

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 MAR -8 A 9 58

Mr. Herman G. Brass, Jr.
P. O. Box 471
Ft. Lauderdale, FL 33302

To whom it may concern:

I would like to order 16055, which includes the ID numbers for the following committees:

1. Advocates Champion of Causes
2. Keep the Hope and the Faith Alive
3. Home and Homeless Committee
4. Fly Us National

concerning

also special for

My interest lies within these four important committees. I would like information on these committees because I am going to be running for President of the United States. The Flybirds Party which I am promoting as an independent party, is also of great importance to me because it helps to improve the quality of life for individuals. Further information on the Flybirds party can be given upon request.

Thank you for your time.

Herman G. Brass, Jr.
Herman G. Brass, Jr.

In God We Trust

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL FLY National	☐ (Check if name is changed)	2. DATE 2/2/2000	RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM MAR -8 A 9 58
(b) Number and Street Address P.O. Box 471	☐ (Check if address is changed)	3. FEC Identification Number 33302	
(c) City, State and ZIP Code Panama Beach, FL 32302		4. Is This Report An Amendment? ☐ YES ☐ NO	

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
Herman G. Bragg | Candidate Party Affiliation
President of United States | Office Sought
President of United States | State/District
 |
|---|--|--|---------------------------|
- ☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee. (name of candidate)
- ☒ (d) This committee is a **FLY National** committee of the **FLY Bird** Party. (National, State or subordinate) (Democratic, Republican, etc.)
- ☐ (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 a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization

- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☒ Cooperative

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	Mailing Address	Title or Position
Herman G. Bragg Jr	P.O. Box 471	Custodian of Records

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	Mailing Address	Title or Position
Herman G. Bragg Jr	P.O. Box 471	Treasurer

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 and ZIP Code
United States Post offices Box	P.O. Box 471

Also mandatory reporting periodical

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 Herman G. Bragg Jr	SIGNATURE OF TREASURER Herman G. Bragg Jr	DATE 2/2/2000
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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.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-218-3420

FESANK44

FEC FORM 1
(revised 4/87)

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.



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3-8-00



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and Registration

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Records

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Other (Specify):

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and/or Date of Receipt



Electronic Filing

See

3-8-00

PREPARER

DATE PREPARED