

# FEC FORM 1

# STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

National Rifle Association of America Political Victory Fund

ADDRESS (number and street)

11250 Waples Mill Road

(Check if address is changed)

Fairfax

VA

22030

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

madkins@nrahq.org

rsmith@nrahq.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.nrapvf.org

COMMITTEE'S FAX NUMBER

703-267-1159

2. DATE

01 / 08 / 2007

3. FEC IDENTIFICATION NUMBER

C C00053553

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

Mary Rose Adkins

Signature of Treasurer

Electronically Filed by Mary Rose Adkins

Date

01 / 08 / 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

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 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State   
 District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

(d)  This committee is a  (National, State (or subordinate) committee of the  (Democratic, Republican, etc.) Party.

(e)  This committee is a separate segregated fund

(f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

**The National Rifle Association of America**  
 \_\_\_\_\_  
 \_\_\_\_\_

Mailing Address **11250 Waples Mill Road**

\_\_\_\_\_

**Fairfax** **VA** **22030** - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship **Parent Organization**

Type of Connected Organization:

- Corporation  Corporation w/o Capital Stock  Labor Organization
- Membership Organization  Trade Association  Cooperative

Write or Type Committee Name

**National Rifle Association of America Political Victory Fund**

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 \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

\_\_\_\_\_ Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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 **Mary Rose Adkins**

Mailing Address **11250 Waples Mill Road**

\_\_\_\_\_

**Fairfax** **VA** **22030** - \_\_\_\_\_

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**Treasurer** Telephone number **703** - **267** - **1155**

Full Name of Designated Agent **Ray Smith**

Mailing Address **11250 Waples Mill Road**

\_\_\_\_\_

**Fairfax** **VA** **22030** - \_\_\_\_\_

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**Assistant Treasurer** Telephone number **703** - **267** - **1152**

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.

Wachovia Bank, N.A.

Mailing Address

10501 Main Street

Fairfax

VA

22030

CITY ▲

STATE ▲

ZIP CODE ▲

**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.

[ ADDITIONAL ]

Branch Banking and Trust Company

Mailing Address

11230 Waples Mill Road

Fairfax

VA

22030

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ ADDITIONAL ]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

**Designated Agent**

**[ ADDITIONAL ]**

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number  -  -



**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.

[ ADDITIONAL ]

**Bank of America**

Mailing Address **P.O. Box 25118**

**Tampa** **FL** **33622** -

CITY ▲ STATE ▲ ZIP CODE ▲

**Name of Any Connected Organization or Affiliated Committee**

[ ADDITIONAL ]

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

**Designated Agent**

**[ ADDITIONAL ]**

Full Name

Mailing Address

Title or Position ▼  CITY ▲  STATE ▲  ZIP CODE ▲

Telephone number  -  -

**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.

[ ADDITIONAL ]

**Bank of the West**

Mailing Address **224 Box Butte Avenue**

**Alliance** **NE** **69301** -

CITY ▲ STATE ▲ ZIP CODE ▲

**Name of Any Connected Organization or Affiliated Committee**

[ ADDITIONAL ]

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

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- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

**Designated Agent**

**[ ADDITIONAL ]**

Full Name

Mailing Address

Title or Position ▼  CITY ▲  STATE ▲  ZIP CODE ▲

Telephone number  -  -



Image# 27930023466

Form/Schedule: **F1A**

Transaction ID:

January 8, 2007 Federal Election Commission Attn: Karen Trainer 999 E Street, NW Washington, DC 20463 ID# C00053553 RE: Amended Statement of Organization Dear Ms. Trainer: This amendment to our Statement of Organization includes an additional e-mail address for this committee. Should you have any questions, I can be reached at 703-267-1155. Sincerely, Mary Rose Adkins Treasurer

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