Only

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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. Rapoport For Congress Committee 1567 Compton Rd ADDRESS (number and street) (Check if address is changed) Cleveland Heights OH 44118 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address alan0600@aol.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) Rapoport4Congress.com (Check if address is changed) DATE 2023 C00849182 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. Type or Print Name of Treasurer Rapoport, Alan, J,, Date 80 28 2023 Signature of Treasurer Rapoport, Alan, J,, NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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)

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	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 the candidate information below.)						
	Name of Candidate Rapoport, Alan, , ,						
	Candidate Party Affiliation  REP  Office Sought:  House  Senate President	State OH District 11					
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate						
	Party Committee:						
	(d) This committee is a (National, State or subordinate) committee of the Republican, e	etc.) Party					
Political Action Committee (PAC):							
	organization is a:						
	Corporation Corporation w/o Capital Stock Labor Org	ganization					
	Membership Organization Trade Association Cooperati	ve					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
	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:						
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
	Committees Participating in Joint Fundraiser						
	1						

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V	Write or Type Committee Name  Rapoport For Co	naress Committee			
6.	Rapoport For Congress Committee  Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	NONE				
	Mailing Address				
		CITY ▲	STATE	▲ ZIP CODE ▲	
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising Repres		
	Tiolationionip.	7 minated Organization	Commit analoging Hopros	2500055111p 1710 Oponios	
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Rapoport, A	Alan, J, ,			
	Full Name	1567 Compton Rd			
	Mailing Address				
		Cleveland Heights	OH	44118	
		CITY ▲	STATE	▲ ZIP CODE ▲	
	Title or Position ▼				
	Candidate		Telephone number	216 - 696 - 3636	
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  Rapoport, Alan, J, ,				
	of Treasurer	nan, J, , 			
	Mailing Address	1567 Compton Rd			
		Cleveland Heights	OH		
		CITY ▲	STATE	▲ ZIP CODE ▲	
	Title or Position ▼				
			Telephone number	216 696 - 3636	

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Full Name of Designated							
Agent							
Mailing Address							
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲				
	Telephone	number					
	<b>Depositories:</b> List all banks or other depositories in which the comrxes or maintains funds.	mittee deposits f	unds, holds accounts, rents				
Name of Bank, [	Name of Bank, Depository, etc.						
	Key Bank						
Mailing Address	4461 Mayfield Road						
	South Euclid	ОН	44121				
	CITY A	STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY ▲	STATE ▲	ZIP CODE ▲				