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01/30/2023 21 : 28

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STATEMENT	OF
ORGANIZATI	ON

FORM 1	0	RGANIZ	ATION		
					Office Use Only
1. NAME OF COMMITTEE (in		(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Mike Feuer	for Congre	SS			1
		i i i i i			
ADDRESS (number and	d street)	entura Blvd.			
(Check if ac is changed)					
, J.	Encino			CA 9'	1436
	C	ITY A		STATE ▲	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS				
(Check if ac	ldress jane@	leidermanassoc	ciates.com		
is changed)	Ontional	Second E-Mail Ad			
	jane@	leidermanass	ociates.com		
COMMITTEE'S WEB I		RI)			
(Check if ac		kefeuerforcongress.c	om		
is changed)					
2. DATE 01	/ D D / Y 29	y y y 2023			
3. FEC IDENTIFIC	ATION NUMBER	C c	:00832402		
4. IS THIS STATEM		(N) OR	× AMENDED (A)		
L certify that I have ex	amined this Statem	ent and to the best	t of my knowledge and belief it	is true correct ar	d complete
Type or Print Name of	Treasurer Leiderm	ian, Jane, , ,			
	Leiderman, Jane, ,			M	/ D D / Y Y Y Y
Signature of Treasurer		,	[Electronically Filed]	Date 01	30 2023
NOTE: Submission of fa			may subject the person signing t TION SHOULD BE REPORTED		e penalties of 52 U.S.C. §30109
Office			For further information co		FEC FORM 1
Use Only			Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	on	(Revised 06/2012)

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5.	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) X 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 information below.)	candidate
	Name of Feuer, Michael, , , Candidate	
	Candidate DEM Office Sought: House Senate President	State CA District 30
	(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 Republican, Republican,	etc.) Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	Corporation Corporation w/o Capital Stock Labor Or	ganization
	Membership Organization Trade Association Cooperat	ive
	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 committee. (i.e., nonconnected committee)	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.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAG	C).

Joint Fundraising Representative:

(i) 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.
(j) 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.
2.

In addition, this committee is a Lobbyist/Registrant PAC.

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Write or Type Committee Name	

Mike Feuer for Congress

6.	Name of Any Cor NONE			rgan		ion,	АП	па	lea		om	mn	liee	', J'	oin		un	ura	ISII	ıg I	нер	pre	ser	11.21	ive	, o	r L	Jer	snij	рг		ן כי י	por	ISO	ſ
	Mailing Address																																		
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	Relationship:	Conne	ected	Orga	aniza	tion		A	ffilia	ateo	9 0	rga	niza	atio	n	C	J	oint	Fu	ndr	aisi	ng	Re	pre	sen	tativ	/e		Lea	ade	ershi	ip F	PAC	Sp	onsoi

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

Leiderman,	Jane, , ,
Full Name	
Mailing Address	16633 Ventura Blvd.
	Encino
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 323 - 655 - 4065

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	Leiderman, Jane, , ,
of Treasurer	
Mailing Address	16633 Ventura Blvd.
	Encino CA 91436
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
	Telephone number 323 - 655 - 4065

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Full Name of Designated Agent										ĺ									ĺ							1	
Mailing Address																											
																								L			
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Title or Position ▼																											
											Tele	eph	ione	e n	umł	ber				· [_							

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.

, First F	Republic Bank		
Mailing Address	888 S Flgueroa St,		
	Los Angeles	CA 9001	7
	CITY 🔺	STATE A	ZIP CODE ▲
Name of Bank, Depository	; etc.		
Mailing Address			