Image# 12950663251 PAGE 1/4

FEC FORM 1		STATEN ORGAN													
4 NAME OF		(Observativity or see					_		Of	fice Us	se Only	/			_
NAME OF COMMITTEE (ir	n full)	(Check if nam is changed)		mple:If ty r the lines		9	12F	E4M	5						
VERMA FO	OR CC	NGRESS	1 1 1 1	1 1 1	1 1 1	1 1	1 1	1 1	1 1	1 1	ı	1 1	1 1	ı	l
											ı			ı	
ADDRESS (number a	nd street)	618 N RIDGEWOOD	AVE												
(Check if a															
is changed))	DAYTONA BEACH					FL		321	14]-L			
			CITY				STAT	E			ZIP C	CODE			
COMMITTEE'S E-MA	AIL ADDRES	S (Please provide only vermaforcongress@g		ldress)											
(Check if		Vermalorosing code g													
is change	ed)														
COMMITTEE'S WEB	PAGE ADD														
(Check if		www.vermaforcongres	s.com			1 1									
is change	d)														
2. DATE 02	M / D 1 2 28	2012													
3. FEC IDENTIFIC	CATION NU	MBER C	C004989	23											
4. IS THIS STATE	MENT X	NEW (N)	R	АМЕ	ENDED (A	A)									
I certify that I have e	examined thi	s Statement and to the	best of my	knowledge	e and bel	lief it i	s true,	corre	ct and	com	plete.				
Type or Print Name	of Treasurer	VIPIN VERMA													
Signature of Treasure	vipin v. er	ERMA		[Electron	ically File	d] [Date	0	2 /	2	28	Y	^y 201	Y Y Y 2]
NOTE: Submission of		ous, or incomplete inform			_	_				penal	ties of	f 2 U.S	S.C. {	§437g	
Office Use					er informat ection Com					FE(FC	ORN	1 1		_

	Office Use Only				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
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FE	:C Fo i	orm 1 (Revised 02/2009)	Page 2
		COMMITTEE	
		e Committee:	
(a)	X	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Completinformation below.)	e the candidate
Name of Candida		VIPIN VERMA	
Candida		Office	State
Party A	Affiliatio	ion DEM Sought: X House Senate President	District 06
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida			
Party	Con	nmittee:	
(d)		· · · · ·	mocratic, publican, etc.) Party.
Politic	cal A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	eted organization is a:
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization Trade Association	ooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	gated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.		
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	
VERMA FOR CONGRESS	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership F	AC Sponsor
NONE	
Mailing Address	
CITY STATE ZIP	CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leaders	ship PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possess books and records.	sion of committee
VIPIN VERMA	ı
Full Name 618 N RIDGEWOOD AVE	
Mailing Address	
DAYTONA BEACH , FL , 32114	
DATTONA BEACH	
Title or Position CITY STATE ZIP	CODE
Treasurer 386 675 Telephone number 1	_ 0895
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name a any designated agent (e.g., assistant treasurer).	and address of
Full Name VIPIN VERMA	ı
of Treasurer	
Mailing Address	
DAYTONA BEACH FL 32114	
Title or Position , Treasurer , 386 , 675	CODE
Telephone number	

FEC Form	n 1 (Revised 02/2009)	Page 4
Full Name of Designated	I	 _
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Mailing Address	Bank of America 3046 S ATLANTIC AVE DAYTONA BEACH SHORES FL 32118	
	DAYTONA BEACH SHORES FL 32118	
	CITY STATE	ZIP CODE
Name of Bank,	Depository, etc.	
Mailing Address		