

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

JOE KAUFMAN FOR CONGRESS

ADDRESS (number and street) 2645 EXECUTIVE PARK DRIVE STE 512

(Check if address is changed)

WESTON

FL

33331

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

info@kaufmanforcongress.com

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.kaufmanforcongress.com

(Check if address is changed)

2. DATE

03 / 08 / 2012

3. FEC IDENTIFICATION NUMBER

C C00501205

4. IS THIS STATEMENT

X

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.

Type or Print Name of Treasurer Mrs. Ilene Rosenthal

Signature of Treasurer

Mrs. Ilene Rosenthal

[Electronically Filed]

Date

03 / 08 / 2012

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 Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate Joe Kaufman

Candidate Party Affiliation REP Office Sought: House Senate President State FL District 20

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, 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 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 segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - 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 for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C _____
2. _____ FEC ID number C _____
3. _____ FEC ID number C _____
4. _____ FEC ID number C _____

Write or Type Committee Name

JOE KAUFMAN FOR CONGRESS

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Joe Kaufman

Mailing Address 2645 Executive Park Drive

Ste 512

Weston FL 33331

Title or Position CITY STATE ZIP CODE

Candidate Telephone number 954 - 290 - 4501

8. 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 of Treasurer Mrs. Ilene Rosenthal

Mailing Address 2645 Executive Park Drive

Suite 512

Weston FL 33331

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 954 - 290 - 4501

Full Name of Designated Agent: Michael Jaffee
Mailing Address: 2303 Saint Andrews Rd
Hollywood, FL 33021
Title or Position: Assistant Treasurer
Telephone number: 954-270-1645

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Chase
Mailing Address: 1040 Weston Road
Suite 100
Weston, FL 33326

Name of Bank, Depository, etc.

Mailing Address: [Empty fields for address, city, state, and zip code]