

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (In full)  (Check if name is changed) Example: If typing, type over the lines.

12FB4M5

VALUES ARE VITAL

ADDRESS (number and street)

218 CAPE CORAL PKWY WEST

(Check if address is changed)

CAPE CORAL CITY ▲

FL STATE ▲

33914 ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

VALUESAREVITAL@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

12 / 13 / 2013

3. FEC IDENTIFICATION NUMBER ►

C00552422

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

Ronald M. Ficman

Signature of Treasurer

*R Ficman*

Date

12 / 13 / 2013

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 06/2012)

13031143884

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 \_\_\_\_\_

Candidate Party Affiliation  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 Committee:**

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

**Political Action Committee (PAC):**

- (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:**

- (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"/>
2.	_____	FEC ID number	<input type="checkbox"/>
3.	_____	FEC ID number	<input type="checkbox"/>
4.	_____	FEC ID number	<input type="checkbox"/>

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Write or Type Committee Name

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

Empty grid lines for organization name

Mailing Address

Empty grid lines for mailing address

CITY

STATE

ZIP CODE

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

13031143886

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

RONALD M FIRMAN

Mailing Address

247 SW 8TH STREET

#301

MIAMI FL 33130-

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

Empty grid lines for telephone number

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

RONALD M FIRMAN

Mailing Address

247 SW 8TH STREET

#301

MIAMI FL 33130-

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

786-320-3843

Full Name of Designated Agent

ANTHONY FARHAT

Mailing Address

210 CAPE CORAL PKWY WEST

CAPE CORAL FL 33914

Title or Position

CHAIRMAN

Telephone number

239-540-8400

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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.

FINEMARK NATIONAL BANK • TRUST

Mailing Address

12681 CREEKSIDE LANE

FORT MYERS FL 33919

Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE

13031143888

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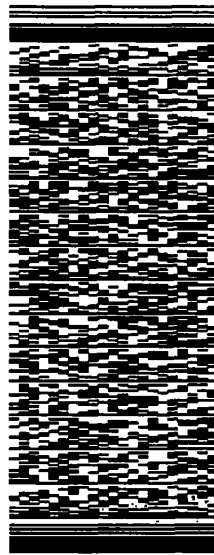
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FEDERAL ELECTION COMMISSION  
999 E STREET NW

WASHINGTON, DC 20463



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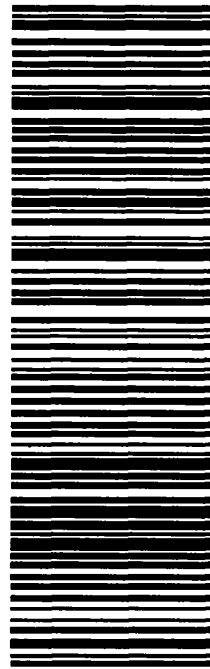
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*PAO*  
 PREPARER  
 (8/2013)

*12/20/13*  
 DATE PREPARED