

FEC
FORM 1

STATEMENT OF ORGANIZATION

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2024 SEP -5 AM 11:07

Office Use Only

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

12FE4M5

VICTORIA COUNTY GOVERNMENT FEDERAL PAC

ADDRESS (number and street) 1596 WEST PARK AVE

(Check if address
is changed)

VICTORIA TX 77905-
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

BILLIPOZZI@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

2. DATE 08/19/2024

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 Treasurer WILLIAM R POZZI

Signature of Treasurer



Date 08/19/2024

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 contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

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

Candidate Party Affiliation	<input type="text"/>	Office Sought:	<input type="checkbox"/> House	<input type="checkbox"/> Senate	<input type="checkbox"/> President	State <input type="text"/>
						District <input type="text"/>

(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Name of Candidate	<input type="text"/>
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Party Committee:

(d) This committee is a (S U B) (National, State or subordinate) committee of the (R E P) (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:

<input type="checkbox"/> Corporation	<input type="checkbox"/> Corporation w/o Capital Stock	<input type="checkbox"/> Labor Organization
<input checked="" type="checkbox"/> Membership Organization	<input type="checkbox"/> Trade Association	<input type="checkbox"/> Cooperative
<input type="checkbox"/> 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)

<input type="checkbox"/> In addition, this committee is a Lobbyist/Registrant PAC.
<input type="checkbox"/> 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. <input type="text"/>	FEC ID number <input type="text"/> C <input type="text"/>
2. <input type="text"/>	FEC ID number <input type="text"/> C <input type="text"/>
3. <input type="text"/>	FEC ID number <input type="text"/> C <input type="text"/>
4. <input type="text"/>	FEC ID number <input type="text"/> C <input type="text"/>

Full Name of
Designated
Agent

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

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.

P R O S P E R I T Y B A N K

Mailing Address

101 S MAIN ST

VICTORIA

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

P R O S P E R I T Y B A N K

Mailing Address

101 S MAIN ST

VICTORIA

CITY

STATE

ZIP CODE

X-RAYED BY FEC SECURITY

William R. Puzzi

1596 Westpark Ave
Victoria, TX 77905

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Federal Election Commission
1050 First Street, NE
Washington, DC 20463



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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt	
<input checked="" type="checkbox"/> USPS First Class Mail	Date of Receipt <i>9/5/24</i>	
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)	
<input type="checkbox"/> USPS Priority Mail	Postmarked	
<input type="checkbox"/> USPS Priority Mail Express	Postmarked	
<input type="checkbox"/> Postmark Illegible		
<input type="checkbox"/> No Postmark		
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date	Date of Receipt
	Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received via FAX	Date of Receipt	
<input type="checkbox"/> Received via Email	Date of Receipt	
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt	
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked	
<i>UNO</i>	<i>9/5/24</i>	

PREPARER
(4/2023)

DATE PREPARED