STATEMENT OF

RECEIVED

FEC FORM 1		ORGANIZATION				OCT - I	PM 12: 14
runivi i		·			FE	GMAIL.	CENTER
1. NAME OF COMMITTEE (in	n full)	(Check if nam is changed)		ample:If typing, type or the lines.	12FE4M5		
UNITED S	TATES	PRESIDE	NTIAL	ELECTIONS	FUND	OF TE	XAS
ADDRESS (number a	nd street)	P. O. BOX	66731	3			لببب
(Check if a is changed)		POMPANC	BEAC	CH	FL	33066	
			CITY		STATE	ZIP	CODE
COMMITTEE'S E-MA	address	s (Please provide only out of USPreside		ectionsFundi	PACs@	yahoo,	com
COMMITTEE'S WEE	S PAGE ADD	RESS (URL)					
(Check if is change	address						
2. DATE ÖŞ	9°′ 22	° ′ 2012					
3. FEC IDENTIFIC	CATION NU	MBER C	;				
4. IS THIS STATE	MENT 🗵	NEW (N) O	R	AMENDED (A)			<u> </u>
I certify that I have	examined th	is Statement and to the	best of my	knowledge and belief it	is true, correct	and complete	9 .
Type or Print Name	of Treasurer	DONALD	ROCK	EFELLER			
Signature of Treasur	er	Gonald	Kork	geller	Date Ö9	′ 22 °	′ 20'1 2 `
NOTE: Submission of	•	•	•	lajact the person signifig the		the penalties	of 2 U.S.C. §437g.
Office Use				For further information co Federal Election Commission Toll Free 800-424-9530			FORM 1 1 02/2009)

FEC Fo	rm 1 (Revised 02/2009)	Page 2				
TYPE OF C	OMMITTEE					
Candidate	Committee:					
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate						
Candidate Party Affiliati	on Office House Senate President	State				
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District				
Name of Candidate						
Party Con	the state of the s	(Demogratic				
(d)	(National, State This committee is a 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 co	nnected organization is a:				
	Corporation Corporation w/o Capital Stock	Labor Organization				
	Membership Organization Trade Assectation	Cooperative				
	In addition, this committee is a Lobbyist/Registrant PAC.					
(i) 🔀	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party				
	In addition, this committee is a Lobbyist/Registment 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 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 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	I					

Write or Type Committee Nam	e					
UNITED STATE	UNITED STATES PRESIDENTIAL ELECTIONS FUND OF TEXAS					
6. Name or Any Connected	6. Name or Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor					
INONE			<u> </u>		<u> </u>	
				11111		
Mailing Address			11111			
			1 1 1			
					1-1 1	
	C	TY	S	TATE	ZIP CODE	
Relationship: Connecte	od Organization Affiliated	Committee Joi	int Fundraising Re	presentative	Leadership PAC Sponsor	
 Custodian of Records: Ide books and records. 	ntify by name, address (pho	one number - option	nal) and position	of the person in p	possession of committee	
Full Name	<u> </u>		. 			
Mailing Address	P. O. BOX 667	313				
			1-1-1-1-1-1			
	POMPANO BE	4CH	ا لست	FL 330	66	
Title or Position	С	ПΥ	ST	ATE	ZIP CODE	
ADMINISTRATO	R	1 ليــا	Telephone numbe	. 954	882,[4186 , _	
8. Treasurer: List the name ar any designated agent (e.g.,		optional) of the tr	easurer of the co	mmittee; and the	name and address of	
Full Name of Treasurer	ALD ROCKEFE	LLER,				
Mailing Address	P. O. BOX 667;	313		11111		
				<u> </u>		
		ACH,		FL 330 ate	ZIP CODE	
Title or Position TREASURER			Celephone number	1054 1 1	882, - 4186 ,	

FEC For	n 1 (Revised 02/2009)		Page 4
Full Name of Designated	1		1
Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Tele	phone number]-[
	· · · · · · · · · · · · · · · · · · ·		
	Depositories: List all banks or other depositories in which t	he committee deposits fund	is, holds accounts, rents
Name of Bank,	xes or maintains funds.		
Harrie Or Darin,	repository, etc.		
	CHASE BANK		111111
Mailing Address	2285 NORTH FEDERAL HIGH	-tWAY	
			1 1 1 1 1 1 1 1 1 1
	POMPANO BEACH	الله الله	33062
	СПҮ	STATE	ZIP CODE
Name of Bank,	Depository, etc.		
Mailing Address			
			
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