

2009 SEP -1 PM 12:30

FEC
FORM 1STATEMENT OF
ORGANIZATION

Office Use Only

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

12FE4M5

MATTHEW E KELLY FOR CONGRESS

ADDRESS (number and street)

10424 TURNING LEAF TRAIL

(Check if address
is changed)

FORT WORTH

TX

76131

CITY

STATE

ZIP CODE

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

(Check if address
is changed)

MATT3333U5@YAHOO.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

HELPUSSAVEAMERICA.INFO

2. DATE

08'26'2009

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

X

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

MATTHEW E. KELLY

Signature of Treasurer

Matthew E Kelly

Date

08'26'2009

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
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100FEC FORM 1
(Revised 02/2009)

29030153134

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

MATTHEW E KELLY

Candidate
Party Affiliation

REP

Office
Sought:☒

House

Senate

President

State

TX

District

12

- (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

29030153135

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address[illegible]**ZIP CODE**Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

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

MATTHEW E KELLY

Mailing Address

10424 TURNING LEAF TRAIL

1 F O R T W O R T H

IX

7.6148

Title or Position

CITY

STATE

ZIP CODE

CANDIDATE

Telephone number

8171 - 2321 - 4051

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**

MATTHEW F KELLY

Mailing Address

10424 TURNING LEAF TRAIL

A horizontal number line with 20 tick marks, labeled from 0 to 19. The line is used for plotting data points.

FORT WORTH

IX

7.6 | 3 |

Title or Position

TREASURER

Telephone number

8171 - 2321 - 4051

CONFIDENTIAL

Full Name of
Designated
Agent

MATTHEW E. KELLY

Mailing Address

110424 TURNING LEAF TRAIL

FORT WORTH

CITY

TX

STATE

76131-1

ZIP CODE

Title or Position

Telephone number

817-1232-4051

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.

DMMI AMERICAN

Mailing Address

8024 DENTON HIGHWAY

WATKINS

CITY

TX

STATE

76131-1

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

29030153137

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.

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☐ No Postmark	
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☐ 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):	Date of Receipt or Postmarked


PREPARER
(3/2005)

9/1/09
DATE PREPARED

29030153138