STATEMENT OF

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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. Perry Gershon for Congress 20 Mile Hill Rd ADDRESS (number and street) (Check if address is changed) East Hampton 11937 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS pgershon@me.com (Check if address is changed) Optional Second E-Mail Address perry@perrygershon.com COMMITTEE'S WEB PAGE ADDRESS (URL) perrygershon.com (Check if address is changed) DATE 2018 C00650457 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. Abrams, Jason, , , Type or Print Name of Treasurer Abrams, Jason, , , [Electronically Filed] 12 2018 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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) Toll Free 800-424-9530 Only Local 202-694-1100

FE	EC Form 1 (Revised 02/2009)	Page 2
	OF COMMITTEE	
Cand	idate 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. (Cominformation below.)	nplete the candidate
Name Candid		
Candid Party A	late Affiliation Office Sought: House Senate President	State NY District 01
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name (Candid		
Party	Committee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politic	cal Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
	Corporation Wo 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 so committee. (i.e., nonconnected committee)	egregated 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 I	Fundraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Committees Participating in Joint Fundraiser	
	1. FEC ID number C	
	2.	
	3. FEC ID number	
	4.	

Write or Type Committee Name Perry Gershon for Congress 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponse Gershon Victory Fund Mailing Address Ste 143 Washington CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponse Affiliated Committee Abrams, Jason, , , Full Name Mailing Address Abrams, Jason, , , Full Name Mailing Address New York New York New York New York Title or Position CITY STATE ZIP CODE Treasurer Telephone number 917 - 940 - 75	FEC Form 1 (Revise	ed 02/2009)	Page 3
Perry Gershon for Congress 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spons. Gershon Victory Fund 611 Pennsylvania Ave. SE Mailing Address Ste 143 Washington CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spons. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Abrams, Jason, , , Full Name Abrams, Jason, , , Title or Position CITY STATE ZIP CODE Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason, , ,			<u> </u>
Gershon Victory Fund 611 Pennsylvania Ave. SE Mailing Address Ste 143 Washington CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Relationship: Abrams, Jason Full Name New York New York New York New York Title or Position CITY STATE ZIP CODE Relationship: Abrams and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason Full Name Abrams, Jason Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason	Perry Gershor	n for Congress	
Gershon Victory Fund 611 Pennsylvania Ave. SE Mailing Address Ste 143 Washington CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Abrams, Jason, Full Name Abrams, Jason, Title or Position CITY STATE ZIP CODE Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason, . ,	-		r Leadership PAC Sponsor
Mailing Address Site 143 Washington CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Abrams, Jason, , , Full Name Abrams, Jason, , , Title or Position CITY STATE ZIP CODE Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason, , ,			, , , , , , , , , , , , , , , , , , , ,
Mailing Address Site 143 Washington CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. Leadership PAC Sp. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Abrams, Jason, , , Full Name New York NY 10019 Title or Position CITY STATE ZIP CODE Treasurer Telephone number 917 940 750 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer).	Gershon victory Fur	ια	
Mailing Address Site 143 Washington CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. Leadership PAC Sp. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Abrams, Jason, , , Full Name New York NY 10019 Title or Position CITY STATE ZIP CODE Treasurer Telephone number 917 940 750 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer).			
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Abrams, Jason, , , Full Name Mailing Address Mailing Address CITY STATE ZIP CODE Treasurer Telephone number 917 - 940 - 75 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer).	Mailing Address	611 Pennsylvania Ave. SE	
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Abrams, Jason, , , Full Name 280 West 54th Street Mailing Address New York NY 10019 Title or Position CITY STATE ZIP CODE Treasurer Telephone number 917 - 940 - 751 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason, , ,		Ste 143	
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Abrams, Jason, , , Full Name Abrams, Jason CITY STATE ZIP CODE Treasurer Telephone number 917 940 75 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer).		Washington DC	20003
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Abrams, Jason, , , Full Name Abrams, Jason, , , New York NY 10019 Title or Position CITY STATE ZIP CODE Treasurer Telephone number 917 940 751 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason, , ,		CITY STATE	ZIP CODE
Abrams, Jason, , , Full Name Abrams, Jason, , , Full Name Abrams, Jason, , , Abrams, Jason, , , New York New York CITY STATE ZIP CODE Treasurer Telephone number Telephone number Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason, , ,	Relationship: Connec	cted Organization Affiliated Committee X Joint Fundraising Representative	Leadership PAC Sponsor
Full Name 260 West 54th Street New York New York Title or Position CITY STATE ZIP CODE Treasurer Telephone number Telephone number Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason, , ,		dentify by name, address (phone number optional) and position of the per-	son in possession of committee
Mailing Address 260 West 54th Street New York		s, Jason, , ,	
New York Title or Position CITY STATE ZIP CODE Treasurer Telephone number Telephone number Telephone number Telephone number Abrams, Jason, , ,		260 West 54th Street	
Title or Position CITY STATE ZIP CODE Treasurer Telephone number Telephone number Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason, , ,	Mailing Address		
Treasurer Telephone number Telephone number		New York , NY	10019
Treasurer Telephone number Telephone number			
Telephone number — — — — — — — — — — — — — — — — — — —	Title or Position	CITY STATE	ZIP CODE
any designated agent (e.g., assistant treasurer). Full Name Abrams, Jason, , ,	Treasurer	91 Telephone number	7 940 7568
	. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; a g., assistant treasurer).	nd the name and address of
of Treasurer		s, Jason, , ,	1
260 West 54th Street		1260 West 54th Street	
Mailing Address	Mailing Address		
New York NY 10019			
CITY STATE ZIP CODE Title or Position Treasurer Telephone number		, 917	

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE Z	IP CODE
Title or Position		
safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, holds exes or maintains funds. Depository, etc. Amalgamated Bank	accounts, rents
safety deposit bo Name of Bank, D	Amalgamated Bank 275 7th Avenue	accounts, rents
safety deposit bo Name of Bank, D	Depository, etc. Amalgamated Bank	accounts, rents
safety deposit bo Name of Bank, D	Depository, etc. Amalgamated Bank 275 7th Avenue New York New York New York	accounts, rents
safety deposit bo Name of Bank, D Mailing Address	Depository, etc. Amalgamated Bank 275 7th Avenue New York CITY STATE Z	
safety deposit bo Name of Bank, D Mailing Address	Depository, etc. Amalgamated Bank 275 7th Avenue New York CITY STATE Z	
safety deposit bo Name of Bank, D Mailing Address	Depository, etc. Amalgamated Bank 275 7th Avenue New York CITY STATE Z	
Banks or Other safety deposit bo. Name of Bank, D. Mailing Address Mailing Address	Depository, etc. Amalgamated Bank 275 7th Avenue New York CITY STATE Z	
safety deposit bo. Name of Bank, D Mailing Address Name of Bank, D	Depository, etc. Amalgamated Bank 275 7th Avenue New York CITY STATE Z	
safety deposit bo. Name of Bank, D Mailing Address Name of Bank, D	Depository, etc. Amalgamated Bank 275 7th Avenue New York CITY STATE Z	