FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED
FEC MAIL ROOM
2001 JUL -5 A 11:40

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Democratic Executive Committee of Florida

ADDRESS (number and street) ▼ 517 North Calhoun Street

☐ (Check if address is changed) P.O. Box 1758

Tallahassee FL 32302

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

lora@florida-democrats.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.florida-democrats.org

2. DATE 02 21 2001

3. FEC IDENTIFICATION NUMBER ▶ C00005561

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 Earl Scales

Signature of Treasurer Earl Scales Date 03 01 2001

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 1/01)

FE1ANOM.PDF

5. TYPE OF COMMITTEE (Check One)

(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

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

(e) ☐ This committee is a separate segregated fund.

(f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. **Name of Any Connected Organization or Affiliated Committee**

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization

☐ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

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: Lora Haggard

Mailing Address: P.O. Box 1759

Tallahassee | FL | 32302

Title or Position▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Compliance Officer

Telephone number 850 - 222 - 3410

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: Earl Scales

Mailing Address: P.O. Box 157

Weirsdale | FL | 32195

Title or Position▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer

Telephone number 352 - 821 - 2251

Full Name of Designated Agent

Mailing Address

Title or Position▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number

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.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Federal Election Commission

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JAQ
PREPARER

7/5/01
DATE PREPARED

(6/2000)

FEC FORM 1

STATEMENT OF ORGANIZATION

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Democratic Executive Committee of Florida

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☐ (Check if address is changed) P.O. Box 1758

Tallahassee FL 32302

CITY ▲ STATE ▲ ZIP CODE ▲

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lora@florida-democrats.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.florida-democrats.org

2. DATE 02 21 2001

3. FEC IDENTIFICATION NUMBER ▶ C00005561

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Type or Print Name of Treasurer Earl Scales

Signature of Treasurer Earl Scales Date 03 01 2001

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FEC FORM 1
(Revised 1/01)

FE1AN048.PDF

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Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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☐ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

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Full Name: Dora Haggard

Mailing Address: P.O. Box 1758

Tallahassee | FL | 32302

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Compliance Officer

Telephone number: 850 - 222 - 3411

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).

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Mailing Address: P.O. Box 157

Weirsdale | FL | 32195

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer

Telephone number: 352 - 821 - 2251

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Mailing Address:

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number: - -

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Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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DAQ — PREPARER

7/5/01 — DATE PREPARED

(6/2000)