11030690481

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2011 NOV 14 AM 10: 47

1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	IL CENTEN			
TEXAS ASSOC	-11AT110N1 0F	BILISIIINIESS	FEDPAC				
ADDRESS (number and street) $[I_1 2_1 0_1 9_1 N_1 u_1 E_1 C_1 E_1 S_1 S_1 T_1 R_1 E_1 E_1 T_1]$							
(Check if address							
is changed)	AUSTIN		[X] [7]	3.7.91-			
	C	CITY	STATE	ZIP CODE			
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one e-	mail address)	•				
; justing (O) 1 1/ 1/1 1/2	SMGgele @tx	b121019	1 1 1 1 1 1				
(Check if address is changed)			·	·			
COMMITTEE'S WEB PAGE ADDRESS (URL)							
(Check if address	· www.txbizo	rg	<u> </u>				
is changed)	1	•					
tu.		. ,	······································				
2. DATE		***	£	* * * * * * * * * * * * * * * * * * *			
3. FEC IDENTIFICATION NUMBER							
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 SANDRA MEGEE Signature of Treasurer Date Date							
	To high	4	(TO FIVE	, 152523			
Signature of Treasurer	Smara 100	The state of the s	Date //	09 2011			
NOTE: Submission of false, erreneous, 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 of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)			

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE On mare Management				
Can	ididate	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 Cano	e of didate					
	didate / Affiliation	Office 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:	o ,			
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Poli	tical A	ction Committee (PAC):				
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:			
(0)	Year	(many) (many) (many)				
		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. (tdentify sponsor on line 6.)				
loin	+ Euna	Iraising Representative:				
		•	here a			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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.				
	Com	mittees Participating in Jeint Fundraiser				
	1.	TES IS HUMBER				
	2.	FEC ID number C				
	3.	FEC ID number				
	4.					

FEC FOIII I (Nevised	02/2009)		i age o		
Write or Type Committee Name					
6. Name of Any Connected	Organization, Affiliated Committee, Join	t Fundraising Representative,	or Leadership PAC Sponsor		
T E X A S A S S O	ICI/AITI/ON JOF BUS				
Mailing Address	V2019 MUEGES S	TREET			
•					
	[A a S T 1 1 1 1 1 1 1 1 1		78701-		
	CITY	STATE	ZIP CODE		
Relationship: Connect	ed Organization Affiliated Committee	Joint Fundraising Representa	tive Leadership PAC Sponso		
 Custodian of Records: Id books and records. 	entify by name, address (phone number	optional) and position of the pe	erson in possession of committee		
Full Name	DRA MCGEE				
Mailing Address	129, NuEGES, S	TREET			
	$A_{1}u_{1}s_{1}\tau_{1}I_{1}n_{1}$	TX	7,8,70,1-		
Title or Position	CITY	STATE	ZIP CODE		
TREASURER		Telephone number	12-477-6721		
Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of a	the treasurer of the committee;	and the name and address of		
Full Name of Treasurer	DRA MEGEE		- 		
Mailing Address	1209 NUECES S	TREET			
	(#, u, s, T, I, n, ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	STATE	78,70,1-L		
Title or Position $[T_iR_iE_iA_iS_iu_iR_iE_iA_i]$	4	Telephone number 5	12-477-672		

Name of Bank, Depository, etc.

Mailing Address

City STATE ZIP CODE

CITY

7.8.7011-

ZIP CODE

STATE

Ve.

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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USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Next	Business Day Delivery			
Received from House Records & Registration Off	Date of Receipt ice			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
CIMN	(1/14/11			
PREPARER (3/2005)	DATE PREPARED			
(3/2003)				