STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. PAPPAS FOR CONGRESS 213 Silver Beach Avenue ADDRESS (number and street) (Check if address is changed) Daytona Beach FL 32118 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS pappasforcongress@gmail.com (Check if address is changed) Optional Second E-Mail Address gpappas@pappasrussell.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00593285 FEC IDENTIFICATION NUMBER > 3. X 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. Janine J Rinaldi Type or Print Name of Treasurer Janine J Rinaldi [Electronically Filed] 12 02 2015 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FEC F	Form 1 (Revised 02/2009) Page 2
	COMMITTEE te Committee:
(a) X	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 Steve Pappas
Candidate Party Affilia	otion DEM Office Sought: X House Senate President District FL
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee: (National, State (Democratic,
(d)	This committee is a committee of the committee of the committee of the committee is a committee of the commi
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
	In addition, this committee is a Lobbyist/Registrant PAC.
(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 Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fur	ndraising 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 committees/organizations, at least one of which is an authorized committee of a federal candidate. 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.
Co	mmittees Participating in Joint Fundraiser
1.	FEC ID number C
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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Write or Type Committee Name		
PAPPAS FOR C	ONGRESS	
6. Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
NONE		
Mailing Address		
	CITY STATE :	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
 Custodian of Records: Identi books and records. 	ify by name, address (phone number optional) and position of the person in poss	session of committee
Janine J Rir Full Name		
Mailing Address	213 Silver Beach Avenue	
	Daytona Beach FL 32118	
Title or Position	CITY STATE 2	ZIP CODE
Treasurer		254 - 2941
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the namesistant treasurer).	ne and address of
Full Name Janine J Rin	aldi	
Mailing Address	213 Silver Beach Avenue	
!		
	Daytona Beach FL 32118	
Title or Position Treasurer		ZIP CODE 2941

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Full Name of Designated Agent	Elizabeth Russell	
Mailing Address	213 Silver Beach Avenue	
	Daytona Beach CITY STATE Z	ZIP CODE
Title or Position Bookkeeper		254 - 2941
safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, holds uses or maintains funds.	accounts, rents
Sanks or Other safety deposit bo Name of Bank, Danke of Bank, Danke Mailing Address	xes or maintains funds.	accounts, rents
safety deposit bo Name of Bank, D	xes or maintains funds. Depository, etc. Wells Fargo Bank	accounts, rents
safety deposit bo Name of Bank, D	Daytona Beach Depository, etc. Wells Fargo Bank Daytona Beach FL 32118	accounts, rents ZIP CODE
safety deposit bo Name of Bank, D	Wells Fargo Bank 441 Seabreeze Blvd Daytona Beach CITY STATE	
safety deposit bo Name of Bank, E Mailing Address	Wells Fargo Bank 441 Seabreeze Blvd Daytona Beach CITY STATE	
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Wells Fargo Bank 441 Seabreeze Blvd Daytona Beach CITY STATE	
safety deposit bo Name of Bank, E Mailing Address	Wells Fargo Bank 441 Seabreeze Blvd Daytona Beach CITY STATE	
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Wells Fargo Bank 441 Seabreeze Blvd Daytona Beach CITY STATE	
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Wells Fargo Bank 441 Seabreeze Blvd Daytona Beach CITY STATE	