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STATEMENT OF **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. GOODWERK PO BOX 81171 ADDRESS (number and street) (Check if address is changed) **CHICAGO** 60681 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS treasurer@goodwerk.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.goodwerk.org (Check if address is changed) DATE 2017 C00650861 FEC IDENTIFICATION NUMBER > 3. X 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. MIKVA ROSENBERG, JACOB, H, , Type or Print Name of Treasurer MIKVA ROSENBERG, JACOB, H,, [Electronically Filed] 07 19 2017 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 Only 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 Cand	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)			emocratic, 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 Wo Capital Stock	_abor 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 segrecommittee. (i.e., nonconnected committee)	egated 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.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number C	

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Write or Type Committee Na		r ago o
GOODWERK		
	I Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
-	- c.ga.c., ,a.c c, a.c a.c a.c a.c g	
NONE	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Joint Fundraising Representative	e Leadership PAC Sponsor
 Custodian of Records: Ic books and records. 	lentify by name, address (phone number optional) and position of the pers	on in possession of committee
	ROSENBERG, JACOB, H, ,	
Full Name	PO BOX 81171	
Mailing Address		
	CHICAGO	60681
Title or Position	CITY STATE	ZIP CODE
TREASURER	Telephone number	
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; ar ,, assistant treasurer).	nd the name and address of
	ROSENBERG, JACOB, H, ,	
of Treasurer	IPO BOX 81171	
Mailing Address		
	.0.110.4.00	.00004
		60681
Title or Position , TREASURER	CITY STATE	ZIP CODE
I I I I I I I I I I I I I I I I I I I	Telephone number	

1 20 1 01	m 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1 1
Name of Bank,	oxes or maintains funds. Depository, etc. BANK OF AMERICA	
	Depository, etc. BANK OF AMERICA 2 SOUTH MICHIGAN AVENUE	
Name of Bank,	Depository, etc. BANK OF AMERICA 2 SOUTH MICHIGAN AVENUE CHICAGO IL 60603	ZIP CODE
Name of Bank,	Depository, etc. BANK OF AMERICA 2 SOUTH MICHIGAN AVENUE CHICAGO CITY STATE	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. BANK OF AMERICA 2 SOUTH MICHIGAN AVENUE CHICAGO CITY STATE	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. BANK OF AMERICA 2 SOUTH MICHIGAN AVENUE CHICAGO CITY STATE Depository, etc.	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. BANK OF AMERICA 2 SOUTH MICHIGAN AVENUE CHICAGO CITY STATE Depository, etc.	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. BANK OF AMERICA 2 SOUTH MICHIGAN AVENUE CHICAGO CITY STATE Depository, etc.	ZIP CODE

: 97 'A = G7 9 @ G5 B9 CI G'H9 LHF 9 @ 5 H98 'HC' 5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

Consistent with the stipulated judgement in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raised in unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: