

FEC FORM 1

STATEMENT OF ORGANIZATION

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12FE4M5

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

Quality Public Schools PAC

ADDRESS (number and street)

1400 Fifth Avenue #THC1

(Check if address is changed)

New York

CITY

NY

STATE

10026

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

rescapti@gmail.com

Optional Second E-Mail Address

egrannis@grannislaw.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

None

2. DATE

10 / 15 / 2014

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)



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 Mark H. Goldey

Signature of Treasurer

Mark H. Goldey

[Handwritten Signature]

Date

10 / 15 / 2014

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.

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

FEC FORM 1 (Revised 06/2012)

11-00001-10001-10001

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 _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (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.)

Joint Fundraising 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.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

NON-PROFIT

Write or Type Committee Name

Quality Public Schools PAC

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

NONE

Mailing Address

CITY

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.

Full Name

Mark H. Goldey

Mailing Address

1400 Fifth Avenue #THC 1

New York

NY

10026

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

Mark H. Goldey

Mailing Address

1400 Fifth Avenue #THC 1

New York

NY

10026

Title or Position
Treasurer

CITY

STATE

ZIP CODE

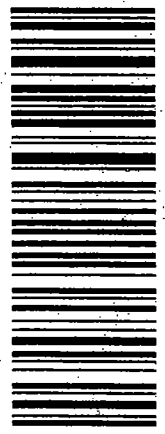
Telephone number

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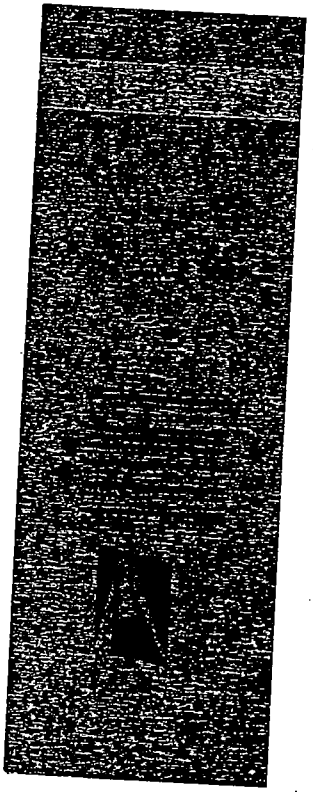
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CERTIFIED MAIL™

irk Goldey
9 W. 29th Street #1
New York, NY 10001-5



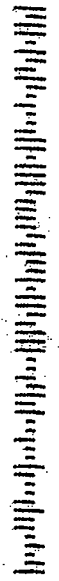
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER
(8/2013)

DATE PREPARED

FEDERAL ELECTION COMMISSION