

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Wilneida NY-12 Committee

ADDRESS (number and street)

105 West 86th Street



(Check if address is changed)

PO Box #312

new york

CITY ▲

NY

STATE ▲

10024

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address is changed)

wilneida@gmail.com

Optional Second E-Mail Address

wilneida@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address is changed)

2. DATE

M M / D D / Y Y Y Y
11 / 17 / 2025

3. FEC IDENTIFICATION NUMBER ►

C C00927095

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 Zauberer, Jasmine, , ,

Signature of Treasurer Zauberer, Jasmine, , ,

Date

M M / D D / Y Y Y Y
11 / 17 / 2025

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

C

Write or Type Committee Name

Wilneida NY-12 Committee

6. 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 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 Zauberer, Jasmine, , ,

Mailing Address

65 West 85th Street

Apt. B

new york

NY

10024

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

184

543

0385

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 Zauberer, Jasmine, , ,

Mailing Address

65 West 85th Street

Apt. B

new york

NY

10024

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

184

543

0385

Full Name of
Designated
Agent

Negron, Rosalyn, , ,

Mailing Address

65 West 85th Street

Apt. B

new york

NY

10024

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

347

870

2123

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.

Chase

Mailing Address

535 Columbus Ave

New York

NY

10024

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲