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Attorneys:

Michael A. Steinberg, Esq.
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Outside Tampa Call 800-875-8064

April 4, 2005

2005 APR 17 A 11:26
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FEC MAIL
OPERATIONS CENTER

VIA CERTIFIED MAIL: 91 7108 2133 3931 1826 3041

Federal Election Commission
999 E. Street N.W.
Washington DC 20463

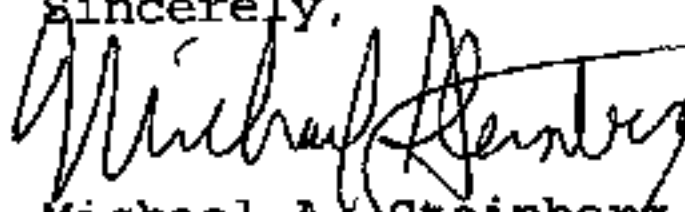
Dear Sirs:

Enclosed please find a Statement of Organization and Statement of
Candidacy form.

It would be appreciated if you would acknowledge receipt of the enclosed
and advise me of the committee's FEC identification number at your earliest
convenience.

Thank you for your consideration of the above and the enclosed.

Sincerely,


Michael A. Steinberg

25038781675

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2005 NOV 17 A 11:26

FEC
FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Michael Steinberg For Congress

ADDRESS (number and street)

1000 N Ashley Dr., Suite 520

☐

(Check if address
is changed)

Tampa

FL

33602

-3717

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

Steinberg2006@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.Steinberg2006.com

COMMITTEE'S FAX NUMBER

813-221-1702

2. DATE

04 / 01 / 2005

3. FEC IDENTIFICATION NUMBER ►

C

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 Lauren Hallahan

Signature of Treasurer

Lauren Hallahan

Date

04 / 01 / 2005

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)

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

Michael A. Steinberg

Candidate Party Affiliation

Dem.

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

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

Write or Type Committee Name

Michael A. Steinberg

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 Michael A. SteinbergMailing Address 1000 N. Ashley Dr. #520Tampa FL 33602 -

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

CandidateTelephone number 813 - 221 - 1300

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 Lauren HallahanMailing Address 1000 N. Ashley Dr. #520Tampa FL 33602 - 3717

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

TreasurerTelephone number 813 - 221 - 1300Full Name of Designated Agent Michael A. SteinbergMailing Address 1000 N. Ashley Dr.#520Tampa FL 33602 - 3717

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

CandidateTelephone number 813 - 221 - 1300

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.

Bank of America

Mailing Address

1249 S. Hyde Park Ave

Tampa FL 33606

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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.

☐ Hand Delivered	Date of Receipt
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	Next Business Day Delivery ☐
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
 PREPARER (3/2005)	4/17/05 DATE PREPARED

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