Sponson
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	ntify by name, address (phone number optional) and position of the person in p	ossession of committee
Judith Zar	nore	
Full Name	Jest Pennsylvania Ave SE	
Mailing Address		
	Washington , DC , 20003	
	Washington DC 20003	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
3. <b>Treasurer:</b> List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the rassistant treasurer).	name and address of
Full Name Judith Zar	nore	
of Treasurer	1049 Departuração Ava CE	
Mailing Address	918 Pennsylvania Ave SE	
	Washington DC 20003	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	

Full Name of		
Designated Agent	Steven Haber	
Mailing Address	918 Pennsylvania Ave SE	
	Washington DC 20003	
		CODE
Title or Position Assistant Treas	surer Telephone number	
Banks or Other	r Depositories: List all banks or other depositories in which the committee deposits funds, holds acc	counts, rents
Name of Bank, I	Depository, etc.	
	Depository, etc.  Citibank  1721 Broad St	
Name of Bank, I	Depository, etc.  Citibank  1721 Broad St	
Name of Bank, I	Depository, etc.  Citibank  1721 Broad St	
Name of Bank, I	Depository, etc.  Citibank  721 Broad St  Newark  Number 197102	CODE
Name of Bank, I	Depository, etc.  Citibank  721 Broad St  Newark  NJ  07102  CITY  STATE  ZIP	
Name of Bank, I	Depository, etc.  Citibank  721 Broad St  Newark  NJ  07102  CITY  STATE  ZIP  Depository, etc.  Amalgated Bank	
Name of Bank, I	Depository, etc.  Citibank  721 Broad St  Newark  NJ  O7102  CITY  STATE  ZIP  Depository, etc.  Amalgated Bank  275 7th Ave	
Name of Bank, I	Depository, etc.  Citibank  721 Broad St  Newark  NJ  O7102  CITY  STATE  ZIP  Depository, etc.  Amalgated Bank  275 7th Ave	
Name of Bank, I	Depository, etc.  Citibank  721 Broad St  Newark  NJ  O7102  CITY  STATE  ZIP  Depository, etc.  Amalgated Bank  275 7th Ave	

## FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor **Booker Senate Victory** 918 Pennsylvania Ave SE Mailing Address 20003 Washington DC **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ ADDITIONAL ] Joint Fundraiser Participant С FEC ID number