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FLORIDA DEPARTMENT of STATE

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RICK SCOTT
Governor

KURT S. BROWNING
Secretary of State

August 25, 2011

Mr. Manny Yevancey (55363)
Candidate for United States Representative
201 NE 141 Street
North Miami, Florida 33161-2821

Dear Mr. Yevancey:

This will acknowledge receipt of your request to have your name placed on the Division's website as a candidate for the office of United States Representative, District 27. The *Compilation of the Florida Election Laws* is available on the Division of Elections' website at <http://www.elections.myflorida.com>.

Federal candidates should also contact the Federal Election Commission for further information on campaign finance. The website for the Federal Election Commission is www.fec.gov or call 1-800-424-9530.

If you have any questions, please contact Miguel Hernandez at (850) 245-6247.

Sincerely,

Kristi Reid Bronson, Chief
Bureau of Election Records

KRB/mah

850-487-1102

Division of Elections

R.A. Gray Bldg., Rm. 316 • 500 S Bronough St. • Tallahassee, Florida 32399-0250
Telephone: (850) 245-6240 • Facsimile: (850) 245-6260 elections.myflorida.com
Commemorating 500 years of Florida history www.fl500.com



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FEC FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

MANNY YE Vancey FOR U.S. CONGRESS DIST. 027

ADDRESS (number and street)

(Check if address is changed)

201 NE 141 STREET

NORTH MIAMI

FL

33161-2829

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

~~YEVA@AOL.COM~~

MANNYYEVANCEY@GMAIL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

MANNYYEVANCEY4U.S.CONGRESSDIST.027

2. DATE

09 10 2011

3. FEC IDENTIFICATION NUMBER

C 3

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

~~Manly Palacios~~

Manny Yevancey

Signature of Treasurer

Manny Yevancey

Date

01 09 2011

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.

| | | | | |
|-----------------|--|--|--|--|
| 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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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 MANNY YEVAUCEY FOR US CONGRESS 2012

Candidate Party Affiliation: **DEM** Office Sought: House Senate President State: **FL** District: **27**

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

Name of Candidate MANNY YEVAUCEY

Party Committee:

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

Political Action Committee (PAC): NONE

- (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: Don't have any

- (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 |

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Write or Type Committee Name

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

NONE

Grid lines for organization name

Mailing Address

Grid lines for mailing address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

NONE

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

MANNY YEVANCEY FOR CONGRESS 2012

Mailing Address

201 NE 141ST

NORTH MIAMI

FL

33161-2821

Title or Position

CITY

STATE

ZIP CODE

CANDIDATE

Telephone number

786-531-2328

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

MANNY YEVANCEY

Mailing Address

201 N. E. 141 ST

NORTH MIAMI

FL

33161

Title or Position

CITY

STATE

ZIP CODE

Telephone number

12030713445

Full Name of Designated Agent

MANNY YEVAUCEY FOR CONGRESS 2012

Mailing Address

201 N. E. 141ST.

NORTH MIAMI

CITY

FL

STATE

33161-2821

ZIP CODE

Title or Position

U.S. House District 027

Telephone number 786-531-2328

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.

META BANK MASTERCARD NETSPEND CORPORATION

Mailing Address

P.O. BOX 1868

AUSTIN

CITY

TX

STATE

78767

ZIP CODE

Name of Bank, Depository, etc.

NETSPEND DEBIT MASTERCARD

EXP 09-15 L145 Bank

Mailing Address

~~201 NE 141 ST~~

P.O. BOX 1868

~~NORTH MIAMI~~

AUSTIN

CITY

~~FL~~

TX

~~33161-2821~~

78767

ZIP CODE

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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| | |
|--|-------------------------------|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input type="checkbox"/> USPS First Class Mail | Postmarked |
| <input checked="" type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) 1/9/12 |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/> | |
| <input type="checkbox"/> USPS Express Mail | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| Next Business Day Delivery <input type="checkbox"/> | |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |

ASL
 PREPARER
 (3/2005)

1/23/12
 DATE PREPARED