

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

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

12FE4M5

PERRY FOR PRESIDENT INC

ADDRESS (number and street) PO BOX 162406

(Check if address is changed)

AUSTIN TX 78716
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

rabox@aol.com

Optional Second E-Mail Address

lauren@rickperry.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

RICKPERRY.ORG

2. DATE 06 / 10 / 2015

3. FEC IDENTIFICATION NUMBER C C00500587

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 Dr. Richard Box

Signature of Treasurer Dr. Richard Box [Electronically Filed] Date 06 / 30 / 2015

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.

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 **JAMES R (RICK) PERRY**

Candidate Party Affiliation REP Office Sought: House Senate President State District

- (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
2. FEC ID number
3. FEC ID number
4. FEC ID number

Write or Type Committee Name

PERRY FOR PRESIDENT INC

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

NONE

Mailing Address

CITY

STATE

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 Lauren R San Miguel

Mailing Address PO BOX 162406

AUSTIN

TX

78716

Title or Position

CITY

STATE

ZIP CODE

Operations Director

Telephone number 512 - 960 - 4588

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 Dr. Richard Box

Mailing Address 711 West 38th Street

Suite D2

AUSTIN

TX

78705

Title or Position TREASURER

CITY

STATE

ZIP CODE

Telephone number 512 - 459 - 7689

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for 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.

CHAIN BRIDGE BANK

[Empty grid for Chain Bridge Bank name]

Mailing Address

1445-A LAUGHLIN AVE

[Empty grid for Mailing Address line 2]

MCLEAN VA 22101

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

PLAINS CAPITAL BANK

[Empty grid for Plains Capital Bank name]

Mailing Address

919 CONGRESS AVE

[Empty grid for Mailing Address line 2]

AUSTIN TX 78701

CITY

STATE

ZIP CODE