

FEC FORM 1

STATEMENT OF ORGANIZATION

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1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

JEFF RABINOWITZ FOR CONGRESS

ADDRESS (number and street)

9739 WATER FERN CIRCLE

(Check if address is changed)

CUMMINGS

CITY

FL

STATE

34211

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

JEFF1967@CFL.NY.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

poli

2. DATE

06 02 2017

3. FEC IDENTIFICATION NUMBER

0052774

4. 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

JEFF RABINOWITZ

Signature of Treasurer

*Jeff Rabinowitz*

Date

06 02 2017

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.

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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

2017 JUN 07 AM 7:37



Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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

Full Name

Jennifer G. Rabinowitz

Mailing Address

9738 WATER FERN CIRCLE

[Empty grid lines for address]

CLEMENT FL 34711

Title or Position

CITY

STATE

ZIP CODE

CANDIDATE

Telephone number

407-312-7446

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

Jennifer G. Rabinowitz

Mailing Address

9738 WATER FERN CIRCLE

[Empty grid lines for address]

CLEMENT FL 34711

Title or Position

CITY

STATE

ZIP CODE

CANDIDATE/Treasurer

Telephone number

407-312-7446

NON-PROFIT ORGANIZATION

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for 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.

TRUSTCO BANK

Mailing Address

12302 Roper Blvd

[Grid for Mailing Address Line 2]

Clemmont

FL

34711

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

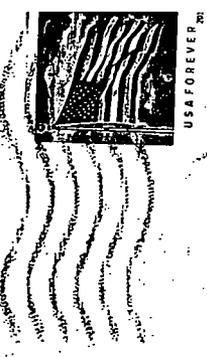
ZIP CODE

NON-PROFIT ORGANIZATION

Jeff Rabinowitz for Congress  
877 W Minneola Ave Suite 103  
Clermont FL, 34711  
democracy.com/jeff4congress

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Federal Election Commission  
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 The FEC added this page to the end of this filing to indicate how it was received.

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*ES*

PREPARER  
(3/2015)

**6/7/17**

DATE PREPARED

2017-06-07 09:00:00 AM EDT