Image#	201910289165302758	
image#	201910209100002700	

Only

Image# 201910289165302758			10/28/2019 13 : 31
	07475465		PAGE 1 / 4
FEC FORM 1	STATEMEN ORGANIZA		
			Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
Vote Gabi			
ADDRESS (number and street)	25428 Woodvilla Place		
(Check if address	1		
is changed)	Southfield		
			STATE A ZIP CODE A
COMMITTEE'S E-MAIL ADDR	ESS		
(Check if address is changed)	votegabi@yahoo.com		
	Optional Second E-Mail Add	ress	
	ebfaust@gmail.com		
COMMITTEE'S WEB PAGE AI			
<ul> <li>(Check if address is changed)</li> </ul>	www.votegabi.com		
	1		
2. DATE 10	D / Y Y Y Y 28 2019		
3. FEC IDENTIFICATION N	NUMBER ► C CO	0724799	
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)	
L certify that I have eveninged	this Statement and to the best of	of my knowledge and belief it i	s true correct and complete
i contry that i have examined		or my knowledge and belief it i	שישט, נטוופט מוט נטווטופוכ.
Type or Print Name of Treasur	er Faust, Elizabeth, , ,		
Signature of Treasurer	st, Elizabeth, , ,	[Electronically Filed]	Date 10 / 28 / 2019
NOTE: Submission of false, erro		nay subject the person signing th NN SHOULD BE REPORTED WI	is Statement to the penalties of 2 U.S.C. §437g. THIN 10 DAYS.
Office Use		For further information con Federal Election Commission Toll Free 800-424-9530	

Toll Free 800-424-9530

Local 202-694-1100

L

FE	EC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		COMMITTEE	
Cand	lidate	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. (Compinformation below.)	lete the candidate
Name Candid		Grossbard, Gavriel, , Mr.,	
Candid Party A		ion REP Office Sought: K House Senate President	State MI
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name Candid			
Party	/ Con	nmittee:	
(d)			Democratic, epublican, etc.) Party.
Politi	cal A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	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 seg committee. (i.e., nonconnected committee)	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.)	
Joint	Fund	draising 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.	o 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	

I

FEC Form 1 (Revised 02/2009)

Page 3

48075

Write or Type Committee Name

## Vote Gabi

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

Mailing Address				
		CITY	STATE	ZIP CODE
Relationship: Connect	ed Organization	Affiliated Committee	Joint Fundraising Representativ	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	entify by name, add	lress (phone number op	ptional) and position of the pers	son in possession of committee
Faust, El	lizabeth, , ,			
Full Name				
Mailing Address	16249 Hilton			

	Southfield		48075
Title or Position	CITY	STATE	ZIP CODE
Treasurer	Tele	phone number	248 808 3211

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	Faust, Elizabeth, , ,
Mailing Address	16249 Hilton
	Southfield
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number     248     808     3211

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Grossbart,	Milaine, , ,														1						
Mailing Address		25428 Woodvilla	_   _																			
		Southfield											MI			4	8075			- [		
			С	ITY									STATI	Ξ				ZI	P CC	DDE		
Title or Position Designated Age	nt 								Tele	ohon	e n	uml	ber		24	18		506		- [_	80	94

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.

Hu			
Mailing Address	20000 W 12 Mile Rd.		
	Southfield	MI	48076
	CITY	STATE	ZIP CODE
Name of Bank, Depos	itory, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE