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FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED EC MAIL CENTER

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NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5			
LOUNG JEWI	SHI LEADERS	HIP PACILI				
ADDRESS (number and street)	120 W86 TH	IST APITI 11/	A			
(Check if address						
is changed)	WEW YORK	CITIF	MY 10024-			
COMMITTEE'S E-MAIL ADDRE		CITY	STATE ZIP CODE			
INFORYJLPAK	5101R1G-111	<u> </u>				
COMMITTEE'S WEB PAGE ADI	DRESS (URL)					
WMMY JL PACLO	RG					
COMMITTEE'S FAX NUMBER	·					
			:			
2. DATE 0 2 2	3 2009					
3. FEC IDENTIFICATION NUMBER CO0305607						
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)				
I certify that I have examined the		_	t is true, correct and complete.			
Type or Print Name of Treasure	Lawr	rence Scheer				
Signature of Treasurer	Jane W	<u> </u>	Date 01 23 2009			
•	·	may subject the person signing ON SHOULD BE REPORTED V	this Statement to the penalties of 2 U.S.C. §437g. /ITHIN 10 DAYS.			
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TYPE OF COMMITTEE Candidate Committee:	Page 2
(a) This committee is a principal campaign committee. (Complete the candidate information below.	ow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (C information below.)	complete the candidate
Name of Candidate	
Candidate Office Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(Mational, 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 i Trade Association	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party
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 to committees/organizations, at least one of which is an authorized committee of a federal candida	
(h) This committee collects contributions have fundacions avacance and dishurses and accordance	r two or more political
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds fo committees/organizations, none of which is an authorized committee of a federal candidate.	
committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser	
committees/organizations, none of which is an authorized committee of a federal candidate.	THIS I HOUSE STATE
committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser 1.	THE CHEST OF STATES OF STA
committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser 1.	
committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser 1.	
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W	rite or Type Committee Name	•	
6.	Name of Any Connected O	Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising I	Representative
Ш		<u> </u>	
Ш			
	Malling Address		
			.]-[]
		CITY STATE Z	IP CODE
	Relationship:		
	Connected Organization	: Affiliated Committee Leadership PAC Sponsor Joint Fundraising	Representative
	books and records.	Niffy by name, address (phone number optional) and position of the person in posse SAME AS TREASURER RENCIE SCHEER	
		VOO W86TH ST. APT. I.A.	• • • • • • • • • • • • • • • • • • •
	Mailing Address	1	· · · · · · · · · · · ·
		WELL YORK CETY WY VOOS	741_1 , , ,
	Title or Position	CITY STATE Z	IP CODE
	TREASURERY	CHAFR Telephone number 646-59	161-62041
	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	e and address of
	Full Name of Treasurer	RENCE SCHEER	لحبيب
	Mailing Address	1/20 W86TH ST. APT 1/1/A	
			ليبيين
		WEW YORK GFTY WY VOOS	لــــا-(4
	Title or Position		IP CODE
1	TREASURERY	/ CIFAIR Telephone number 646-54	6-6-204

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CITY

STATE

ZIP CODE

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Full Name of Designated Agent

Mailing Address

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DO The FEC added this page to the end of this filing to indicate how				
Hand Delivered	Date of Receipt			
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USPS Priority Mail	Postmarked			
Delivery Confirmation™ or Signature Confirmation™ Label				
USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date 2/23/99			
Next Business D	·			
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			
Other (Specify):	eipt or Postmarked			
W CV	2/24/29			
(3/2005)	DATE PREPARED			