

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED
FEC MAIL
OPERATIONS CENTER

2006 AUG 14 A 8:12

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Maverick PAC USA

ADDRESS (number and street)

1014 Potomac

(Check if address is changed)

Houston

TX

77057

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

None

COMMITTEE'S WEB PAGE ADDRESS (URL)

None

COMMITTEE'S FAX NUMBER

2105993118

2. DATE

MM / DD / YYYY
08 / 05 / 2006

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

Murray H. Van Eman

Signature of Treasurer

Electronically Filed by Murray H. Van Eman

Date

MM / DD / YYYY
08 / 05 / 2006

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

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 02/2003)

26039164081

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 _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (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

26039164082

Write or Type Committee Name

Maverick PAC USA

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 James H. Lee

Mailing Address 1014 Potomac

Houston TX 77057

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Director

Telephone number _____

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 Murray H. Van Eman

Mailing Address 3530 Mary Mont Dr.

San Antonio TX 78217

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Attorney

Telephone number 210 - 860 - 8804

Full Name of Designated Agent _____

Mailing Address _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number _____

26039164083

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.

Wells Fargo Bank Texas

Mailing Address

1000 Louisiana

2nd Floor

Houston

TX

77002

CITY Δ

STATE Δ

ZIP CODE Δ

26059165097

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 <i>8-7-06</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature 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
Next Business Day Delivery <input type="checkbox"/>	
<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

<i>JMP</i> PREPARER	<i>8-14-06</i> DATE PREPARED
------------------------	---------------------------------

25039164085