23037990965

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

RECEIVED
FEC MAIL
OPERATIONS CENTER

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Farber For Congress

ADDRESS (number and street) 8906 Jonathan Manor

☐ (Check if address is changed)

Orlando FL 32819

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

STFARBER3@CFL.RR.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 02/12/2003

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 STUART FARBER

Signature of Treasurer Stuart Farber, M.D. Date 02/12/2003

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 1/01)

FE1AN04E

5. TYPE OF COMMITTEE (Check One)

(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: Stuart Rose Father

Candidate Party Affiliation: REP

Office Sought: [X] House [ ] Senate [ ] President

State: FL

District: 08

(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

FEC Form 1 (Revised 1/01)

Write or Type Committee Name

Stuart Farber for Congress

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: Stuart Ross Farber

Mailing Address: 8906 Jonathan Manor

Orlando | FL | 32819-

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Custodian of Records | Telephone number 407-876-6725

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: Stuart Ross Farber

Mailing Address: 8906 Jonathan Manor

Orlando | FL | 32819-

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer | Telephone number 407-876-6725

Full Name of Designated Agent: Stuart Ross Farber

Mailing Address: 8906 Jonathan Manor

Orlando | FL | 32819-

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Designated Agent | Telephone number 407-876-6725

8. **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 7662 Dr. Phillips Blvd

Orlando FL 32819-

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 Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
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PREPARER

2-19-03
DATE PREPARED

(6/2000)