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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. JewsChoose4MoreYears 5600 Wisconsin Ave #108 ADDRESS (number and street) (Check if address is changed) CHEVY CHASE 20815 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS cgreenwald1@verizon.net (Check if address is changed) Optional Second E-Mail Address cgreenwald1@verizon.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00756254 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. Greenwald, Carol, , MS, Type or Print Name of Treasurer Greenwald, Carol, , MS, [Electronically Filed] 01 25 2021 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

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	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Na		~9
JewsChoose4		
	d Organization, Affiliated Committee, Joint Fundraising Representat	tive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATI	E ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Repres	entative Leadership PAC Sponsor
7. Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of th	ne person in possession of committee
	vald, Carol, , MS,	
Full Name	5600 Wisconsin Ave #108	
Mailing Address		
	CHEVY CHASE , MD	, 20815
	CHEVICHASE	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	240 - 274 - 7810
8. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the commit., assistant treasurer).	ttee; and the name and address of
	rald, Carol, , MS,	
of Treasurer	5600 Wisconsin Ave #108	
Mailing Address	[
	OUEW OWAS	
	CHEVY CHASE MD	20815
Title or Position , Treasurer	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Telepho	one number	
safety deposit boxes or Name of Bank, Deposi	tory, etc.	committee deposits funds, n	olds accounts, rents
safety deposit boxes or Name of Bank, Deposi	r maintains funds. tory, etc. nTrust 5418 Wisconsin Ave		
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc. Trust	committee deposits funds, n	
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc. nTrust 5418 Wisconsin Ave		
safety deposit boxes or Name of Bank, Deposit Sur Mailing Address	r maintains funds. tory, etc. Trust 5418 Wisconsin Ave Chevy Chase CITY	MD 2081	5
safety deposit boxes or Name of Bank, Deposit Sur Mailing Address	r maintains funds. tory, etc. Trust 5418 Wisconsin Ave Chevy Chase CITY	MD 2081	5
Safety deposit boxes or Name of Bank, Deposit Sur Mailing Address Name of Bank, Deposit Name of Bank, Deposit	r maintains funds. tory, etc.	MD 2081 STATE	5
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc.	MD 2081 STATE	5
Safety deposit boxes or Name of Bank, Deposit Sur Mailing Address Name of Bank, Deposit Name of Bank, Deposit	r maintains funds. tory, etc.	MD 2081 STATE	5