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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. Robert Kudler For Congress 4940 Merrick Road ADDRESS (number and street) (Check if address is changed) Massapequa Park 11762 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kudlerr@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 30 2019 C00732578 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. Kudler, Robert, , , Type or Print Name of Treasurer Kudler, Robert, , , [Electronically Filed] 12 2019 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

	<b>-</b>	4 (7)	5 0
		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • 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. (Con information below.)	nplete the candidate
Nam Cand	e of didate	Kudler, Robert, , ,	
	didate / Affiliation	on REP Office Sought: * House Senate President	State NY District 02
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 scommittee. (i.e., nonconnected committee)	egregated 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 troommittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.		
	4.		

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Write or Type Committee Na		, and the second
Robert Kudler	For Congress	
	d Organization, Affiliated Committee, Joint Fundraising Represent	tative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY	TE ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
Custodian of Records: I books and records.	dentify by name, address (phone number optional) and position of	the person in possession of committee
Kudler,	Robert, , ,	
Mailing Address	4049 Merrick Road	
-		
	Massapequa Park	11762
Title or Position	CITY STAT	E ZIP CODE
	Telephone number	516 - 404 - 0394
. <b>Treasurer:</b> List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the comr g., assistant treasurer).	nittee; and the name and address of
Full Name Kudler, of Treasurer	Robert, , ,	
Mailing Address	4049 Merrick Road	
	Massapequa Park	Y 11762
Title or Position	CITY STAT	E ZIP CODE
	Telephone number	516 - 404 - 0394

FEC Form		
Full Name of Designated Agent	Kudler, Robert, , ,	
Mailing Address	4940 Merrick Road	
	Massapequa Park  CITY  STATE  ZIP 0	CODE
Title or Position		
	Telephone number	
	xes or maintains funds.	counts, rents
Name of Bank, De		
Name of Bank, De	Citibank  2085 Merrick Road  Merrick  NY  11566	L CODE
Name of Bank, De	Citibank  2085 Merrick Road  Merrick  CITY  STATE  ZIP	
Name of Bank, Do	Citibank  2085 Merrick Road  Merrick  CITY  STATE  ZIP	
Name of Bank, Do	Citibank  2085 Merrick Road  Merrick  CITY  STATE  ZIP	
Name of Bank, Do	Citibank  2085 Merrick Road  Merrick  CITY  STATE  ZIP	
Name of Bank, Do	Citibank  2085 Merrick Road  Merrick  CITY  STATE  ZIP	