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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. 12PE4M5

Castor for Congress

ADDRESS (number and street) ▼ PO Box 5419

☐ (Check if address is changed)

Tampa FL 33675-

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

813-837-3740

2. DATE 04 01 2005

3. FEC IDENTIFICATION NUMBER ▶ C

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 Amy Leigh Martin

Signature of Treasurer Amy Leigh Martin Date 04 01 2005

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 02/2003)

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