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STATEMENT	OF
ORGANIZATI	ON

FEC FORM 1		STATEMEN ORGANIZA			Office Use Only	PAGE 1 / 5 —
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
		1023 31st Street, NW				
ADDRESS (number an		Suite 530				
is changed)		Washington			20007	
				STATE ▲	ZIP	
COMMITTEE'S E-MA	IL ADDRES	S				
(Check if a is changed)		info@demmajorityforisra	ael.org			1
)	Optional Second E-Mail Add	ress			
COMMITTEE'S WEB	ddress	PRESS (URL)				
2. DATE 12	/ D 08	D / Y Y Y Y 2020				
3. FEC IDENTIFIC	ATION NU	MBER ► C co	0710848			
4. IS THIS STATEM	ENT	NEW (N) OR	× AMENDED (A)			
I certify that I have ex	kamined thi	s Statement and to the best of	of my knowledge and belief i	t is true, correct	and complete.	
Type or Print Name o	f Treasurer	Mellman, Mark, , ,				
Signature of Treasure	Mellma	an, Mark, , ,	[Electronically Filed]	Date 12	/ D D / 10	Y Y Y Y 2020
NOTE: Submission of f		ous, or incomplete information n ANY CHANGE IN INFORMATIC			the penalties of	2 U.S.C. §437g.
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FC (Revised (

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FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE OF C	OMMITTEE	
Candidate	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. (Com information below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	on Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		
(d)		(Democratic, Republican, etc.) Par
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or par
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	Iraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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 tw committees/organizations, none of which is an authorized committee of a federal candidate.	o 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	

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Write or Type Committee Name

DMFI PAC

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

Mailing Address										
	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.

Mellman,	Mark, , ,
Full Name	
Mailing Address	1023 31st Street, NW
	Suite 530
	Washington DC 20007
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number

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	Mellman, Mark, , ,			
Mailing Address	1023 31st Street, NW			
	Suite 530			
	Washington	DC	20007	
	CITY	STATE	ZIP C	ODE
	enn	JIAIL	211 0	JODL

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Full Name of Designated Agent																	1	1								1				
Mailing Address																														
				1																		L			1					
	CITY									STATE							ZIP CODE													
Title or Position																														
														Tele	eph	one	e ni	umt	ber											

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.

	Amalgamated Bank		
Mailing Address	1825 K St NW		
	Washington		
	CITY	STATE ZIP CODE	
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY	STATE ZIP CODE	

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raisedin unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: