STATEMENT OF

RECEIVED - 2012 OCT - 1 PM 12: 14

FORM 1	ORGANIZATION	FEC MAIL CENTER				
1. NAME OF COMMITTEE (in full)	(Check if name Example:If typing, type is changed) over the lines.	12FE4M5				
UNITED STAT	ES PRESIDENTIAL ELECTIONS F	FUND OF NEW MEXICO				
ADDRESS (number and street	P. O. BOX 667313					
(Check if address is changed)	POMPANO BEACH	FL 33066				
	СПУ	STATE ZIP CODE				
COMMITTEE'S E-MAIL ADD	COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) USPresidentialElectionsFundPACs@yahoo.com					
(Check if address is changed)	s					
COMMITTEE'S WEB PAGE	ADDRESS (URL)					
(Check if address is changed)						
2. DATE Ö9" ' 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 Treas	DONALD ROCKEFELLER					
Signature of Treasurer	Borald Korkeffeler	Date 09° '22° '20°12°				
NOTE: Submission of false, erroneous, or incomptaite information may subject the peiceon signating this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.						
Office Use	For further Information Federal Election Commiss	PPL PLIGN 1				

	F	EC Fo	rm 1 (Revised 02/2009)	Page 2		
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					
	Candi Party	idate Affiliatio	on Office 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:			
	(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	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 s committee. (i.e., nonconnected committee)	segregated 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	t Fund	iralsing Representative:			
	(g)		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)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	two 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.	FEC ID number C			

FEC Form 1 (Revised 0	92/2009)	 Page 3
Write or Type Committee Name		
UNITED STATES	PRESIDENTIAL ELECTIONS FUND OF NEV	V MEXICO
6. Name of Any CorineCted C	rganization, Affiliateo Committée, John Fundraising Representative, of Leadershi	p PAC Sponsor
NONE		
11111111111	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>
		
Mailing Address		<u> </u>
	CITY STATE Z	IP CODE
_		IF CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lead	lership PAC Sponsor
 Custodian of Records: Identification books and records. 	tify by name, address (phone number - optional) and position of the person in posse	ession of committee
IDONA	ALD ROCKEFELLER	!
Full Name	₁ P. O. BOX 667313	
Mailing Address		
	POMPANO BEACH	
	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	<u>'</u>
Title or Position	CITY STATE Z	IP CODE
IADMINISTRATO	R Telephone number 954 1 - 1882	2, - 4186 ,
8. Treasurer: List the name and any designated agent (e.g., a	and address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	e and address of
Full Name ONA of Treasurer	LD ROCKEFELLER	ليستست
Mailing Address	P. O. BOX 667313	
	POMPANO BEACH STATE 33066	لــــا-لـــ
Title or Position	CITY STATE ZI	IP CODE
TREASURER	Telephone number 954 - 882	2, - 4186
1		

	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	ا-لىنا-لىنى
	epositories: List all banks or other depositories in which the committee deposits funder or maintains funds.	ds, holds accounts, rents
Name of Bank, Dep	pository, etc.	
Į (CHAȘE BANK, , , , , , , , , , , , , , , , , , ,	
	CHASE BANK 2285 NORTH FEDERAL HIGHWAY	
Mailing Address		
	2285,NORTH FEDERAL,HIGHWAY	33062, , j _ , , , ,
_	2285,NORTH FEDERAL,HIGHWAY	33062, j
Mailing Address	2285 NORTH FEDERAL HIGHWAY [POMPANO BEACH	-L-1-1-1
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Mailing Address	2285 NORTH FEDERAL HIGHWAY [POMPANO BEACH	
	2285 NORTH FEDERAL HIGHWAY [POMPANO BEACH	-L-1-1-1
Mailing Address Mailing Address Name of Bank, De	2285 NORTH FEDERAL HIGHWAY [POMPANO BEACH	-L-1-1-1

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOM The FEC added this page to the end of this filing to indice	
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 Signature Co	onfirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	· .
Overnight Delivery Service (Specify):	Shipping Date
Next Bus	iness Day Delivery
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
Other (Specify):	of Receipt or Postmarked
PREPARER	10/1/12
(3/2005)	DATE PREPARED