

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

MARY RULFART FOR PRESIDENT

ADDRESS (number and street)

12903 GRUBSTAKE GULCH ST

(Check if address is changed)

BEE CAVE

TX

78738-6104

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

LIBER80RE@AUSTIN.RR.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.VOTEMARY2008.COM

COMMITTEE'S FAX NUMBER

512-263-1632

2. DATE

06 ' 06 ' 2008

3. FEC IDENTIFICATION NUMBER

000447805

4. IS THIS STATEMENT

NEW (N)

OR

X

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

GEOFFREY J NEALE

Signature of Treasurer

Date

06 ' 06 ' 2008

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 12/2007)

REBRM02.PDF

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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 MARY J. RUWART

Candidate Party Affiliation LIB 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

(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 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
5. _____ FEC ID number C

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Write or Type Committee Name

MARY RUWART FOR PRESIDENT

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

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

GEOFFREY J. NEALE

Mailing Address

12903 GRUBSTAKE GULCH ST

BEE CAVE

TX

78738-6104

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

512-554-1523

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

GEOFFREY J. NEALE

Mailing Address

12903 GRUBSTAKE GULCH ST

BEE CAVE

TX

78738-6104

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

512-554-1523

28039743995

Full Name of Designated Agent

[Empty grid line]

Mailing Address

[Empty grid line]

[Empty grid line]

[Empty grid line]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid line]

Telephone number

[Empty grid line]

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.

BANK OF AMERICA

Mailing Address

12400 HWY 71 WEST BLDG F

[Empty grid line]

BEE CAVE TX 78738

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid line]

Mailing Address

[Empty grid line]

[Empty grid line]

[Empty grid line]

CITY

STATE

ZIP CODE

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Federal Election Commission
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Other (Specify): Date of Receipt or Postmarked

Jms
PREPARER
(3/2005)

6/11/02
DATE PREPARED

28039743997