Image# 11971765236				PAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ		Offi	ce Use Only
1. NAME OF	× (Check if name	Example:If typing, type	12FE4M5	
COMMITTEE (in full)	is changed)	over the lines.		
	MAILING ADDRESS :			
ADDRESS (number and street)	P. O. BOX 9961			
(Check if address is changed)			FL 3331	0
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE (Check if address is changed)	SS (Please provide only one e EconomistJosueLarose@g			
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)				
2. DATE 10 2	3 / Y Y Y Y Y 2011			
3. FEC IDENTIFICATION N	UMBER C C	00456566		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A))	
I certify that I have examined t	his Statement and to the best	of my knowledge and belie	ef it is true, correct and	complete.
Type or Print Name of Treasure	r JOSUE LAROSE			
Signature of Treasurer	E LAROSE	[Electronically Filed	Date 10	23 / Y Y Y Y Y 2011
NOTE: Submission of false, erron	eous, or incomplete information ANY CHANGE IN INFORMATI			enalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Comm Toll Free 800-424-9530 Local 202-694-1100	nission	FEC FORM 1 (Revised 02/2009)

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FFC F	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	. 490 =
	e 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. (Compl information below.)	ete the candidate
Name of Candidate		
Candidate Party Affiliat	ion 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 Co		
(d)		emocratic, epublican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is
	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 seg committee. (i.e., nonconnected committee)	regated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

UNITED STATES DEPARTMENT OF TRANSPORTATION EMPLOYEES SUPER PAC

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

N					
	Mailing Address				
		(CITY	STATE	ZIP CODE
	Relationship: Connected	Organization Affiliate	d Committee	draising Representative	Leadership PAC Sponsor
7.	Custodian of Records: Iden books and records.	tify by name, address (pł	none number optional) ar	nd position of the person	in possession of committee
	JOSUE LA	ROSE			
	Full Name				
	Mailing Address	P. O. BOX 9961			
					3310
	Title or Position	(CITY	STATE	ZIP CODE

	Telephone number	202	270	4433
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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	JOSUE LAROSE
of Treasurer	
Mailing Address	P. O. BOX 9961
	FORT LAUDERDALE FL 33310
	CITY STATE ZIP CODE
Title or Position	Telephone number 202 270 4433

Full Name of Designated Agent					
Mailing Address	P. O. BOX 9961				
		E 		FL 3337	
		CITY		STATE	ZIP CODE
Title or Position	VISER		Telephone nu	ımber 202 –	

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.

BANK			
Mailing Address	900 WEST SAMPLE ROAD		
		FL 33064	
	CITY	STATE ZIP CODE	
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE ZIP CODE	