

2012 SEP 26 PM 12: 06

Committee Name:

AMERICAN CIVIL RIGHTS PROTECTION SUPER PAC If registered, FEC ID:

Today's Date:

09/24/2012

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:

JAMES LINCOLN

, Treasurer

FEC 'SM

STATEMENT OF

RECEIVED _ _ 2012 SEP 26 AM II: 29

FORM 1	OHAMIZATION			FEC MAIL CENTER Office Use Only		
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		mple:If typing, type r the lines.	12FE4M	5
AMERICA	N CIVI	L RIGHTS PI	ROTE	CTION SUP	ER PA	C
ADDRESS (number a	nd street)	P. O. BOX 1	172			
(Check if at is changed)		BOCA RATO	DN .		FL	33429
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MA (Check if is change	address	S (Please provide only one			FŲŅ ŅP /	ACS@GMAIL.COM
COMMITTEE'S WEB	PAGE ADD	RESS (URL)	•			
(Check if is change						
2. DATE ÖŞ)*	°′2012 °				
3. FEC IDENTIFIC	CATION NU	MBER C				
4. IS THIS STATE	MENT 🗵	NEW (N) OR		AMENDED (A)		
I certify that I have of Type or Print Name	of Treasurer	JAMES LIN		N P \		ct and complete.
NOTE: Submission of		ous, or incomplete informati	•			to the penalties of 2 U.S.C. §437g.
Office Use Only				For further Information co Federal Election Commissio Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

F	EC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
(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 Candi	-		
Candi Party	id ate Affiliatio	on Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Part	y Con	nmittee: (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party.
Polit	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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)	\boxtimes	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	egregated fund or party
		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 to 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number C	
	3.	FEC ID number C	
	4		

Par	10	3
T al	16	

Write or Type Committee Name						
AMERICAN CIVIL RIGHTS PROTECTION SUPER PAC						
6. "Name of Ariy'C	onfected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
NONE						
Mailing Address						
	CITY STATE ZIP CODE					
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor					
7. Custodian of Re books and record	cords: Identify by name, address (phone number - optional) and position of the person in possession of committee is.					
Full Name	JAMES LINCOLN					
Mailing Address	P. O BOX 1172					
	BOCA RATON FL 33429					
Title or Position	CITY STATE ZIP CODE					
EXECUTI	VE DIRECTOR Telephone number 561 - 945 - 3471					
	e name and address (phone number optional) of the treasurer of the committee; and the name and address of gent (e.g., assistant treasurer).					
Full Name of Treasurer	JAMES LINCOLN					
Mailing Address	P. O. BOX 1172					
	BOCA RATON FL 33429					
Title or Position	CITY STATE ZIP CODE R					
	Telephone number 301 - 3471					

CITY

Page 4

ZIP CODE

STATE

FEC Form 1 (Revised 02/2009)

Name of Bank, Depository, etc.

Mailing Address

203089059

(3/2005)

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): 9/26/14 DATE PREPARED