FEC

Only

STATEMENT OF **ORGANIZATION**

RECEIVE

2013 JUN -5 AM 9: 04 FORM 1 NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Esther Pac 314 W. Lewis Ave. ADDRESS (number and street) (Check if address Phoenix 85003 is changed) CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) lbenson@esther-pac.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) .05 M / 01 P / 2013 Y Y DATE **FEC IDENTIFICATION NUMBER** IS THIS STATEMENT AMENDED (A) NEW (N) OR I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Marlene Waldfogel Type or Print Name of Treasurer Signature of Treasurer Date NOTE: Submission of false, enoneous, 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

Toll Free 800-424-9530

Local 202-694-1100

(Revised 02/2009)

| | FEC Fo | rm 1 (Revised 02/2009) | Page 2 |
|--------------|---------------------|---|---|
| | | OMMITTEE | |
| (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 |
| Name Cand | e of lidate | | |
| | lidate Affiliati | on Office Sought: House Senate President | State District |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | , |
| Name Cand | | | |
| Pari | ty Cor | nmittee: | |
| (d) | 1 | | emocratic, epublican, etc.) Party. |
| Poli | tical A | ction Committee (PAC): | |
| (e) | | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne | cted organization is a: |
| | | Corporation w/o Capital Stock | _abor Organization |
| | | Membership Organization Trade Association | Cooperative |
| | | In addition, this committee is a Lobbyist/Registrant PAC. | |
| (f) | abla | This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee) | egated fund or party |
| | | In addition, this committee is a Lobbyint/Registrant PAC. | |
| | | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | |
| Join | t Fund | Iraising Representative: | |
| (g) | П | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least une of which is an authorized committee of a federal capriidate. | or more political |
| (h) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two | or more political |
| | ليا | committees/organizations, none of which is an authorized committee of a federal candidate. | |
| | Com | mittees Participating in Joint Fundraiser | n, man kan kan kan ka |
| | 1. | FEC ID number C | |
| | 2. | FEC ID number C | |
| | 3. | FEC ID number C | ्रास्त्राम् । स्थानस्थानम् । स्रोत्राह्मस्य स्थानस्य सम्बद्धाः सर्वे । सम्बद्धाः स्थानस्य सम्बद्धाः । |
| | 4. | | |

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|--|---|-------------------------|--|--|--|
| Write or Type Committee Nam Esther Pac | | . 430 0 | | | |
| 6. Name of Any Connected | Organization, Affiliated Committee, Joint Fundralsing Representative, or Leade | rship PAC Sponsor | | | |
| | | | | | |
| | | | | | |
| Mailing Address | | | | | |
| | | | | | |
| | CITY STATE | ZIP CODE | | | |
| Relationship: Connecte | ed Organization Affiliated Committee Joint Fundraising Representative | _eadership PAC Sponsor | | | |
| Custodian of Records: Ide books and records. | entify by name, address (phone number optional) and position of the person in p | possession of committee | | | |
| Full Name | | | | | |
| Mailing Address | | | | | |
| | | | | | |
| | | | | | |
| Title or Position | CITY STATE | ZIP CODE | | | |
| Treasurer | Telephone number | | | | |
| | 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 Marlen | ne Waldfogel | | | | |
| Mailing Address | | | | | |
| | Parkland FL 3307 | 76 | | | |
| Title or Position Treasurer | | 2,3,41-15,1,8,4 | | | |

CITY

STATE

ZIP CODE

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310

C)

Mailing Address

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** 5/31/13 Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** 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): 6/5/13

DATE PREPARED

(3/2005)