

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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2023 JUL 18 AM 8:28

Office Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

MIRIAM L. FLISSER FOR CONGRESS

ADDRESS (number and street)

10 LOCKWOOD ROAD

☐

(Check if address
is changed)

SCARSDALE

CITY ▲

NY

STATE ▲

10583-5302

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐

(Check if address
is changed)

DRMIRIAMFORCONGRESS@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

2. DATE

07 / 12 / 2024

3. FEC IDENTIFICATION NUMBER ►

C00827147

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 HARVEY L. FLISSER

Signature of Treasurer

Harvey L. Flisser

Date

07 / 12 / 2023

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
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 03/2022)

5. TYPE OF COMMITTEE:

Candidate 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. (Complete the candidate information below.)

Name of Candidate

MIRIAM LEVITT FLISSER

Candidate Party Affiliation

REP

Office Sought:

☒

House

☐

Senate

☐

President

State

N.Y.

District

1.6

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)

☐

In addition, this committee is a Lobbyist/Registrant PAC.

☐

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

- (g) ☐ This committee is an independent expenditure-only political committee (Super PAC).

☐

In addition, this committee is a Lobbyist/Registrant PAC.

- (h) ☐ This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

☐

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

- (i) ☐ 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.

- (j) ☐ 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.

Committees Participating in Joint Fundraiser

1.

C

2.

C

NOV-07-18-03-0045789

MIRIAM L. FLISSER FOR CONGRESS

ZIP CODE ▲

1

HARVEY L FLISSER

10 LOCKWOOD ROAD

SCARSDALE

IN Y

10583 - 5302

ZIP CODE ▲

TREASURER

914-472-4198

HARVEY L. FLISSER

AS ABOVE

ZIP CODE ▲

1 1 1 1 - 1 1 1 1 - 1 1 1 1

Full Name of
Designated
Agent

Mailing Address

Title or Position ▼

Telephone number

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.

TD BANK

Mailing Address

PO BOX 739

SOUTH WINDSOR

CT

06074 - 0739

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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5(i) or (j). Joint Fundraising Participant:

1. _____
2. _____
3. _____
4. _____

FEC ID number

C _____

FEC ID number

C _____

FEC ID number

C _____

FEC ID number

C _____

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

Mailing Address

_____ - _____

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☐

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name _____

Mailing Address _____

_____ - _____

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number _____ - _____ - _____

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.

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

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Part # 156297-435 ARDB EXP 05/24

SHIP DATE: 14 JUL 23
ACTWT: 0.35 LB
CNO: 6990736/SSF02422

ORIGIN ID: NKA (914) 472-4198
MIRIAM L. FLISSER FOR CONGRESS
10 LOCKWOOD ROAD
SCARSDALE, NY 10583
UNITED STATES US

BILL CREDIT CARD

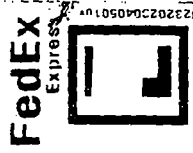
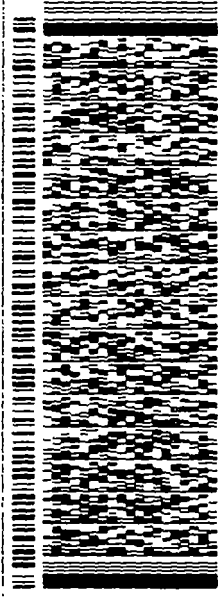
TO FEDERAL ELECTION COMMISSION

1050 FIRST STREET, N.E.

WASHINGTON DC 20002

REF: (000) 000-0000
YNU:
PO:

DEPT:

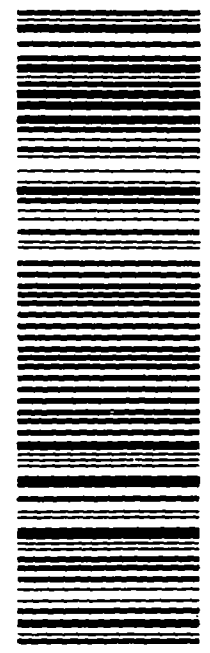


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Federal Election Commission
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| <i>Ben</i> PREPARER (4/2023) | <i>07-18-2023</i> DATE PREPARED |

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