

2012 SEP 19 PM 2: 35

Committee Name:

UNITED STATES CAPITALISM PRESERVATION FUND If registered, FEC ID:

Today's Date:

09/14/2012

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

PAUL MARX

, Treasurer

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVE 7
2012 SEP 19 PM 12: 00
FEC MAIL CENTER

| FORM 1 | | ORG | ANIZA | 4110 | N | | | FEC Office Use | MAIL | CENTER |
|---|---------------|-------------------------------|------------------|-------------|---|-------------------|-----------|-------------------|-------------------|---------------|
| 1. NAME OF COMMITTEE (in | n full) | (Check | if name nged) | | ole:If typing, typ ne lines. | ^{De} 121 | FE4M5 | | | |
| UNITED S | TATES | CAPIT | ALISM | PRE | SERVA | TION | FUN | D | | لبي |
| ADDRESS (number a | nd street) | P. O. B | OX 613 | 3162 | | | | | | |
| (Check if an is changed) | | NORTH | MIAM | 11 | | F | <u>-</u> | 3326 | 1 1 | |
| | | | (| CITY | | STAT | E | Z | P CODE | Ē |
| COMMITTEE'S E-MA | AL ADDRES | S (Please provid | le only one e- | mail addre | ess) | | | | | |
| Charle if | : - dd | superpacsmanagement@gmail.com | | | | | | | | |
| (Check if is change | | سسا | | | | لللطط | | | 1-1-1 | |
| COMMITTEE'S WEB | PAGE ADD | RESS (URL) | | | | | | | | |
| (Check if is change | | <u> </u> | | | 11,11 | | | | | 1 |
| 2. DATE ÖS | | Ú ŽOŽ1Ž MBER | C | | | | | | | |
| 4. IS THIS STATE | MENT 🔀 | NEW (N) | OR | | AMENDED | (A) | | | | |
| I certify that I have of Type or Print Name | | | d to the best | - | owledge and b | elief it is true | , correct | and compi | ete. | |
| Signature of Treasure | er <u>f</u> E | Pul Bu | an | · | | _ Date | Ö9" | ′ 14′ | Ž | 0 1 12 |
| NOTE: Submission of | | us, or incomplet | | | | | | the penaltic | s of 2 U | .S.C. §437g. |
| Office Use Only | | | | Fe To | or further Information Co deral Election Co oll Free 800-424-9 ocal 202-694-1100 | mmission 530 | | | FORM sed 02/20 | |

| • | F | EC Fo | rm 1 (Revised 02/2009) | Page 2 | | | | | | |
|----|----------------------|-------------------|---|--|--|--|--|--|--|--|
| 5. | | | OMMITTEE | | | | | | | |
| | (a) | didate | Committee: This committee is a principal campaign committee. (Complete the candidate information below | <i>(</i>) | | | | | | |
| | • • | | This committee is an authorized committee, and is NOT a principal campaign committee. (Co | | | | | | | |
| | (b) | | information below.) | прине тие сапинате | | | | | | |
| | Name of Candidate | | | | | | | | | |
| | Candi | | Office | State | | | | | | |
| | Party | Affiliation | on Sought: House Senate President | District | | | | | | |
| | (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | | | | | | | |
| | Name Candi | | | | | | | | | |
| | Part | y Con | nmittee: | (Danasania | | | | | | |
| | (d) | | (National, State This committee is a or subordinate) committee of the | (Democratic, Republican, etc.) Party. | | | | | | |
| | Polit | ical A | ction Committee (PAC): | | | | | | | |
| | (e) | | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co | onnected organization is a: | | | | | | |
| | | | Corporation Corporation w/o Capital Stock | Labor Organization | | | | | | |
| | | | Membership Organization Trode Association | Cooperative | | | | | | |
| | | | In addition, this committee is a Lobbyist/Registrant PAC. | | | | | | | |
| | (f) | \times | This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., noncommected committee) | segregated fund or party | | | | | | |
| | | | In addition, this committee is a Lobbyist/Reglatrant PAC. | | | | | | | |
| | | | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | | | | | | | |
| | Joint | Fund | raising Representative: | | | | | | | |
| | (g) | П | 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) | $\overline{\Box}$ | This committee collects contributions, pays fundraising expenses and disburses net proceeds for | | | | | | | |
| | | Ш | 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 | | | | | | | |

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|---|---|--|--|--|--|--|--|
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| Write or Type Committee Nat | me | | | | | | |
| UNITED STATES CAPITALISM PRESERVATION FUND | | | | | | | |
| 6. Name of Any Connected | l Organization, Affiliated Committee, Joint Fundralising Representative, or Lead | ership PAC Sponsor | | | | | |
| NONE | | | | | | | |
| | | | | | | | |
| Mailing Address | | | | | | | |
| | | | | | | | |
| | CITY STATE | ZIP CODE | | | | | |
| Relationship: Connec | ted Organization Affiliated Committee Joint Fundraising Representative | Leadership PAC Sponsor | | | | | |
| Custodian of Records: Id books and records. | dentify by name, address (phone number optional) and position of the person in | possession of committee | | | | | |
| Full Name PAU | L MARX | | | | | | |
| Mailing Address | P. O. BOX 613162 | | | | | | |
| • | | | | | | | |
| | NORTH MIAMI | 261 | | | | | |
| Title or Position | CITY STATE | ZIP CODE | | | | | |
| EXECUTIVE DI | RECTOR Telephone number [786] | [763 _] - [7862 _] | | | | | |
| Treasurer: List the name a any designated agent (e.g. | and address (phone number optional) of the treasurer of the committee; and the ., assistant treasurer). | name and address of | | | | | |
| Full Name PAU of Treasurer | L MARX | | | | | | |
| Mailing Address | P. O. BOX 613162 | | | | | | |
| | | | | | | | |
| | NORTH MIAMI | | | | | | |
| Title or Position | CITY STATE Telephone number [786] - | ZIP CODE | | | | | |
| - | | | | | | | |

CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 02/2009)

Name of Bank, Depository, etc.

Mailing Address

Full Name of Designated

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. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label Postmarked USPS Express Mail** 9/18/12 Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** 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 or Postmarked Other (Specify):