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2013 FEB 11 AM 11: 09 FEC MAIL CENTER

FEBRUARY 7, 2013 VIA US PRIORITY MAIL Kurzon Er Congress 174 Mulberry St., H1 New York, NY 10013

FEDERAL ELECTION Commission 999 E Street, N.W. 11 11 WAS XINGTON, D.C. 20463

RE: Filing of forms I and 2

Door FEC:

Enclosed please find original FEL Forms I and a declaring my candidacy for the United States House of Representatives (NY-7).

Please contact me for any questions at 212-203-8918.

Thank you for your service.

Sincerely,

AMIZZ

JEFFREY M. KURZON

CANDIDATE

KURZON FOR CONGRESS

13031040714

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

FORM 1			DRGAN	IZAII	ON		II AMII: 09
1. NAME OF COMMITTEE (in	full)		(Check if name is changed)		ample: If typing, type or the lines.	12FE4M5	ACITICO LUGO SINVER
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COMMITTEE'S E-MA	AL-ADDRESS	S		t egt e.e.	The Control of the Co	en de la companya de	
(Check if a	address i)	1.0.	FO@JE	FFKV	R.7,0,N,,C,0	M	
		Optiona	al Second E-Ma	il Address		"	•
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3. FEC IDENTIFIC	rtv/	/	► (C)	, <u>, , , , , , , , , , , , , , , , , , </u>	AMENDED (A)		
I certify that I have e	xamined this	Staten	nent and to the	best of my	knowledge and belie	f it is true, correct a	and complete.
Type or Print Name	of Treasurer	LÆ	SMARS	W.	KOHEN,	ĒSQ.	
Signature of Treasure	er	/ 		,		Date 0 Z	0 6 2013
NOTE: Submission of					bject/the person signir	-	he penalties of 2 U.S.C. §437g.
Office Use		-			For further informatio Federal Election Comm Toll Free 800-424-9530	ission	FEC FORM 1 (Revised 06/2012)

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYP	E OF C	COMMITTEE	
Cen	didate	Committee:	
. (a)	V	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. (Complet information below.)	e the candidate
Nam Cano	e of didate	J.E.F.F. K.U.R.ZO.N.	
	didale / Affiliati	ion DEM Office Sought: House Senate President	State Ny District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of didate		
Par	ty Con	nmittee:	
(d)			mocratic, publican, etc.) Party.
Poli	itical A	action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ted organization is a
		Corporation Corporation w/o Capital Stock	abor Organization
			_
		Membership Organization Trade Association C	ooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	gated fund or party
		In addition, this committee is a Lobeyist/Registrant PAC.	
		B	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	draising 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.	r more political
(h)	D	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Com	nmittees Participating in Joint Fundraiser	

	1.	O number	
	2.	FEC ID number C	r
	3.	FEC ID number	
	4.		

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٧	Vrite or Type Committee Nam	e						
	Name of Any Connected (Organization, Affilia	ted Committee	, Joint Fundra	ising Repr	esentative,	or Leadership	PAC Sponsor
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L					<u> </u>		1111	
	Mailing Address						1111	1111
		<u> </u>			1111			
		MIT						
			CITY			STATE	ZIP	CODE
	Relationship: Connecte	d Organization	Miliated Committ	ee Joint F	undraising	Representat	ive Leader	ship PAC Spons
			_					
7.	Custodian of Records: Ide books and records.	ntify by name, addre	ess (phone numb	oer optional)	and position	on of the pe	rson in posses	sion of committ
	Full Name TEF	F.R.E.Y. ME K.V.R.Z.O.N	AD KU	R1701				
	Mailing Address							
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	Title or Position		CITY			STATE	ZIP	CODE
	(C,A,N,D,), D,A,T,E			Tele	phone num	ber 2/	2-20	31-1891
8.	Treasurer: List the name an any designated agent (e.g.,		umber optiona	ıl) of the treas	urer of the	committee;	and the name	and address of
	Full Name of Treasurer	vard Ma	Kobe	N ₁ L L L	 . 			
	Mailing Address	67 EAS	T. 115	b Str	reet,	#7	0,3, , , ,	11111
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	·	M. K. W. Y.O.		<u> </u>	لب	W.Y.	1000	3
	Title or Position $[\mathcal{T}_{1}\mathcal{R}_{1}\mathcal{R}_{1}\mathcal{R}_{1}\mathcal{S}_{1}\mathcal{V}_{1}\mathcal{R}_{1}\mathcal{E}_{1}\mathcal{R}_{1}]$		CITY	Tele	ohone numi	STATE Der []_]	_	CODE - 6 4 4

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FEC Form 1 (Revise	d 02/2009)		Page 4
Full Name of Designated Agent	K. WIRLH		
Mailing Address	6,20 W. 1,4,3,5ª S.t., #	$\mathcal{J}_{\mathcal{B}_{\perp}}$	
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Title or Position	CITY	STATE	ZIP CODE
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safety deposit boxes or mai		tee deposits	funds, holds accounts, rents
Name of Bank, Depository,	eic.		
CHA	SE BANK	نطلط	
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	NEW YORK	W ₁ Y	10013-
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked JSPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED

(3/2005)