

**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

SPHERION PAC

ADDRESS (Home or street) 2050 Spectrum Blvd.

(Check if address is changed) Ft. Lauderdale FL 33309

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 10 / 11 / 2002

3. FEC IDENTIFICATION NUMBER C00318378

4. IS THIS STATEMENT X 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 Lisa G. Iglesias

Signature of Treasurer Electronically Filed by Lisa G. Iglesias Date 10 / 11 / 2002

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



Write or Type Committee Name

**SPHERION PAC**

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 **Lisa G. Iglesias**

Mailing Address **8925 Lake Park Circle South**

**Davie** **FL** **33328**

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 **Lisa G. Iglesias**

Mailing Address **8925 Lake Park Circle South**

**Davie** **FL** **33328**

Title or Position **CITY** **STATE** **ZIP CODE**

Telephone number

Full Name of Designated Agent

Mailing Address

**Davie** **FL** **33328**

Title or Position **CITY** **STATE** **ZIP CODE**

Telephone number

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.

\_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

CITY Δ STATE Δ ZIP CODE Δ

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