29030061083

FEC FORM 1

STATEMENT OF **ORGANIZATION**

			2001 MAN Johns Res Multh 2 7
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
TEXIAS PICODI	uce Associ	ation Tex	PAC
	<u> </u>		
ADDRESS (number and street)	9.011 Busin	esisi Parik il	Arive Suite 500
(Check if address			
is changed)	Mission	لبسسسس	TV 178517.24-L
	,	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one e-	-mail address)	
(Check if address is changed)	<u> </u>	ing@msn:com	N
	L		
COMMITTEE'S WEB PAGE AD	DRESS (URL)		
V (Check if address			
(Check if address is changed)			
2. DATE DB' 2. 3. FEC IDENTIFICATION NO. 4. IS THIS STATEMENT	JMBER C D NEW (N) OR	0429217 X AMENDED (A)	
I certify that I have examined th	nis Statement and to the best	۰. ۵.	it is true, correct and complete.
Type or Print Name of Treasure	John M.	nc Clung	
Signature of Treasurer	En h Mec	lup'	Date 03 25 2009
	ous, or incomplete information		this Statement to the penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	

		OMMITTEE Committee:			
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)			
(b) Name	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the can information below.)				
Candio					
Candid Party	date Affiliatio	Office State on Sought: House Senate President District			
(c)	,	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name Candid					
Party	Com	nmittee:			
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.			
Politi	cal A	ction 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)	X	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	Fund	Iraising 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 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.			
	Com	mittees Participating in Joint Fundraiser			
	1.	FEC ID number C			
	2.	FEC ID number C			
	3.	FEC ID number C			
	4.	FEC ID number C			

FEC Form 1 (Revised 02/2009)	Page 3					
Write or Type Committee Name						
TEXAS Produce Association TEX PAC						
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor						
Mailing Address						
CITY STATE	ZIP CODE					
Delationabile Connected Co	alian I andorrhin DAC Consess					
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representa	ative Leadership PAC Sponsor					
 Custodian of Records: Identify by name, address (phone number optional) and position of the pi books and records. 	erson in possession of committee					
Full Name Dohin McClung						
Mailing Address 901 BUBINESS PAIR LOVILLE	<u> 5 wite 500 i</u>					
Mission IX	17857124-					
Title or Position CITY STATE	ZIP CODE					
THE OFF OSITION	ZIF GODE					
Telephone number	561-5811-18632					
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; any designated agent (e.g., assistant treasurer).	; and the name and address of					
of Treasurer John McClupq						
Mailing Address 901 BUSI ness PATILL Drive	Suit 5001					
1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Mission	118,57,2-1					
CITY STATE	ZIP CODE					
Title or Position Title Pasiure Telephone number	5.61-15.8.11-186321					
Telephone number	- (1/0/0/0) - (1/6/0) - (1/1/6/0)					

CITY

Page 4

ZIP CODE

STATE

FEC Form 1 (Revised 02/2009)

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Mailing Address

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Postmark Illegible			
No Postmark			
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Received from Electronic Filing Office	Date of Receipt		
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W	3/30/09		
(3/2005)	DATE PREPARED		