2003

OFFICE OF THE ATTORNEY GENERAL
LAW ENFORCEMENT TELEPHONE SOLICITATION ACT
Tex. Rev. Civ. Stat. Ann. Art. 9023e (Vernon's 1997)

REGISTRATION FORM

Charitable Trusts Section
Consumer Protection Division
P.O. Box 12548
Austin, Texas 78711-2548
800-621-0508 512-463-2185

[ ] Initial Registration [X] Renewal Registration

1. Registrant name: Potter County Deputy Sheriff's Assoc. FOP 57

Assumed name (dba) or publication name:

Street Address: 608. S. Pierce

Mailing Address: PO Box 2283

City: Amarillo State: TX Zip: 79105

Telephone: (806) 353-7375 Fax: ( )

Federal Tax ID# 75-2555393 State Tax Employer ID#

2. Attach a list providing the mailing address, street address, phone number and fax number of each office, chapter, local unit, branch or affiliate of registering organization.

3. Name and address of organization's registered agent:

Robert Taylor
1915 S Marrs
Amarillo TX 79103

4. Name, title, address and phone numbers of each officer, director, and executive director or other chief operating officer:

Robert Taylor	Rick Fernandes	Ella Whitley	Nelson Newburn
President	Vice President	Secretary	Treasurer
1915 S. Marrs	PO Box 50963	4212 Pinon	6209 I40 W 112A
Amarillo Tx	Amarillo TX	Amarillo TX	Amarillo TX
806 373-3589	~~356-0699~~ 806-381-4524	383-5245	806 353-7375

5. Name of each officer, director, or employee who is either compensated by the organization or has custody and control of funds of the organization:

Nelson Newburn TREASURER NON COMPENSATED

6. Name of each officer, director, or employee who has been convicted of or pleaded nolo contendere to a misdemeanor involving fraud or the theft, misappropriation, misapplication, or misuse of property of another, or any felony, including the offense, and state, court and date of each conviction or plea of nolo contendere:

NONE

7. Incorporation date: _____ State of incorporation: TEXAS

Date organization began doing business: _____

Fiscal Year Ends: 12/31 (Month/Day)

8. If not incorporated, type of organization and date established:

9. Provide a statement describing the organization's charitable purposes and a list of the programs for which funds are solicited:

TO PROVIDE MONETARY SUPPORT FOR OFFICER IN Need
TO ASSIST LOW INCOME Children AT CHRISTMAS TIME TO PRIMOTE
PROFESSIONALISM TO our members

10. List the names, addresses and telephone numbers of the organization's accountants and auditors, and the method of accounting used:

CASH ACCRUAL Nelson Newburn
6209 I 40 W 112A AMARILLO TX
806 353 7375

11. Provide the name and address of each commercial telephone solicitor, including subcontracted commercial telephone solicitors, engaged by the organization during the preceding 12 months (attach additional sheets as necessary):

Name: NONE

Address: _____

REGISTRANT AFFIDAVIT

I, Nelson Newburn, an authorized representative of :

Potter County Deputy Sheriff's Assoc. FOP 57,

declare that the registering organization has attempted in good faith to comply with all applicable Texas, county, and municipal ordinances regarding telephone solicitations and hereby certify that the above information contained in the registration statement and all attachments to the statement are true, correct, and complete, to the best of my knowledge.

Signature of affiant

Sworn to and subscribed before me on the 27 day of Oct, 2003.

Paula Roberts

NOTARY PUBLIC

PAULA ROBERTS
Notary Public
State of Texas
My Comm. Exp. 02-22-2004

COMMERCIAL TELEPHONE SOLICITOR STATEMENT

I, Gary Coyne, an authorized representative of:

Area Benefits Inc. declare I am engaged by the registering organization to perform telephone solicitations. I have complied with all state and local registration laws.

Gary Coyne
Printed name

Gary Coyne
Signature

REGISTRATION UNDER THIS ACT DOES NOT IMPLY ENDORSEMENT BY THE STATE OF TEXAS OR THE ATTORNEY GENERAL, AND ORGANIZATIONS AND ENTITIES ARE PROHIBITED FROM STATING OR IMPLYING TO THE CONTRARY.