RECEIVED

2012 NOV 13 PM 12: 25 FEC MAIL CENTER

**Committee Name:** 

NEW YORK REPUBLICAN TRUST FUND

If registered, FEC ID:

Today's Date:

11/08/2012

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:

**JERRY MCKENDY** 

, Treasurer

## STATEMENT OF

RECEIVED -

2012 NOV 13 PM 12: 25

ORGANIZATION		20121107 13 11112-23						
FORM 1	FORM 1 CHARNIZATION		FEC MAIL CENTER					
NAME OF COMMITTEE (in	n full)	(Check if name is changed)		ample:If typing, type or the lines.	12FE4M5	5		
NEW YOR	KRE	PUBLICAN T	RUST	FUND				Ш
	1 1 1 1			<u> </u>		<del>                                     </del>		
ADDRESS (number a	nd street)	P. O. BOX 3	19871	6				لــا
(Check if a					<del></del>	00000		Ш
is changed	)	MIAMI BEA	CH		FL	33239	<b></b>	لــا
			CITY		STATE	ZIP	CODE	
COMMITTEE'S E-MA	AIL ADDRES	SS (Please provide only or	ne e-mail ac	idress)				
(Check if	oddroon	USrepublica	an Tru	stFund@gm:	ail.com	1 1 1 1	1111	لــا
is change								لـــ
COMMITTEE'S WEE	B PAGE ADI	DRESS (URL)						
					<u> </u>	<del>1   1   1   1</del>		Ш
(Check if is change					1111		<u>. L L . L</u>	لـــ
2. DATE 11" '8" '2012"								
3. FEC IDENTIFIC	CATION N	JMBER 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  JERRY MCKENDY								
Signature of Treasurer Dend 710 Keely Date 11" 08° 2012								
NOTE: Submission of false, erroneous, of incomplete information may subject the personal 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 co Federal Election Commission Toll Free 800-424-9530		_	ORM 1	

FI	EC Fo	rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE				
(a)	Ildate	Committee: This committee is a principal campaign committee. (Complete the candidate information below	a)			
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate					
	information below.)  Name of  Candidate					
Candid Party	date Affiliati	Office Sought: House Senate President	State District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Candid						
Party	/ Con	nmittee: (National, State	(Democratic,			
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party.			
Politi	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	Cooperativn			
		In addition, this committee is a Lobbyist/Registrant PAC.				
<b>(f)</b>	$\boxtimes$	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., noncommected committee)				
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint Fundralsing 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number C				
	2.	FEC 1D number C				
	3.	FEC ID number C				
		I	•			

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Write or Type Committee Name	е	
NEW YORK RE	PUBLICAN TRUST FUND	
6. Name of Any Connected (	Organization, Affiliated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
INONE		<u> </u>
Mailing Address		
		1 1 1-1
	CITY STAT	E ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
<ol> <li>Custodian of Recerds: Idea books and records.</li> </ol>	ntify by name, address (phone number optional) and position of the	he person in possession of committee
Full Name JERR	RY MCKENDY	
	P. O. BOX 398716	
Mailing Address		
	MIAMI BEACH FL	33239
Title or Position	CITY STATE	ZIP CODE
CFO	Telephone number	305, [761, [5546 ,
8. Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the commi assistant treasurer).	ittee; and the name and address of
Full Name of Treasurer	RY MCKENDY	
Mailing Address	P. O. BOX 398716	
	MIAMI BEACH FL	33239
Title or Position	CITY STATE  Telephone number	ZIP CODE
		·

FEC Form 1 (R	evised 02/2009)		Page 4
Full Name of Designated Agent		1 1 1 1 1 1	
Mailing Address			
Mainly Address	1	<u> </u>	<del>┖▃ᢥ▃┖▃┖▃┖▃┖▃┖▃┖</del> ╽
		<del>                                     </del>	<del></del>
	CITY	STATE	ZIP CODE
Title or Position			
	<u> </u>	number	
Banks or Other Depos safety deposit boxes or Name of Bank, Deposit		nmittee deposits fu	inds, holds accounts, rents
[CH	IAȘE BANK		<u></u>
Mailing Address	1801,ALTON,ROAD		
		<del></del>	
	MIAMI BEACH	J FL	33139
	CITY	STATE	ZIP CODE
Name of Bank, Deposi	itory, etc.		
L	<u>, , , , , , , , , , , , , , , , , , , </u>		
Mailing Address			
		ليا ل	
	CITY	STATE	ZIP CODE

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation <sup>™</sup> or Signature Confi	rmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	ss 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):	Receipt or Postmarked
PY	11/30/2012
PREPARER (3/2005)	DATE PREPARED