**FEC** 

Only

## STATEMENT OF

PAGE 1 / 4

**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. David Gokhshtein for Congress 99 Wall Street ADDRESS (number and street) (Check if address is changed) New York 10005 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dg@davidgokhshtein.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) davidgokhshtein.com (Check if address is changed) DATE 30 2019 C00710426 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. gokhshtein, david, , mr, Type or Print Name of Treasurer gokhshtein, david, , mr, [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

Local 202-694-1100

FEC For	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF CO		
Candidate	Committee:	
(a) <b>x</b>	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. (Corinformation below.)	nplete the candidate
Name of Candidate	gokhshtein, david, , mr,	
Candidate	Office Sonato Brosidant	State
Party Affiliation	on REP Sought: <b>X</b> House Senate President	District 01
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Com	nmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
	Corporation Wo 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 s committee. (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.)	
Joint Fund	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Comr	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC <b>Form 1</b> (Revised 02	/2009)	Page <b>3</b>
Write or Type Committee Name		. ago c
David Gokhshtei	n for Congress	
	ganization, Affiliated Committee, Joint Fundraising Representative, or Le	eadership PAC Sponsor
-	gamzanon, rumatea committee, some randraising representative, or Le	adership i No opolisor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected (	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. <b>Custodian of Records:</b> Identification books and records.	ry by name, address (phone number optional) and position of the person	in possession of committee
gokhshtein,	david, , mr,	
	99 wall street	
Mailing Address		
Į	new vork , NY , 10	0005
	new york NY 10	
Title or Position	CITY STATE	ZIP CODE
	917 Telephone number	_ 810 _ 9940
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and t sistant treasurer).	the name and address of
Full Name gokhshtein, o	david, , mr,	1
of Treasurer	99 wall street	
Mailing Address		
L		005
		7ID CODE
Title or Position	CITY STATE	ZIP CODE
	Telephone number 917	-  810   9940

FEC <b>For</b>	n 1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated	gokhshtein, david, , ,	
Agent  Mailing Address	99 wall street	
	new york NY 10005	
Title or Position		IP CODE
		10 – 9940
Mailing Address	Box 1432	
	Alexandria VA 22313	
	CITY STATE Z	IP CODE
Name of Bank,	Depository, etc.	
Mailing Address		
Mailing Address		
Mailing Address		