FEC FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed)   Example: If typing, type over the lines.   12FE4M5

UNITED STATES PRESIDENTIAL ELECTIONS FUND OF CALIFORNIA

ADDRESS (number and street)   P. O. BOX 667313

☐ (Check if address is changed)

POMPANO BEACH   FL   33066   -

CITY   STATE   ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐ (Check if address is changed)   USPresidentialElectionsFundPACs@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE   09 ' 22 ' 2012

3. FEC IDENTIFICATION NUMBER   C

4. IS THIS STATEMENT ☒ NEW (N)   OR   ☐ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer   **DONALD ROCKEFELLER**

Signature of Treasurer   *Donald Rockefeller*   Date   09 ' 22 ' 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person 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 contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)

5. TYPE OF 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. (Complete the candidate information below.)

Name of
Candidate |_____|

Candidate
Party Affiliation   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 Committee:

(d) ☐ This committee is a   (National, State
                                   or subordinate) committee of the   (Democratic,
                                                                           Republican, etc.) Party.

Political Action 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) ☒ 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 Fundraising 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.

Committees Participating in Joint Fundraiser

1. |_____| FEC ID number C

2. |_____| FEC ID number C

3. |_____| FEC ID number C

4. |_____| FEC ID number C

Write or Type Committee Name

UNITED STATES PRESIDENTIAL ELECTIONS FUND OF CALIFORNIA

6. Name of Any Connected 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

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7. **Custodian of Records:** Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

Full Name **DONALD ROCKEFELLER**

Mailing Address **P. O. BOX 667313**

POMPANO BEACH   **FL**   **33066** -

Title or Position   CITY   STATE   ZIP CODE

ADMINISTRATOR   Telephone number **954** - **882** - **4186**

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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 **DONALD ROCKEFELLER**

Mailing Address **P. O. BOX 667313**

POMPANO BEACH   **FL**   **33066** -

                                  CITY   STATE   ZIP CODE
Title or Position
TREASURER   Telephone number **954** - **882** - **4186**

Full Name of
Designated
Agent

Mailing Address

CITY   STATE   ZIP CODE

Title or Position

Telephone number

9. **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.

CHASE BANK

Mailing Address   2285 NORTH FEDERAL HIGHWAY

POMPANO BEACH   FL   33062   -

CITY   STATE   ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

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
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PREPARER

DATE PREPARED 10/1/12

(3/2005)