Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. ELEVENTH CONGRESSIONAL DISTRICT DEMOCRATIC COMMITTEE OF VIRGINIA 4104 DANIELS AVE #101 ADDRESS (number and street) (Check if address is changed) ANNANDALE 22003 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS les.halpern@gmail.com (Check if address is changed) Optional Second E-Mail Address rrifkind@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00267385 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. Rifkind, Rachel, , , Type or Print Name of Treasurer Rifkind, Rachel, , , [Electronically Filed] 04 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

ı	FFC: For	rm 1 (Revised 02/2009)	Page <b>2</b>			
TYPE	E OF C	OMMITTEE	i ago <b>z</b>			
Can	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. (Compleinformation below.)	ete the candidate			
Name Cand	e of lidate					
	lidate Affiliatio	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand	e of lidate					
Parl	ty Com	mittee:				
(d)	×	CTA ' ' DEM '	emocratic, epublican, etc.) Party			
Poli	tical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is			
		Corporation Wo Capital Stock	_abor Organization			
		Membership Organization Trade Association	Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	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			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

	FF0 F 1 /D :	4.02/2000)	Don: 3
\٨.	rite or Type Committee Nar		Page 3
		GRESSIONAL DISTRICT DEMOCRATIC COMMITTEE (	JE VIRGINIA
6.		Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	
	•	Organization, Anniated Committee, Joint Fundraising Representative, or Leadersin	p PAC Sporisor
N	ONE		
	Mailing Address		
		CITY STATE Z	IP CODE
	Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
'.	Custodian of Records: Ide	entify by name, address (phone number optional) and position of the person in posso	ession of committee
	Rifkind, I	Rachel, , ,	1
	Full Name	4104 Daniels Ave Apt 101	
	Mailing Address		
		Annandale , VA , 22003	
		Aillalidale	
	Title or Position	CITY STATE Z	P CODE
	Treasurer	Telephone number 703 – 94	9574
3.	<b>Treasurer:</b> List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and the name, assistant treasurer).	e and address of
		Rachel, , ,	1
	of Treasurer	4104 Daniels Ave Apt 101	
	Mailing Address	<u> </u>	
		Annandale VA 22003	D CODE
	Title or Position , Treasurer		P CODE
		Telephone number 703 94	9574

FEC Form	<b>1</b> (Revised 02/2009)	Page <b>4</b>				
Full Name of Designated Agent	Halpern, Les, , ,					
Mailing Address	932 Elden St					
	Herndon VA 20170 CITY STATE ZIF	P CODE				
Title or Position Asst Treasurer		5 - 2891				
safety deposit bo	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.					
	BB&T					
Mailing Address	4401 Backlick Road					
	Annandale VA 22003					
	CITY STATE ZIF	P CODE				
Name of Bank, D	Depository, etc.					
Mailing Address						
	CITY STATE ZIF	P CODE				