Only

STATEMENT OF

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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. WFP IE Committee 81 Prospect Street ADDRESS (number and street) (Check if address is changed) Brooklyn 11201 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS arabb@levyratner.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) wfpiepac.org (Check if address is changed) DATE 08 2016 C00626861 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Boland, Mike, , , Type or Print Name of Treasurer Boland, Mike, , , [Electronically Filed] 09 25 2020 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

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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		. age 🗸
WFP IE Comn		
	d Organization, Affiliated Committee, Joint Fundraising Representation	ve, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Represe	ntative Leadership PAC Sponsor
7. Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of the	e person in possession of committee
	Mike, , ,	
Full Name	₁ 81 Prospect Street	
Mailing Address		
	Brooklyn	,11201
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
8. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee., assistant treasurer).	ee; and the name and address of
Full Name Boland,	Mike, , ,	
of Treasurer	81 Prospect Street	
Mailing Address		
	Brooklyn	11201
Title or Position	CITY STATE	ZIP CODE
	Telephone number	

1 LO 1 011	m 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Rabb, Alexander, , ,	
Mailing Address	80 8th Avenue	
3	8th Floor	
	New York NY 100	011
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	-
safety deposit b	r Depositories: List all banks or other depositories in which the committee deposits funds, oxes or maintains funds. Depository, etc.	notice docume, rome
safety deposit b Name of Bank,	oxes or maintains funds.	
safety deposit b	Depository, etc. Amalgamated Bank	
safety deposit b Name of Bank,	Depository, etc. Amalgamated Bank	
safety deposit b Name of Bank,	Depository, etc. Amalgamated Bank	
safety deposit b Name of Bank,	Depository, etc. Amalgamated Bank 275 7th Avenue	
safety deposit b Name of Bank,	Depository, etc. Amalgamated Bank 275 7th Avenue New York New York CITY STATE	001
safety deposit b Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 275 7th Avenue New York NY 100 CITY STATE	001 ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Amalgamated Bank 275 7th Avenue New York NY 100 CITY STATE	001 ZIP CODE
safety deposit b Name of Bank, Mailing Address	Depository, etc. Amalgamated Bank 275 7th Avenue New York NY 100 CITY STATE	001 ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Amalgamated Bank 275 7th Avenue New York NY 100 CITY STATE	001 ZIP CODE