

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED

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Office Use Only
FEC MAIL CENTER

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

ANGEL FOR CONGRESS 2012

ADDRESS (number and street)

2542 SW 187 STREET

☐

(Check if address
is changed)

KUTLER BAY

CITY ▲

FL

STATE ▲

33157

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐

(Check if address
is changed)

ANGEL@ANGELFERNANDEZ2012.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

WWW.ANGELFERNANDEZ2012.COM

2. DATE

06 / 06 / 2012

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

ANGEL FERNANDEZ

Signature of Treasurer

Date

09 / 27 / 2012

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 06/2012)

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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

ANGEL FERNANDEZ

Candidate Party Affiliation

IND

Office Sought:

☒ House☐ Senate☐ President

State

FL

District

26

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

12030892124

Write or Type Committee Name

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

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

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

ANGEL FERNANDEZ

Mailing Address

2542 SW 187 STREET

CUTLER BAY

FL

33157

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

786-457-5671

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

ANGEL FERNANDEZ

Mailing Address

2542 SW 187 STREET

CUTLER BAY

FL

33157

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

- - - - -

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Full Name of
Designated
Agent

NONE

Mailing Address

Title or Position

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.

COMMUNITY BANK OF FLORIDA

Mailing Address

18765 SOUTH DIXIE HIGHWAY

CUTLER BAY

FL

33157

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12030892126

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.

☐

Hand Delivered

Date of Receipt

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USPS First Class Mail

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USPS Priority Mail

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Delivery Confirmation™ or Signature Confirmation™ Label

☐☐

USPS Express Mail

Postmarked

☐

Postmark Illegible

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No Postmark

☐

Overnight Delivery Service (Specify):

Shipping Date

Next Business Day Delivery

☐☐

Received from House Records & Registration Office

Date of Receipt

☐

Received from Senate Public Records Office

Date of Receipt

☐

Received from Electronic Filing Office

Date of Receipt

☐

Other (Specify):

Date of Receipt or Postmarked



PREPARER

10/3/12

DATE PREPARED

(3/2005)

12030892127