**FEC** 

Only

## STATEMENT OF

PAGE 1 / 4

**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Ratcliffe for Congress 2931 Ridge Rd ADDRESS (number and street) PMB #217 (Check if address is changed) Rockwall 75032-6670 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Betsy@ratcliffeforcongress.com (Check if address is changed) Optional Second E-Mail Address info@ratcliffeforcongress.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.ratcliffeforcongress.com (Check if address is changed) DATE 2015 C00554113 FEC IDENTIFICATION NUMBER > 3. X 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. Betsy Roe Type or Print Name of Treasurer Betsy Roe [Electronically Filed] 09 2015 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

|                     | C Form 1 (Revised 02/2009)  | Page 2                                   |
|---------------------|---|--|
|                     | DF COMMITTEE  date Committee:   |  |
|                     | X 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. (Cor information below.)  | nplete the candidate                     |
| Name o              | JOHN E Malchile   |  |
| Candida<br>Party At | DED Times   | State TX District 04                     |
| (c)                 | This committee supports/opposes only one candidate, and is NOT an authorized committee.   |  |
| Name o<br>Candida   |   |  |
| Party               | Committee:  |  |
| (d)                 | This committee is a (National, State or subordinate) committee of the   | (Democratic,<br>Republican, etc.) Party. |
| Politic             | al Action Committee (PAC):  |  |
| (e)                 | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co   | nnected 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 s committee. (i.e., nonconnected committee)  | egregated fund or party                  |
|                     | In addition, this committee is a Lobbyist/Registrant PAC.   |  |
|                     | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)  |  |
| Joint F             | undraising Representative:  |  |
| (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 t committees/organizations, none of which is an authorized committee of a federal candidate.        |  |
| (                   | Committees Participating in Joint Fundraiser  |  |
|                     | I. FEC ID number  |  |
| 4                   | 2. FEC ID number  |  |
| (                   | 3.  |  |
| 4                   | 4.  |  |

| FEC Form 1 (Revised                                     | 02/2009)   | Page <b>3</b>        |
|---|--|----------------------|
| Write or Type Committee Name                            |  |                      |
| Ratcliffe for Co  | ngress   |                      |
|   | Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh                      | nip PAC Sponsor      |
| RISE PROJECT  |  |                      |
|   |  |                      |
| Mailing Address   | PO Box 2485  |                      |
|   | Springfield VA 22152-04  CITY STATE  | 85<br>               |
| Relationship: Connecte                                  |  | ndership PAC Sponso  |
| Custodian of Records: Idea books and records.           | ntify by name, address (phone number optional) and position of the person in pos-                      | session of committee |
| Betsy Roe   | <b>;</b>   |                      |
| Full Name   | 712 Starlight Pass   |                      |
| Mailing Address   |  |                      |
|   | Heath TX 75032-59  | 984                  |
| Title or Position                                       | CITY STATE   | ZIP CODE             |
| Custodian of Records                                    |  | 338 –0130            |
| Treasurer: List the name an any designated agent (e.g., | d address (phone number optional) of the treasurer of the committee; and the nar assistant treasurer). | ne and address of    |
| Full Name Betsy Roe of Treasurer                        | ,<br>  |                      |
| Mailing Address   | 712 Starlight Pass   |                      |
|   |  |                      |
|   | Heath TX 75032-59  |                      |
| Title or Position Treasurer                             |  | ZIP CODE  338        |

| FEC Form 1   | (Revised 02/2009)   | Page 4   |
|--|---|----------|
|  |   |          |
| Full Name of Designated  |   |          |
| Agent  |   |          |
| Mailing Address  |   |          |
|  |   |          |
|  | CITY STATE  | ZIP CODE |
| Title or Position  |   |          |
|  | Telephone number  |          |
|  |   |          |
| Banks or Other Dep<br>safety deposit boxes<br>Name of Bank, Depo | ository, etc.   |          |
| safety deposit boxes<br>Name of Bank, Depo                       | ository, etc.  Vells Fargo  |          |
| safety deposit boxes<br>Name of Bank, Depo                       | ository, etc.   |          |
| safety deposit boxes  Name of Bank, Depo                         | Vells Fargo  2601 Lakeview Parkway                                      |          |
| safety deposit boxes  Name of Bank, Depo                         | ository, etc.  Vells Fargo  | 3<br>1   |
| safety deposit boxes  Name of Bank, Depo                         | Vells Fargo  2601 Lakeview Parkway                                      | ZIP CODE |
| safety deposit boxes  Name of Bank, Depo                         | Vells Fargo  2601 Lakeview Parkway  Rowlett  TX  75088                  |          |
| safety deposit boxes  Name of Bank, Depo                         | Vells Fargo  2601 Lakeview Parkway  Rowlett  CITY  STATE  ository, etc. |          |
| safety deposit boxes  Name of Bank, Depo                         | Vells Fargo  2601 Lakeview Parkway  Rowlett  CITY  STATE  SB&T          |          |
| safety deposit boxes  Name of Bank, Depo                         | Vells Fargo  2601 Lakeview Parkway  Rowlett  CITY  STATE  ository, etc. |          |
| safety deposit boxes  Name of Bank, Depo                         | Vells Fargo  2601 Lakeview Parkway  Rowlett  CITY  STATE  SB&T          |          |
| safety deposit boxes  Name of Bank, Depo                         | Vells Fargo  2601 Lakeview Parkway  Rowlett  CITY  STATE  SB&T          | ZIP CODE |