PAGE 1 / 4

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. Rubando for Congress PO Box 1458 ADDRESS (number and street) (Check if address is changed) **Bowling Green** 43402 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS 14samac@gmail.com (Check if address is changed) Optional Second E-Mail Address ∣aidanjիs@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://nickrubando.com (Check if address is changed) DATE 2019 C00707943 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. Jeffers, McLean, , , Type or Print Name of Treasurer Jeffers, McLean, , , [Electronically Filed] 10 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 Only Local 202-694-1100

		-	
	Form 1 (Revised 02/2009)	Page 2	
	COMMITTEE ate Committee:		
(a) x)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)		
Name of Candidate	Rubando. Nick		
Candidate Party Affil	DEM	State OH District 05	
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate	e []		
Party C	ommittee:		
(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.	
Politica	I Action Committee (PAC):		
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected organization is a	
	Corporation Corporation w/o 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 se 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 Fu	indraising 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.	vo 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	
Co	ommittees Participating in Joint Fundraiser		
1.	. G		
2.	FEC ID number		
3.	FEC ID number		
4			

FEC Form 1 (Revised 02	2/2009)	Page 3
Write or Type Committee Name		
Rubando for Co	ngress	
6. Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or Leade	rship PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
Custodian of Records: Identi books and records.	ify by name, address (phone number optional) and position of the person in p	nossession of committee
Jeffers, McL	ean, , ,	
Full Name	PO Box 1458	
Mailing Address	l	
	Bowling Green OH 43402	
Title or Position	CITY STATE	ZIP CODE
Treasurer		494 - 2680
. Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the sistant treasurer).	name and address of
Full Name Jeffers, McL	ean, , ,	
of Treasurer	PO Box 1458	
Mailing Address		
Mailing Address		
Ividining Address	Pouling Croon	
	Bowling Green OH 43402 CITY STATE	ZIP CODE

LEC LOU	n 1 (Revised 02/2009)	Page 4
	II I (NEVISEU UZ/ZUUS)	raye 4
Full Name of Designated Agent		
Mailing Address		
•		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
safety deposit be Name of Bank, Mailing Address	Amalgamated Bank	
Maining Madress		
	1	
	Washington DC i	20006
	Washington DC CITY STATE	20006 ZIP CODE
Name of Bank,	CITY STATE	
Name of Bank, I	CITY STATE	ZIP CODE
Name of Bank, Mailing Address	CITY STATE Depository, etc.	ZIP CODE
	CITY STATE Depository, etc.	ZIP CODE
	CITY STATE Depository, etc.	ZIP CODE