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FEC FORM 1	STATEMENT O ORGANIZATIO		Office Use Only
1. NAME OF COMMITTEE (in fu		ble:If typing, type 12FE he lines.	4M5
Verma for C	ongress		
ADDRESS (number and s	treet) 618 N RIDGEWOC	••••••••••••••••••••••••••••••••••••••	
(Check if addre is changed)		FL	32114
	CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL	ADDRESS (Please provide only one e-mail addr Vermaforcongress	~	
COMMITTEE'S WEB PA (Check if add is changed)	lwww.γermaforcong	jreșș.com	
2. DATE 07	5 (2011)		
3. FEC IDENTIFICAT			
4. IS THIS STATEMEN		AMENDED (A)	
I certify that I have examined	nined this Statement and to the best of my kn	owledge and belief it is true, c	orrect and complete.
Type or Print Name of 1	reasurer Vipin Verma		······
Signature of Treasurer	Vipin Verma	Date	07 / 05 / 2011
NOTE; Submission of fals	e, erroneous, or incomplete information may subject ANY CHANGE IN INFORMATION SHOUL		
Office Use Only	Fe	or further information contact: aderal Election Commission Il Free 800-424-9530 ccal 202-694-1100	FEC FORM 1 (Revised 02/2009)

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FEC Form 1 (Revised 02/2009)

5.	TYPE	OFC	OMMITTEE
	Cane	didate	Committee:
	(a)	\mathbf{X}	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 Candi	-	
	Candi Party	idate Affiliatio	on DEM Office State FL Sought: House Senate President District 07
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi		
	Party	v Con	Imittee:
	(d)		This committee is a (National, State (Democratic, republican, etc.) Party.
	Polit	ical A	ction Committee (PAC):
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
	(0)		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 Lebbyist/Flegistrant PAC.
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
	Joint	Fund	raising 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	nittees Participating in Joint Fundraiser
		1.	
		2.	
		3.	FEC ID number
		4.	FEC ID number

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FEC	Form	1	(Revised	02/2009)
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Page 3

Write or Type Committee Name

Verma for Congress

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

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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					
Mailing Address	618 N RIDGEWOOD AV	E			
				<u></u>	
			<u>L</u> 3	2114	
	CITY	STAT	ſE	ZIP CODE	
Title or Position		Telephone number	386	-[675 <u>]</u> -[0	895

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FEC	Form	1	(Revised	02/2009)
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Banks or Other safety deposit bo Name of Bank, I	xes	or	m	ain	tair	ns				nks	or	oti	ner	de	po	sito	orie	s iı	n w	hic	h t	he	coi	mm	nitte	ee	de	pos	sits	fun	ıds,	, hc	olds	5 a	ccc	ouni	ts, I	ren	ts	
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BA	<u>NK OF AMERIÇA</u>	<u>, , , , , , , , , , , , , ,</u>
Mailing Address	<u>Ι</u> 3046,S,ΑΤĻΑΝΤΙC,ΑVĘ	
	[DAYTONA ΒΕΑCΗ SHORES	[FL] [32118,]-[
	CITY	STATE ZIP CODE
Name of Bank, Deposi	pry, etc.	
L		
Mailing Address		
	CITY	STATE ZIP CODE

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMI The FEC added this page to the end of this filing to indic	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked 7/6/11
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation [™] or Signature Co	nfirmation [™] Label
USPS Express Mail	Postmarked
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No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busin	ness Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Date of Other (Specify):	f Receipt or Postmarked
R	7/13/11
PREPARER (3/2005)	DATE PREPARED