

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

FASTUCA FOR CONGRESS

ADDRESS (Number and street)

6207 Hidden Lakes Dr

X (Check if address is changed)

KINGWOOD

TX

77345

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

gfastuca@fastucaforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.fastucaforcongress.com

COMMITTEE'S FAX NUMBER

2818607721

2. DATE ^M ^M / ^D ^N / ^Y ^Y ^Y ^Y
03 / 16 / 2004

3. FEC IDENTIFICATION NUMBER **C C00392019**

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 **Richard Leofsky**

Signature of Treasurer Electronically Filed by Richard Leofsky Date ^M ^M / ^D ^N / ^Y ^Y ^Y ^Y
06 / 16 / 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

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 202-894-1100

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 George Fastuca

Candidate Party Affiliation **REP** Office Sought: House Senate President State **TX** District **02**

- (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

None

Mailing Address _____

 _____ CITY STATE ZIP CODE

Relationship _____

Type of Connected Organization:

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

Write or Type Committee Name

FASTUCA 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 Richard Leofsky

Mailing Address 6207 Hidden Lakes Dr

Kingwood TX 77345 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 281 - 360 - 6760

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 Richard Leofsky

Mailing Address 6207 Hidden Lakes Dr

Kingwood TX 77345 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 281 - 360 - 6760

Full Name of Designated Agent Anthony Piraina

Mailing Address 4526 Windy Hollow Dr

Kingwood TX 77345 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number 281 - 361 - 3490

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.

Wells Fargo Bank Texas, N.A.

Mailing Address

4540 Kingwood Dr.

Kingwood

TX

77345 -

CITY Δ

STATE Δ

ZIP CODE Δ