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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Deb Goldberg for Congress Committee 37 Hyslop Rd ADDRESS (number and street) (Check if address is changed) **Brookline** 02445 MA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS gemma@chickmontanagroup.com (Check if address is changed) Optional Second E-Mail Address allison@chickmontanagroup.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.debgoldberg.com (Check if address is changed) DATE 2019 C00719567 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. Lacy, Julie, , , Type or Print Name of Treasurer Lacy, Julie,,, [Electronically Filed] 10 02 2019 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

	FEC Fo	orm 1 (Revised 02/2009) Page 2	
		COMMITTEE e Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Nam	ne of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)	
	didate	Goldberg, Deborah, , ,	_
	didate y Affiliatio	Office State	1A 4
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		Ш
Par	ty Con	nmittee:	
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Pa	rty.
Poli	itical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is	is a:
		Corporation Corporation w/o Capital Stock Labor Organization	1
		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 pa committee. (i.e., nonconnected committee)	rty
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	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.	
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		Ī

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Write or Type Committee Name		
Deb Goldberg fo	r Congress Committee	
	ganization, Affiliated Committee, Joint Fundraising Representative, or Lead	lership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected (Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Identifi books and records.	y by name, address (phone number optional) and position of the person in	possession of committee
, Martin, Gem	ma, W, ,	
Full Name		
Mailing Address		
Į		
l	Dedham MA 0202	6
Title or Position	CITY STATE	ZIP CODE
Asst Treasurer	Telephone number 781 –	686 9199
3. Treasurer: List the name and any designated agent (e.g., as:	address (phone number optional) of the treasurer of the committee; and the sistant treasurer).	name and address of
Full Name Lacy, Julie, , of Treasurer	, 	
Mailing Address	39 Kendall St	
L		
L	Brookline MA 0244	
Title or Position , Treasurer	CITY STATE	ZIP CODE

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Full Name of Designated	Martin, Allison, , ,	
Agent	. 202 Bonborn Pd	
Mailing Address	202 Bonham Rd	
	Dedham 02026	
	CITY STATE	ZIP CODE
Title or Position		_
	Telephone number	
COTOTIL MODOCO	avas ar maintains tunds	
safety deposit b Name of Bank,	oxes or maintains funds. Depository, etc. Citizens	, ,
Name of Bank,	Depository, etc. Citizens ,73 Tremont St	
	Depository, etc. Citizens ,73 Tremont St	
Name of Bank,	Depository, etc. Citizens ,73 Tremont St	
Name of Bank,	Depository, etc. Citizens 73 Tremont St	ZIP CODE
Name of Bank,	Citizens 73 Tremont St Boston CITY STATE	ZIP CODE
Name of Bank, Mailing Address	Citizens 73 Tremont St Boston CITY STATE	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Citizens 73 Tremont St Boston CITY STATE Depository, etc.	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. Citizens 73 Tremont St Boston CITY STATE Depository, etc.	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Citizens 73 Tremont St Boston CITY STATE Depository, etc.	ZIP CODE