PAGE 1 / 4 =

(Revised 06/2012)

FEC FORM 1			FEMEN SANIZA								'
							(Office Use	Only		
NAME OF COMMITTEE (ir	full)	(Check is char	if name nged)	Example: If typing, over the lines.	type	12FE	4M5				
Golden for	Congr	ess								1 1	
ADDRESS (number a	nd street)	PO Box 74									
(Check if a is changed	address	Ithogo				ND/	1.1	1054			
		Ithaca CITY ▲				STATE	L	l851 │	ZIP (- L CODE ₄	<u> </u>
COMMITTEE'S E-MA	AIL ADDRE	SS									
(Check if a is changed		brian@golde	enforcongre	ss.com							
		Optional Secon	nd E-Mail Addı	ress							
COMMITTEE'S WEB (Check if a is changed)	address	https://goldenfo	rcongress.com/								
2. DATE 1			Y								
3. FEC IDENTIFIC	CATION NU	JMBER ▶	C co	0649285							
4. IS THIS STATEM	MENT	NEW (N)	OR	x AMENDE	D (A)						
I certify that I have e	examined th	is Statement and	d to the best of	of my knowledge and	belief it is	true, co	orrect an	d compl	ete.		
Type or Print Name	of Treasure	Golden, lan, , ,									
Signature of Treasure	er <i>Golde</i>	n, Ian, , ,		[Electronically F	Filed] Da	ate	12	22		20	17
NOTE: Submission of	false, errone			nay subject the person N SHOULD BE REPO				e penalti	es of 2	2 U.S.C	. §437g.
Office Use				For further infor		act:		_	_	RM 1	

Toll Free 800-424-9530

Local 202-694-1100

Only

	FEC Fo	rm 1 (Revised 02/2009) Page 2
		COMMITTEE Committee:
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)
(b) Nam		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
	didate	Golden, lan, , ,
	didate / Affiliati	on DEM Office Sought: House Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Nam Cand	e of didate	
Par	ty Con	nmittee: (National, State (Democratic,
(d)		This committee is a committee of the Republican, etc.) Pa
Poli	tical A	action Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or pacommittee. (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.)
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	mittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	FEC ID number
	3.	FEC ID number
	1	

FEC Form 1 (Revised	1 02/2009)	Page 3
Write or Type Committee Nan		
Golden for Cor	naress	
	Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
NONE		
	<u> </u>	
Marking Address		
Mailing Address		
	CITY STATE	ZIP CODE
Deletienskie Z Co		_
Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Representat	Leadership PAC Sponsor
7. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the pe	rson in possession of committee
Golden,	lan, , ,	
Full Name	PO Box 74	
Mailing Address		
	, Ithaca	14851
Title or Position	CITY STATE	ZIP CODE
Candidate	Telephone number	
3. Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name Golden, I	an, , ,	
of Treasurer	PO Box 74	
Mailing Address		
	Ithaca NY	14851
	CITY STATE	ZIP CODE
Title or Position Candidate		1 1 1 1
	Telephone number	

FEC FORM 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit boxes Name of Bank, Dep		
Name of Bank, Dep		
Name of Bank, Dep	Amalgamated Bank 1825 K St NW	ZIP CODE
Name of Bank, Dep	Amalgamated Bank 1825 K St NW Washington CITY STATE	ZIP CODE
Name of Bank, Dep Mailing Address Name of Bank, Dep	Amalgamated Bank 1825 K St NW Washington CITY STATE	ZIP CODE
Name of Bank, Dep Mailing Address Name of Bank, Dep	Amalgamated Bank 1825 K St NW Washington CITY STATE Tompkins Trust Company	ZIP CODE