FEC FORM 1	STATEMEN ORGANIZA (See instructions)	ΓΙΟΝ	Office	e use only
1. NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
LeftPAC				
ADDRESS (number and a	street)	Ve		
(Check if address is changed)	Weston			
	C	ITY	STATE	ZIP CODE 🔺
COMMITTEE'S E-MA (Check if address is changed)	L ADDRESS (Please provide only one e-ma	iladdress)		
COMMITTEE'S WEB (Check if address is changed)	PAGE ADDRESS (URL)			
2. DATE <b>0.3</b>				
<ol> <li>FEC IDENTIFICA</li> <li>IS THIS STATEM</li> </ol>		C00474643		
I certify that I have exami	ned this Statement and to the best of my knowle	dge and belief it is true, correct and	l complete	
Type or Print Name of	Treasurer Brian Franklin			
Signature of Treasurer	Electronically Filed by Brian Frank	in	Date <b>03</b> /	D 23 / Y Y Y Y 2010
NOTE: Submission of fa	se, erroneous, or incomplete information may su ANY CHANGE IN INFORMATIC			2 U.S.C. §437g.
Office Use Only		For further information cd Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		EC FORM 1 (Revised 02/2009)

	Page 2
5. TYPE OF COMMITTEE (Check One)	
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 information below.)	the candidate
Name of Candidate	
Candidate     Office       Party Affiliation     Sought:   House Senate President	State District
(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 connect	ted organization is a:
Corporation Corporation w/o Capital Stock	abor 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 segregate committee. (i.e., nonconnected committee)	ed fund or party
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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political

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

(h)

1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.	<u> </u>	FEC ID number	C

Title or Position ¥

Treasurer

FEC Form 1	(Revised 02	2/2009)		Page 3
Write or Type Comm	littee Name			
6. Name of Any Co	onnected Org	ganization, Affiliated Committee, Joint Fundraising	Representative, or Leade	rship PAC Sponsor
None				
Mailing Address				
		CITY	STATE 🛦	ZIP CODE 🔺
Relationship:	Organization	Affiliated Committee Joint Fundra	aising Representative	Leadership PAC Sponsor
	Committee	entify by name, address, (phone number opti books and records. Franklin	onal), and position of th	e person in
Mailing Address		16740 Waters Edge Drive		
		Weston	FL	33326 _
Title or Position	V	CITY A	STATE	
	Treasurer	Tele	phone number	
		and address (phone number optional) of the designated agent (e.g., assistant treasurer).	treasurer of the commit	tee; and the
Full Name of Treasurer	Brian I	Franklin		
Mailing Address		16740 Waters Edge Drive		
		Weston	<u>FL</u>	33326

STATE

Telephone number

954

ZIP CODE 🛦

4402

336

FEC Form 1 (Revise	ed 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Till of Decision M		
Title or Position ▼	CITY A	STATE 🛔 ZIP CODE 🛦
	T <sub>1</sub>	elephone number – –
Banks or Other Deposite	ories: List all banks or other depositories in which the aintains funds.	e committee deposits funds, holds accounts, rents
safety deposit boxes or ma Name of Bank, Depository	aintains funds. /, etc. IASE	e committee deposits funds, holds accounts, rents
safety deposit boxes or ma Name of Bank, Depository	aintains funds. /, etc. IASE	
safety deposit boxes or ma Name of Bank, Depository	aintains funds. /, etc. IASE	
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