

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
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2007 JUL 17 AM 9:25
Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

CLEVELAND STONEWALL DEMOCRATS PAC

C/O RED AN ORCHESTRA - JOHN FARINA

ADDRESS (number and street)

3615 EUCLID AV

(Check if address is changed)

SUITE 1C

CLEVELAND

OH

44115-

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

PAC@CLEVELANDSTONEWALLDEMOCRATS.ORG

COMMITTEE'S WEB PAGE ADDRESS (URL)

CLEVELANDSTONEWALLDEMOCRATS.ORG

COMMITTEE'S FAX NUMBER

____-____-____

2. DATE

____/____/____

3. FEC IDENTIFICATION NUMBER ▶

C00429910

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

JOHN FARINA

Signature of Treasurer

[Handwritten Signature]

Date

07 / 11 / 2007

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)

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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 _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (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

CLEVELAND STONEWALL DEMOCRATS _____

Mailing Address

PO. BOX 91453 _____

CLEVELAND _____ OH _____ 44001-3453 _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

CONNECTED _____

Type of Connected Organization:

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

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Write or Type Committee Name

CLEVELAND STONE WALL DEMOCRATS PAE

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

CITY

STATE

ZIP CODE

Telephone number

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

JOHN FARINA

Mailing Address

112020 LAKE AV
SUITE 507
LAKEWOOD

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

216-832-7106

Full Name of Designated Agent

JEFFREY ZEUMER

Mailing Address

2441 WEST 28TH
CLEVELAND

Title or Position

CITY

STATE

ZIP CODE

DEPUTY TREASURER

Telephone number

216-287-6354

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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.

NATIONAL CITY BANK

Mailing Address

PO BOX 5756

CLEVELAND OH 44101-0756

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

SW *7/17/07*
 PREPARER DATE PREPARED
 (3/2005)

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