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## STATEMENT OF

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1. NAME OF COMMITTEE (in	n full)		Check if nan changed)			ole:If typing, t he lines.	уре	12FE4	M5				
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				СП	Y			STATE		ZIF	CODE		
COMMITTEE'S E-MA	NL ADDRES	S (Please	orovide only	one e-ma	il addr	9SS)							
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2. DATE ÖŞ	)°′22	°′ <b>Ž</b> 0	12 '										
3. FEC IDENTIFIC	CATION NU	MBER	(										
4. IS THIS STATE	MENT 🔀	NEW	(N) C	)R		AMENDED	) (A)			· · · · · · · · · · · · · · · · · · ·			
I certify that I have o	examined th	is Statemei	nt and to the	e best of	my kn	owledge and	belief it is	s true, co	rrect an	d comple	te.		
Type or Print Name	of Treasurer	DO	NALD	ROC	KE	FELLE	R						
Signature of Treasure	er _	Gong	eld g	Rock	ese	ler	C	Date	Ö9 <sup>°</sup>	′ <b>22</b> °	′Ž	0'12	¥
NOTE: Submission of			•			ct the paiceon of	-			penalties	of 2 U.	.S.C. §4:	37g.
Office Use Only			-		F	or further information (coll Free 800-424 ocal 202-694-110	Commission -9530		<del>- ,- ,-</del>	FEC (Revise	FORM		

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n<sub>e</sub>

Write or Type Committee Name							
UNITED STATES PRESIDENTIAL ELECTIONS FUND OF ALASKA  6. Name of Ainy Connected Organization, Affiliated Committee; Joint Fundraising Representative, or Leadership PAC Sponsor							
NONE							
Mailing Address							
maining radiess							
	CITY STATE ZIP CODE						
Relationship: Connect							
<ol> <li>Custodian of Records: Id books and records.</li> </ol>	entify by name, address (phone number - optional) and position of the person in possession of committee						
Full Name  Mailing Address	P. O. BOX 667313						
	POMPANO BEACH FL 33066						
Title or Position	CITY STATE ZIP CODE						
ADMINISTRATO	OR						
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	ALD ROCKEFELLER						
Mailing Address	P. O. BOX 667313						
	DOMBANO DE ACU						
	POMPANO BEACH FL 33066 - ZIP CODE						
Title or Position TREASURER	Telephone number 954 - 882 - 4186						

FEC Form 1 (R	evised 02/2009)		Page 4
Full Name of Designated Agent		1.	
Mailing Address			
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	СПУ	STATE	ZIP CODE
Title or Position	Tele	ephone number	J-L
safety deposit boxes of Name of Bank, Deposi	tory, etc.	he committee deposits fund	ds, holds accounts, rents
safety deposit boxes of Name of Bank, Deposi	r maintains funds.		ds, holds accounts, rents
safety deposit boxes of Name of Bank, Deposit	r maintains funds. tory, etc.  IASE BANK  2285 NORTH FEDERAL, HIGH	- <b>\</b> WAY	
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Federal Election Co ENVELOPE REPLACEMENT PAGE FO The FEC added this page to the end of this fil	OR INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C) 9/25/12
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Sig	gnature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	•
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registration	Date of Receipt on Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
h	10/1/12
PREPÄRER (3/2005)	DATE PREPARED
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