12030784369

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 7

2012 APR 18 AM 11: 08

	•		1	Office Upg ONN CFHTER	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	Stagen de la com	
TEAMSTERSLC	ρ ς Α <u>Ι , ψη</u> Ι οη _{:1}# ,5	77, D, R. I, V, E.,			
ALFREDO SQL	rero _{i t} secretar	Y-TREASURER II			
ADDRESS (number and street)	1 201 N J	OHNSON I I I I I			
(Check if address	P.O. BOX 1609				
is changed)	<u> </u>		TX 7	9105 -	
		CITY	STATE	ZIP CODE	
COMMITTEE'S E-MAIL ADDRI	ESS (Please provide only one	e-mail address)			
(Check if address	teamsters577	@sbaglabalı.netı	11111		
is changed)			<u> </u>		
COMMITTEE'S WEB PAGE AI	DDRESS (URL)				
(Check if address is changed)	AND		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
2. DATE 0.4 13. FEC IDENTIFICATION N4. IS THIS STATEMENT 1	NUMBER C C	0. 16 7 2 7 0 AMENDED (A)			
I certify that I have examined	this Statement and to the bes	st of my knowledge and belief	it is true, correct	and complete.	
Type or Print Name of Treasur	er <u>Alfr</u> e	edo Soltero			
Signature of Treasurer	Open Al		Date 29	11312012	
NOTE: Submission of false, erreneous, or incomplete information may subject the parson 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 Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)	

5.

FEC Fo	rm 1 (Revised 02/2009)	Page 2				
	COMMITTEE					
Candidate Committee:						
(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. (Cominformation below.)	plete the candidate				
Name of Candidate		Baras a				
Candidate Party Affiliat	Office Sought: House Senate President	State District				
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
Party Cor						
(d)		(Democratic, Republican, etc.) Party.				
Political A	Action Committee (PAC):					
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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)	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 Fun	draising Representative:					
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political				
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political				
Con	nmittees Participating in Joint Fundraiser					
1.	FEC ID number	gan galanga sigan ga mga siga Noong sigan				
2.	FEC ID number C	on the state of th				
3.	FEC ID number	in the state of th				
4.	FEC ID number					

Į		
FEC Form 1 (Revise	ed 02/2009)	Page 3
Write or Type Committee N	ame	•
TEAMSTERS	LOCAL UNION #577 D.R.I.V.E.	
6. Name of Any Connecte	ed Organization, Affillated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
INTERNATIO	NAL BROTHERHOOD OF TEAMSTERS	
D R I .V . E	¢dmhilttee fund	
Mailing Address	125 Loutstana lavel livium	
	WA\$HINGTON DC	
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Repres	
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of t	he person in possession of committee
Full Name	GINNY DALLAS	
Mailing Address	201 N. JOHNSON J.	
	P.O. BOX 1609 1 1 1 1 1 1 1	
	AMARILLO TX	79105
Title or Position	CITY STATE	ZIP CODE
BOOKKEEPER	Telephone number	
8. Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the comm g., assistant treasurer).	ittee; and the name and address of
Full Name of Treasurer	AILFREDO_ SOLTERO	
Mailing Address	201 N. JOHNSON	
	R.O. BOX 1609	
	CITY STATE	79105 - ZIP CODE
Title or Position	TO THE CLIPTON OF THE CONTRACT	
SECRETARY=1	TREASURER Telephone number	1806 - 1373 - 4349 -

FEC Form 1 (Revised			Page 4			
TEAMS	TERS LOCAL UNION 7	\$577 D.R.I.V.E.				
Full Name of Designated Agent BRIA	N O. AHEARN					
Mailing Address	1 201 N. JOHNSON					
	P. Q. BOX 1609					
	AMARILLO	TX STATE	79105			
Title or Position PRESIDENT &	BU\$INESSIMGR.,	Telephone number [80	06 - 373 - 4349			
 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. 						
L, FI	ŖSŢ_BĄŊĸŢ_SQUŢĦŴĘ\$Ţ	<u> </u>				
Mailing Address	12401 St. GEORGIA	<u> </u>				
	P.O. BOX 32552	1 1 1 1 1 1 1 1 1 1				
	L, AMAR,ILLO	ITX.	79120			
	CITY	STATE	ZIP CODE			
Name of Bank, Depository, e	etc.					
ــــــا						
Mailing Address	<u> </u>					
	<u> </u>					
		ليا ليبيي	<u> </u>			
	CITY	STATE	ZIP CODE			

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** 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):

DATE PREPARED

(3/2005)