Image# 202105179446832603			_	PAGE 1/4
FEC FORM 1	STATEMEI ORGANIZ			
1. NAME OF	(Check if name	Example:If typing, type		e Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
Carolyn Rush fo	r Congress			
	209 76th Street			
ADDRESS (number and street)				
is changed)				
	Sea Isle City └────────────────────────────────────		NJ 08243 STATE ▲	
	-		0	
COMMITTEE'S E-MAIL ADDR				
<ul> <li>(Check if address is changed)</li> </ul>	info@carolynrushforco	-		
	Optional Second E-Mail Ad  carolynrush33@gma	dress ail com		
<ul> <li>(Check if address is changed)</li> </ul>	carolynrushforcongress.com			
	17 <sup>y</sup> y y y y 2021			
3. FEC IDENTIFICATION N		00779843		
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 c	omplete.
Type or Print Name of Treasur	er Rush, Carolyn, , ,			
Signature of Treasurer	h, Carolyn, , ,	[Electronically Filed]	Date 05	17 <sup>Y</sup> 2021
NOTE: Submission of false, erro		may subject the person signing t ON SHOULD BE REPORTED W		enalties of 2 U.S.C. §437ç
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	on 🔽	EC FORM 1 (Revised 06/2012)

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	COMMITTEE
Candidat	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. (Complete the candidate information below.)
Name of Candidate	Rush, Carolyn, , ,
Candidate Party Affilia	tion DEM Office Sought: X House Senate President District 02
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.
Political /	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 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.)
Joint Fun	draising Representative:
(g)	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.
(h)	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.
Con	nmittees Participating in Joint Fundraiser
1.	
2.	FEC ID number
3.	FEC ID number
4.	

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Write or Type Committee Name

## Carolyn Rush 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 Representati	ive Leadership PAC Sponsor
books and records.	fy by name, address (phone number op	tional) and position of the per	rson in possession of committee
Rush, Carol	yn, , ,		
Mailing Address	209 76th Street		
	Sea Isle City	NJ	08243
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	09 238 5217

Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of 8. any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Rush, Carolyn, , ,
Mailing Address	209 76th Street
	Sea Isle City         NJ         08243
	CITY STATE ZIP CODE
Title or Position Treasurer	Image: Telephone number     609     238     5217

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Full Name of Designated		 	 	 	 		 	 												 					 	-
Agent																										]
Mailing Address																										
																							-[			
					CIT	ΓY								S	STA	TE					ZIF	C C	ODE	Ξ		
Title or Position																										
									-	Tele	epho	one	nı	ımb	er								- [			]

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.

TD Bar	<b>)k</b>									
Mailing Address	409 Route 9 N									
	Cape May Court House		08210							
	CITY	STATE	ZIP CODE							
Name of Bank, Depository, e	Name of Bank, Depository, etc.									
Mailing Address										
	CITY	STATE	ZIP CODE							