

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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FEC MAIL CENTER

2008 NOV 26 AM 11:27

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

UNITED STATES MEDICAL DOCTORS FEDERAL PAC

ADDRESS (number and street)

929 SW 15TH STREET

(Check if address
is changed)

DEERFIELD BEACH FL 33441-6226

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

CELEBRITYJOSUELAROSE@USA.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.CELEBRITYPOLITICALACTIONCOMMITTEESDIRECTORY.COM

COMMITTEE'S FAX NUMBER

954-354-0514

2. DATE

11/17/2008

3. FEC IDENTIFICATION NUMBER

C00456566

4. IS THIS STATEMENT

NEW (N)

OR

X

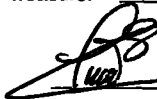
AMENDED (A)

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

JOSUE LAROSE

Signature of Treasurer



Date

11/17/2008

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 12/2007)

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5. TYPE OF COMMITTEE

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 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 _____

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 connected organization is a:

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

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

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 or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) 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

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C
5. _____ FEC ID number C

28039924640

Write or Type Committee Name

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

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

JOSUE LAROSE

Mailing Address

929 SW 15TH STREET

DEERFIELD BEACH FL 33441-6276

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

954-354-0328

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

JOSUE LAROSE

Mailing Address

929 SW 15TH STREET

DEERFIELD BEACH FL 33441-6276

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

954-708-7309

28039924641

Full Name of Designated Agent

JOSUE CAROSE

Mailing Address

929 SW 15TH STREET

DEERFIELD BEACH FL 33441-6276

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

954-354-0328

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.

WACHOVIA BANK

Mailing Address

400 EAST SAMPLE ROAD

LANTANA BEACH FL 33064

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

28039924642

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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<input type="checkbox"/> USPS Express Mail	Postmarked
<input checked="" 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

JmW
PREPARER
 (3/2005)

11/26/08
DATE PREPARED

28039924643