FEC

08/16/2022 11 : 25

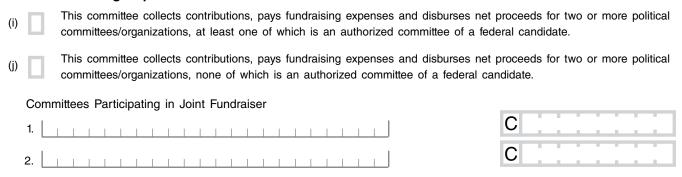
PAGE	1 /	4

STATEMENT OF ORGANIZATION

FORM 1			C	Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Cohn for Congre	ss 2022			1
ADDRESS (number and street)	PO Box 33079			
 (Check if address is changed) 				
is changed)	Washington		DC 20	033
			STATE ▲	ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	ESS			
× (Check if address	admin@evanskatz.com	n		
is changed)				
	Optional Second E-Mail Add			
	<u> </u>			· · · · · · · · · · · · · · · · · · ·
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
2. DATE 08 1	2 / Y Y Y Y 2022			
3. FEC IDENTIFICATION N	UMBER ► C cc	00718650		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it i	is true, correct and	d complete.
Type or Print Name of Treasure	er Wood, Ken, , ,			
Signature of Treasurer	d, Ken, , ,	[Electronically Filed]	Date 08	/ D D / Y Y Y Y 16 2022
NOTE: Submission of false, erron		may subject the person signing th FION SHOULD BE REPORTED V		e penalties of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 03/2022)	Page 2
. 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 information below.)	the candidate
Name of Cohn, Alan, , , Candidate	
Candidate DEM Office Sought: House Senate President	State FL District 15
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
 (d) This committee is a (National, State or subordinate) committee of the Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.) 	an, etc.) Party
Corporation Corporation w/o Capital Stock Labor	r Organization
Membership Organization Trade Association Coop	erative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee. (i.e., nonconnected committee)	ated 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	PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	

Joint Fundraising Representative:



Relationship:

Connected Organization

	-																															
•	FEC Form 1 (Revised 0	2/200	9)																									Paç	ge S	3		
V	Vrite or Type Committee Name																															
	Cohn for Cong	res	s 2	202	22)																										
6.	Name of Any Connected Or						C	omn	nitte	ee,	Joi	nt F	un	dra	isir	ng	Rep	ores	sen	tati	ve	, oi	r L	eac	lers	shir	א פ	AC	Sp	on	soi	
	Mailing Address																			1												
							(CIT	Y 🔺	•								ę	STA	ΤE						ZI	P(COI	DE			

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

Joint Fundraising Representative

Leadership PAC Sponsor

Affiliated Organization

Woo	od, Ken, , ,		
Full Name			
Mailing Address	PO Box 33079		
	Washington		20033
	CITY 🔺	STATE 🔺	ZIP CODE
Title or Position ▼			
Treasurer		Telephone number	

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	Wood, Ken, , ,							
of Treasurer								
Mailing Address	PO Box 33079							
	Washington DC 20033							
	CITY ▲ STATE ▲ ZIP CODE ▲							
Title or Position ▼								
Treasurer 202 548 0880 Telephone number 1 <t< th=""></t<>								

FEC Form 1 (Revised 02	2/2009)				Page 4			
Full Name of Designated Agent								
Mailing Address								
			CITY A	STATE 🔺	ZIP CODE			
Title or Position ▼								
Telephone number -								

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.

Amalg	amated Bank		1
Mailing Address	1825 K Street		
	Washington	DC 2000	6
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE