

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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2006 JUL -5 A 9:06

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

PATLAK FOR CONGRESS

ADDRESS (number and street)

735 SECOND STREET, #6



(Check if address
is changed)

MIAMI BEACH

FL

33139

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

dpatlak@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.Vote Big Dave.com

COMMITTEE'S FAX NUMBER

305-531-1513

2. DATE

06

27

2006

3. FEC IDENTIFICATION NUMBER ►

C00397190

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

DAVID Y. PATLAK

Signature of Treasurer

David Y. Patlak

Date

06

27

2006

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 02/2003)

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

DAVID Y. "BIG DAVE" PATLAK

Candidate
Party Affiliation

DEM

Office
Sought:☒

House

☐

Senate

☐

President

State

FL

District

18

- (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

PATLAK FOR CONGRESS

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 DAVID Y. PATLAK
Mailing Address 221 COLLINS AVE. #1
MIAMI BEACH FL 33139-7120
Title or Position CANDIDATE CITY STATE ZIP CODE
Telephone number 305-519-4412

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 DAVID Y. PATLAK
Mailing Address 221 COLLINS AVE. #1
MIAMI BEACH FL 33139-7120
Title or Position TREASURER/CANDIDATE CITY STATE ZIP CODE
Telephone number 305-519-4412

Full Name of Designated Agent JOSEPH L. RUSCITO
Mailing Address 735 SECOND STREET #C
MIAMI BEACH FL 33139-
Title or Position ASSISTANT TREASURER CITY STATE ZIP CODE
Telephone number 305-531-1513

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.

WACHOVIA BANK, N.A.

Mailing Address

SOUTH BEACH FINANCIAL CENTER
555 WASHINGTON AVENUE SUITE A
MIAMI BEACH FL 33139

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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☐ Hand Delivered	Date of Receipt
☒ USPS First Class Mail	Postmarked <i>6/29/06</i>
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☐ 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	<i>7/5/06</i> DATE PREPARED

(3/2005)

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