Image# 201909199163409537				
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4 —
			O	ffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Arati for Congre	SS 			
ADDRESS (number and street)	PO Box 146			
(Check if address is changed)	1			
is changed)	Glen Rock		NJ 074	152
	CITY ▲	· · · · · · · · · · · · · · · · · · ·	STATE A	
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)	teamarati@gmail.com			
is changed)	Optional Second E-Mail Ad	dress		
	info@lykkellc.com			
COMMITTEE'S WEB PAGE A (Check if address is changed)	www.aratiforcongress.com			
	19 / Y Y Y Y 2019			
3. FEC IDENTIFICATION N		00713917		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined	this Statement and to the best	of my knowledge and belief	it is true, correct and	l complete.
Type or Print Name of Treasu	rer Coll, Rebecca, , ,			
Signature of Treasurer	l, Rebecca, , ,	[Electronically Filed]	Date 09	19 / Y Y Y Y 19 2019
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMAT	may subject the person signing		penalties of 2 U.S.C. §437g
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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F	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Can	didate	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. (Compl information below.)	ete the candidate
Name Cand		Kreibich, Arati, , ,	
	lidate Affiliatio	on DEM Office Sought: K House Senate President	State NJ District 05
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	ty Con	nmittee:	
(d)			Democratic, epublican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected 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 segmentation of the second sequence of the second	regated 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	Iraising 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
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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ī.

Write or Type Committee Name

Arati for Congress

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6.

Mailing Address									
	CITY	STATE	ZIP CODE						
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor									
 Custodian of Records: Iden books and records. 	ntify by name, address (phone number opti	onal) and position of the per-	son in possession of committee						
Lykke, LLC	2, , ,								
Full Name									
Mailing Address	PO Box 42601								
	I Washington		20015						

	Washington		
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		Telephone number	02 808 3482

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 of Treasurer	Coll, Rebecca, , ,
Mailing Address	
	Glen Rock
	CITY STATE ZIP CODE
Title or Position	Telephone number 202 808 3482

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FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																											
Mailing Address																											
]-[
	CITY							STATE ZIP CODE																			
Title or Position																											
													Tele	eph	one	e ni	umt	ber] – [

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.
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Wells	=argo		
Mailing Address	8302 Woodmont Avenue		
	Bethesda	MD 20814	
_	CITY	STATE 2	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE 2	ZIP CODE