RECEIVED
2012 SEP 11 AM 9: 28
FEC MAIL CENTER

Committee Name:	_			
URBAN	PROGRESS	POLITICAL	ACTION	Committee
If registered, FEC	ID:			
Today's Date:				
08, 28,	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:

BRIDGET MURRAY

, Treasurer

12030882933

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

FORM 1	ONGANIZATION	2012 SEP 11 AM 9: 28					
NAME OF COMMITTEE (in	(Check if name Example: If typing, type over the lines.	12FE4M50 MAL CENTER					
LURBAN	URBAN PROFIESS, POLITICAL ACTION COMMITTEE						
ADDRESS (number ar	nd street) [P. O. 18p X 2 57						
(Check if a							
	CITY A	STATE ▲ ZIP CODE ▲					
COMMITTEE'S E-MA	AIL ADDRESS						
(Check if a is changed							
	Optional Second E-Mail Address						
		<u> </u>					
(Check if a is changed) 2. DATE							
4. IS THIS STATEM	MENT 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 BRIDGET MURRAY							
Signature of Treasure	Bridget Murray	Date 0.8 28 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 co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	FCL. FLIBNI I					

	FEC FO	TIII 1 (neviseu 02/2009)	rage Z			
		OMMITTEE				
Can	ndidate	e 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.)				
Nam Cano	e of didate					
	didate y Affiliati	on Coffice Sought: House Senate President	State District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Cano	e of didate					
Par	ty Con	nmittee:				
(d)		7 N N N N N N N N N N N N N N N N N N N	emocratic, epublican, etc.) Party			
Poli	tical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	ected 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)	V	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated 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.)				
Join	t Fund	Iraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which in an authorized committee of a federal eandidate.	or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.					
	2.					
	3.					
	4.					
	→.					

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Write or Type Committee Name	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or	Leadership PAC Sponsor
Mailing Address	
	1-1 1
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the personal books and records. 	in in possession of committee
Full Name JOSEPH A. MURRAY	
Mailing Address P.O. Box 1.483	
· L	
WALTERBORO SC	29488
Title or Position CITY STATE	ZIP CODE
PRESIDENT Telephone number 84	31-1 <u>844</u> -1 <u>8425</u>
8. Treasurer : List the name and address (phone number optional) of the treasurer of the committee; and any designated agent (e.g., assistant treasurer).	d the name and address of .
Full Name BRIDGET, L. MURRAY	
Mailing Address Propagation Box 1483	
CITY STATE	2,9,4,88 ZIP CODE
Title or Position TREPSURER Telephone number 84.3	31-18441-18425

9.

Full Name of Designated Agent	SEPH A. MURR	AY			
Mailing Address	Pro. Bax 1483				
	WALTERBORD	STATE	29488-LI		
Title or Position	CITY	STATE Telephone number	ZIP CODE 13-844-18425		
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.					
l Sq	OUTH CAROLINA BA	NR & TRUST	Co.(SCB=T)		
Mailing Address	(WALT/ JEFFERES) , , , , , , , , , , , , , , , , , , ,			
	P.O. BOX 100 1	<u> </u>			
	COLUMBIA	ISC	292,921-		
	CITY	STATE	ZIP CODE		
Name of Bank, Depository,	etc.		·		
. L			لنسسبب		
Mailing Address					
		 			
		ليا ليبير			
	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 **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** 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 or Postmarked Other (Specify): DATE PREPARED