PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Ranger Political Action Committee a.k.a. Ranger PAC PO Box 2485 ADDRESS (number and street) (Check if address is changed) Springfield 22152-0485 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS RANGERPAC@CONCENTRICOFFICE.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2012 C00448787 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. Stephen K Hatfield Type or Print Name of Treasurer Stephen K Hatfield [Electronically Filed] 12 18 2012 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

Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

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	EEC <b>F</b> -	1 (Paying 02/2000)	Page 2
		om 1 (Revised 02/2009) OMMITTEE	Page <b>2</b>
		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. (Con information below.)	nplete the candidate
Nam Cano	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	(Damas anatis
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	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)	X	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.)	
Join	t Fund	raising 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

Treasurer

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Write or Type Committee Na	ame	
Ranger Politic	al Action Committee a.k.a. Ranger F	PAC
6. Name of Any Connecte	d Organization, Affiliated Committee, Joint Fundraising Representati	ive, or Leadership PAC Sponsor
NONE		
Mailing Address	<u>-</u>	
	- VA	00000
	CITY STATE	ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
<ol> <li>Custodian of Records: I books and records.</li> </ol>	dentify by name, address (phone number optional) and position of the	e person in possession of committee
Mr. Ro	bert F. Carlin	
Full Name	PO Box 2485	
Mailing Address		
	Springfield VA	22152-0485
Title or Position	CITY STATE	ZIP CODE
Custodian of Records		703 - 310 - 6125
8. <b>Treasurer:</b> List the name any designated agent (e.ç	and address (phone number optional) of the treasurer of the committ g., assistant treasurer).	tee; and the name and address of
Full Name Stephe of Treasurer	n K Hatfield	
Mailing Address	3086 Balsam Court	
	Edgewood	41017-3374
Title or Position	CITY STATE	ZIP CODE

703

Telephone number

310

6125

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit be Name of Bank, I	Depository, etc.  Branch Banking and Trust Company  1909 K Street NW	
safety deposit bo	Depository, etc.  Branch Banking and Trust Company  1909 K Street NW	
safety deposit be Name of Bank, I	Depository, etc.  Branch Banking and Trust Company  1909 K Street NW	
safety deposit be Name of Bank, I	Depository, etc.  Branch Banking and Trust Company  1909 K Street NW	
safety deposit be Name of Bank, I	Depository, etc.  Branch Banking and Trust Company  1909 K Street NW	
safety deposit be Name of Bank, I	Depository, etc.  Branch Banking and Trust Company  1909 K Street NW  Washington  CITY  STATE	-1152
safety deposit be Name of Bank, I	Depository, etc.  Branch Banking and Trust Company  1909 K Street NW  Washington  CITY  STATE  Depository, etc.	-1152 
Name of Bank, I	Depository, etc.  Branch Banking and Trust Company  1909 K Street NW  Washington  CITY  STATE  Depository, etc.	-1152 
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