

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

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06 FEB 21

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THE SENATE OPERATIONS CENTER
PH 4:27 2006 FEB 21 A 9:33

Office Use Only

1. NAME OF
COMMITTEE (in full)

☐ (Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

TOM WEISS, DEMOCRAT FOR U.S. SENATE

ADDRESS (number and street)

40 WILLIAM WHITTINGHAM

☐ (Check if address
is changed)

780 CONCOURSE VILLAGE WEST APT 3D

BRONX

NY

10451-1399

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

tomcupfrontnews@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.tomweissdemocratforusenate.blogspot.com

www.tomcupfrontnews.blogspot.com

COMMITTEE'S FAX NUMBER

718-461-1442 phone 718-461-1441 T. Weiss 40 WHITTINGHAM

2. DATE

02/13/2006

3. FEC IDENTIFICATION NUMBER

0

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

THOMAS F. WEISS

Signature of Treasurer

THOMAS F. WEISS

Date

02/13/2006

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 202-684-1100

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

THOMAS F. WELLS

Candidate Party Affiliation

DEM

Office Sought:

☐

House

☒

Senate

☐

President

State

District

NY

- (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

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

THOMAS F. WEISS

Mailing Address

C/O WILLIAM WHITTINGHAM

780 CONGOURGE VILLAGE WEST APT 3D

BRONX NY 10451 NY 718-742-1004

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

PRESIDENT / TREASURER

Telephone number

718-742-1004

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

THOMAS F. WEISS

Mailing Address

C/O WILLIAM WHITTINGHAM

780 CONGOURGE VILLAGE WEST APT 3D

BRONX NY 10451 NY 718-742-1004

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

TREASURER

Telephone number

718-742-1004

ASSISTANT

TREASURER

ROHAN

INDREANAN

Full Name of
Designated
Agent

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

26020142932

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.

AMERICAN BANK OF NEW YORK

Mailing Address

111 UNION SQUARE WEST

NEW YORK

NY

10003

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

25020142953

T. Weiser
c/o WASHINGTON
780 Cascade Village West Apt 3-D
Brentwood, NY 10501

PLACE STAMP HERE OR AFFIX POSTAGE TO THE RIGHT
OF THE RETURN ADDRESS FOR MAIL TO THE POST OFFICE

CERTIFIED MAIL



7005 1820 0004 2678 7353

RETURN RECEIPT
REQUESTED

Federal Election Commission
999 E F. NW
Washington, D.C. 20543

ATT: Michael Lee Grant
Region America Finance
1975 Pennsylvania Avenue NW
Washington, DC 20006

05 FEB 21 PM 6:29
SECRETARY OF THE SENATE



25624102692

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL

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OVERNIGHT DELIVERY SERVICE:

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FEDERAL EXPRESS

☐

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☐

AIRBORNE EXPRESS

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Date of Receipt

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FAX

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OTHER

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PREPARER

RD

DATE PREPARED

02-21-06

26020142935

26020142938

