FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	(See instructions)	
	(See Instructions)	Office use only
NAME OF COMMITTEE (in f	(Check if name Example: If typying, is changed) over the lines	type 12FE4M5
UNITED STATE	ES BASEBALL PLAYERS FEDERAL PAC	
ADDRESS (number and s	Attn to: American Executive Center	
(Check if addre	110 East Broward Blyd. Suite 1700	
is changed)	Fort Lauderdale	FL 33301 -
COMMITTEE'S E-MAI	CITY <b>▲</b>	STATE▲ ZIP CODE ▲
	larose@live.com	
	PAGE ADDRESS (URL)	
www.usbigges	stpoliticalactioncommittees.com	
COMMITTEE'S FAX N 9544820073	UMBER	
2. DATE 0 2	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
3. FEC IDENTIFICA	TION NUMBER C C00456087	
4. IS THIS STATEM	ENT X NEW (N) OR AMENDE	D (A)
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is true,	correct and complete
Type or Print Name of	Treasurer JOSUE LAROSE	
Signature of Treasurer	Electronically Filed by JOSUE LAROSE	Date 0 2 / 0 3 / Y Y Y Y Y Y
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person signing	
Office Use Only	For further info Federal Election Toll Free 800-4 Local 202-694-	24-9530 (Revised 12/2007)
FE3AN042.PDF		

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5.	TYPE OF C	OMMITTEE (Check One) 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 t information below.)	he candidate				
	Name of Candidate						
	Candidate Party Affiliat	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 Comm						
	(d)	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.				
	Political Ac	Political Action Committee (PAC):					
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:				
		Corporation Corporation w/o Capital Stock La	bor Organization				
		Membership Organization Trade Association C	poperative				
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	Joint Fundra	aising 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 committees/organizations, none of which is an authorized committee of a federal candidate.	or more political				
	Com	mittees Participating in Joint Fundraiser					
		1. FEC ID number					
		2. FEC ID number					
		3. FEC ID number					
		4. FEC ID number					
		5   FEC ID number C					

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Write or Type Committee Name			
UNITED STATES BASE	BALL PLAYERS FEDERAL PAC		
6. Name of Any Connected O	rganization, Affiliated Committee, Leadership PAC Spo	onsor or Joint Fundrais	ing Representative
NONE			
Mailing Address			
	1		
	CITY	STATE ▲	ZIP CODE A
Relationship:			
Connected Organization	Affiliated Committee Leadership PA	C Sponsor Joint	Fundraising Representative
7. Custodian of Records: Id	lentify by name, address, (phone number option	nal) and position of th	e person in
possession of Committee		and position of the	o porcon in
Full Name JOSU	E LAROSE		
Mailing Address	PO BOX 9961		
	FORT LAUDERDALE	FL	33310 _
Title or Position ▼	CITY A	STATE	ZIP CODE A
CEO	Telepho	one number <b>954</b>	5316941
	e and address (phone number optional) of the tro y designated agent (e.g., assistant treasurer).	easurer of the commit	tee; and the
Full Name of Treasurer JOSU	E LAROSE		
Mailing Address	PO BOX 9961		
	FORT LAUDERDALE	FL	33310
Title or Position ♥	CITY A	STATE	ZIP CODE A
TREASU	RER Teleph	one number	_ 708 _ 7309

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Full Name of Designated Agent	JOSUE LAROSE			
Mailing Address	PO BOX 9961			
	FORT LAUDERDALE	FL	33310 –	
Title or Position ▼	CITY A	STATE A	ZIP CODE A	
CHAIR	<b>MAN</b> Te	lephone number 954	315 3892	
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.  TD BANK				
safety deposit boxes or m Name of Bank, Depositor	naintains funds. ry, etc.	e committee deposits funds, h	olds accounts, rents	
safety deposit boxes or m Name of Bank, Depositor	naintains funds. ry, etc.	e committee deposits funds, h	olds accounts, rents	
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safety deposit boxes or m Name of Bank, Depositor  TI  Mailing Address  Name of Bank, Depositor	ry, etc.  D BANK  7345 W. Oakland Park Blvd.  Fort Lauderdale  CITY   ry, etc.	FL STATE 4	33319   _   _   _   _   _   _   _   _   _	