## 12030950058

## STATEMENT OF **ORGANIZATION**

RECEIVED 2012 NOV -5 AM 9: 35

			FEC	Patrice i Use Only
NAME OF     COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	CENTER
MISSOURI SEN	IATORIAL CAU	CUS	<u>.l., l., l., l., l., l., l., l., l., l.,</u>	
ADDRESS (number and street)	P. O. BOX 83	94		
(Check if address is changed)	DELRAY BEA	CH	FL 3	33482
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE  (Check if address is changed)		-mail address) SenatorialCauci	uses@yal	noo.com
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)				
2. DATE 10 <sup>™</sup> / 29	9° ′ 2012			
3. FEC IDENTIFICATION N	UMBER C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	his Statement and to the best	of my knowledge and belief	it is true, correct a	nd complete.
Type or Print Name of Treasure	RICHARD KI	EVINSTON		
Signature of Treasurer	Kuff		Date 10 <sup>th</sup>	´ 29° ´ 2012 `
NOTE: Submission of false, errone		may subject the person signing ON SHOULD BE REPORTED V		ne penalties of 2 U.S.C. §437g.
Office Use		For further information Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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		OMMITTEE			
Cen	didate	Committee:			
(a)		This committee is a principal campaign committee. (Complete the candidate information below	<i>i.</i> )		
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
Name Cand					
Cand Party	līdate Affiliatio	Office Sought: House Senate President	State District		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name Cand					
Parl	y Con	ımittee:			
(d)		(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.		
Poli	tical A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its $\infty$	onnected 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.			
<b>(f)</b>	$\times$	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	segregated fund or party		
		In addition, this committee is a Lobbyiat/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Join	t Fund	raising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political		
	Com	mittees Participating in Joint Fundraiser			
	1.				
	2.				
	3.	FEC ID number C			
	4.				

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Write or Type Comm		. 490
	SENATORIAL CAUCUS	
	nnected Organization, Affiliated Committee, Joint Fundralsing Representative, or	Leadership PAC Sponsor
NONE : : :		
		<u> </u>
Mailing Address		
	CITY STATE	ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Rec	cords: Identify by name, address (phone number optional) and position of the persons.	on in possession of committee
Full Name	RICHARD KEVINSTON	
Mailing Address	IP. O. BOX 8394	
•		
	DELRAY BEACH FL [FL]	33482
Title or Position	CITY STATE	ZIP CODE
GOVERNM	ENT RELATIONS DIRECTOR Telephone number [561]	
	name and address (phone number optional) of the treasurer of the committee; and ent (e.g., assistant treasurer).	d the name and address of
Full Name of Treasurer	RICHARD KEVINSTON	
Mailing Address	P. O. BOX 8394	
	DELRAY BEACH FL STATE	33482 ZIP CODE
Title or Position		_   945   _   2234

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Name of Bank, D	BB&T BANK  [6473,WEST ATLANTIC AVENUE]	
	DELRAY BEACH 13348	4
	CITY STATE	ZIP CODE
Name of Bank, D	Depository, etc.	
	<u> </u>	
Mailing Address	· <u> </u>	
	CITY STATE	ZIP CODE

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
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Delivery Confirmation <sup>™</sup> or Signature Confir	mation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	s Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
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PREPARER (3/2005)	DATE PREPARED
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