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2004 OCT 14 A 9 31

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation
YAFFA DERMER

(b) Address (number and street) Check, if different than previously reported
2525 Flamingo Place

(c) City, State and ZIP Code
Miami Beach FL 33140

3. FEC Identification Number
.....

2. Corporate filers only
N/A Is this filer a qualified nonprofit corporation? Yes No

Individual filers only
Name of Employer
Retired Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report 24-Hour Notice 48-Hour Notice

July 15 Quarterly Report 12-Day Report preceding the election. *
Type of Election: _____ Date of Election: _____ State: _____

October 15 Quarterly Report

January 31 Year-End Report 80-Day Report following the General Election. *
Date of Election: _____ State: _____

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM **07/15/2004** THROUGH **10/15/2004**

6. TOTAL CONTRIBUTIONS ... **\$ 2,260.40**

7. TOTAL INDEPENDENT EXPENDITURES ... **\$ 2,260.40**

Under penalty of perjury, I certify that the independent expenditures reported herein were not made in connection, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party, committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR FRONT NAME OF PERSON COMPLETING FORM: **YAFFA DERMER**

SIGNATURE: *Yaffa Dermer* DATE: **10/07/04**

NOTE: Submission of false, amended or incomplete information may subject the filer to a civil penalty for filing this report to the provisions of 2 U.S.C. 6477c.

For further information: 429901
Federal Election Commission, 800 E Street, N.W., Washington, D.C. 20543. Toll Free 800-424-6570. TDD 202-464-1533

SCHEDULE 5-A
ITEMIZED RECEIPTS

PAGE 1 OF 1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (in full)

YAFFA DERMER

A. Full Name (Last, First, Middle Initial)

DERMER, YAFFA

Date of Receipt

09/19/04 2004

Mailing Address

2525 Flamingo Place

City

Miami Beach

State

Zip Code

FL 33140

Amount of Each Receipt This Period

\$ 226,40

FEC ID number of contributing federal political committee

C

Name of Employer

Occupation

B. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee

C

Name of Employer

Occupation

Date of Receipt

Amount of Each Receipt This Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee

C

Name of Employer

Occupation

Date of Receipt

Amount of Each Receipt This Period

D. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee

C

Name of Employer

Occupation

Date of Receipt

Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (includes)

226,40

TOTAL This Period (last page carry over to Line 6)

226,40

REMARKS

FEC Schedule 5-A (Rev. 2/2003)

**SCHEDULE B-E
UNIDENTIFIED INDEPENDENT EXPENDITURES**

PAGE 01
OF
FOR LINE 7 OF FORM 8

NAME OF FILER (in Full) YAFFA DERMER	
Full Name (Last, First, Middle Initial) of Payee FORM Publishing Group, Inc.	Date 09/14/2004
Mailing Address 3115 NW 10th Terr. #102	Amount \$1,760.40
City Ft Lauderdale FL 33309	
Purpose of Expenditure Ad see attached	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure President Bush	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought N/A	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Full Name (Last, First, Middle Initial) of Payee FORWARD	Date 10/06/2004
Mailing Address 45 East 33rd Street Suite 602	Amount \$500.00
City New York, N.Y 10016	
Purpose of Expenditure Ad	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure President Bush	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought N/A	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City	
Purpose of Expenditure	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
(a) SUBTOTAL of Identified Independent Expenditures	2,260.40
(b) SUBTOTAL of Unidentified Independent Expenditures	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	2,260.40

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
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 10-8-04
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery 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
<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

ja
 PREPARER
 (5/2004)

10-14-04
 DATE PREPARED