

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED  
FIC MAIL CENTER

2007 JUL -5 AM 9:18  
Office Use Only

1. NAME OF  
COMMITTEE (In full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

GARY RUFF, PRESIDENT, 2008

ADDRESS (number and street)

1861 BROWN BLVD 621

(Check if address  
is changed)

ARLINGTON

TX

76006

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

GARYRUFF.DOT.COM@YAHOO.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

GARYRUFF.COM

COMMITTEE'S FAX NUMBER

682-292-1037

2. DATE

06 25 2007

3. FEC IDENTIFICATION NUMBER ►

C

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

GARY W. RUFF

Signature of Treasurer

*Gary W. Ruff*

Date

06 25 2007

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 Use Only				
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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2003)

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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 GARY RUFF

Candidate Party Affiliation  IND  Office Sought:  House  Senate  President State  TX  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

\_\_\_\_\_  
\_\_\_\_\_

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

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

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

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Write or Type Committee Name

GARY RUFF President 2008

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 GARY W RUFF

Mailing Address 1861 BROWN BLVD 621

ARLINGTON TX 76006

Title or Position CITY STATE ZIP CODE

TREASURER

Telephone number 817-354-0173

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 GARY W RUFF

Mailing Address 1861 BROWN BLVD 621

ARLINGTON TX 76006

Title or Position CITY STATE ZIP CODE

TREASURER

Telephone number 817-354-0173

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

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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.

WASHINGTON MUTUAL

Mailing Address

P.O. BOX 2437

CHATSWORTH CA 91313-2437

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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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 First Class Mail Postmarked  
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Overnight Delivery Service (Specify): Shipping Date  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*Jms*  
 PREPARER

*7/5/07*  
 DATE PREPARED

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