

Statement of Organization POLITICAL PARTY COMMITTEE

Type of Statement						
□ NEW		☑ AMENDED				
This committee is registering with the Virgin State Board of Elections for the first time.	ia This committee is fi	This committee is filing an amended Statement of Organization.				
State Board of Elections for the first time.	Date Changes Took Effect	ct SBE-issued Committee ID	BE-issued Committee ID			
	07/01/2016	PP-12-00358				
Name of Committee						
Republican Party of Chesapeake						
Full Name of Committee						
Party Affiliation						
☐ Democratic						
X Republican	Committee Mailing Add	magg				
	Committee Mailing Add	ress				
P.O. Box 15555		Q 1. //				
Street Address/P.O. Box		Suite #				
Chesapeake City	VA State	23328 Zip Code				
victoriap777@aol.com	State	Zip Couc				
Email Address		Business Phone				
Committee Website						
Area, Scope and Jurisdiction of the Committee						
☐ National Party Committe	(Please Check Only On	le)				
☐ State Party Committee						
□ Party Caucus						
·	Consenters)				
	County Party Committee (county:) City Party Committee (city: Chesaparka City					
· ·	☑ City Party Committee (city: Chesapeake City ☐ Local Magisterial District (locality: district:					
)			
	strict:					
☐ Virginia House District (district:)						
☐ Virginia Senate District (district:	_)				



Committee Activity						
Please provide the following dates. (If an action has not yet occurred for this committee, write "N/A")						
Date first contribution Date first expenditure Date committee depo	re made: ository designated:					
	Candio	dates this Comn	nittee Supp	orts or Opposes		
Full Name and Addre	ess of Candidate	Office Sought	F	Party Affiliation	Support or Oppose?	
(attach additional sheet	s if more space need	led)		_		
Committee Depository						
Towne Bank			N			
Name of Primary Financial Institution		Name of Other Financial Institution (if applicable)				
Chesapeake VA						
City State		City State				
Address Where Books are Maintained						
Address Where Books	1001 Copper Sto Street Address (P.O.	one Circle	table)	s	Suite #	
are Maintained	Chesapeake			VA	23320	
	City			State	Zip Code	



Statement of Organization POLITICAL PARTY COMMITTEE

Treasurer						
	Proffitt	Victoria				
Treasurer Information	Salutation Last Name	First Name	Middle Name Suffix			
Trousurer amoranaeron	victoriap777@aol.com	(757)) 630-7391			
	Email Address		ne Phone #			
	4004 Common Stome Circle					
Treasurer Residential	1001 Copper Stone Circle Street Address Apt #					
Address	Chesapeake VA		23320			
	City	State	Zip Code			
	1001 Copper Stone Circle		5.4.4			
Treasurer Business Address	Street Address/P.O. Box	Suite #				
	Chesapeake	VA	23320			
	City	State	Zip Code			
	Principal Cust	odian of the Books				
	☐ Check this box if the Principal Custodian of the Books is the same person as the Treasurer. If they are the same person, skip this section.					
Principal Custodian Information	Proffitt Salutation Last Name	Victoria First Name	Middle Name Suffix			
	victoriap777@aol.com Email Address	(757) 630-7391 Daytime Phone #				
		2 uj u				
	Principal Position or Title					
	4004.0					
Principal Custodian	1001 Copper Stone Circle Street Address Apt #					
Residential Address			_			
	Chesapeake City	VA State	23320 Zip Code			
	City	State	Zip code			
	1001 Copper Stone Circle					
Principal Custodian Business Address	Street Address/P.O. Box		Suite #			
	Chesapeake	VA	23320			
	City	State	Zip Code			
Additional Officers (optional)						
Additional Officers	Full Name	Title	Daytime Phone #			
	Full Name	Title	Daytime Phone #			



Statement of Organization POLITICAL PARTY COMMITTEE

Filing Method		
Please indicate the method by which this committee will submit its campaign finance reports:		
☑ File electronically using SBE's VAFiling Application.		
☐ File electronically using an SBE Approved Vendor (Please indicate Name of Vendor:)		
☐ File paper reports. (By choosing this option, I affirm that this committee: a) does not intend to accept contributions or make expenditures in excess of \$10,000 during the calendar year; or b) is a county, city, or local district political party that files disclosure reports on paper with the electoral board of that county or city.)		
Signature Date		
Statement of Treasurer		
I accept the appointment of Treasurer for this committee. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the <i>Code of Virginia</i>). I understand that I must truthfully report all monies and things of value which this political committee receives or expends in a timely manner. Civil penalties will be assessed in the manner required by the <i>Code of Virginia</i> for late or un-filed reports. I also understand that if I provide false information on any document submitted to the State Board of Elections that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.		
Signature Date		



Instructions for Completing This Form

• Submit the original, signed copy of this form to SBE at:

1100 Bank Street Richmond, VA 23219

- This form must be written in ink or typed or it will be rejected.
- An amended Statement is required to be filed within 10 days of the change if <u>any</u> of the information reported on this form changes.

Type of Statement

• Check the box that applies to the type of Statement that you are filing.

Name of Committee

- Please insert the full name of your committee. You may include the acronym but you must spell out all acronyms for your committee.
- Check the Party Affiliation box.
 - At present, there are only two organizations which meet the legal definition of "political party". All other organizations should complete the Political Action Committee Statement of Organization.
 - Women's, youth and other auxiliary party clubs do not meet the legal definition of "political party". These clubs should complete the Political Action Committee Statement of Organization.

Committee Mailing Address

- Insert the committee's primary mailing address.
 - o The address must be within the Commonwealth unless the committee is a National Party committee.
- Insert the committee's primary business phone, fax and email address.
- Insert the committee's website address (if one).

Area, Scope and Jurisdiction of the Committee

Please choose the designation that applies.

Committee Activity

• Enter the information requested.

Candidate's Supported or Opposed

• Indicate any and all candidates the committee intends to support or oppose.

Committee Depository

- Insert the name of the committee's primary depository (Bank Name).
- Insert the address of the committee's secondary depository (if one).
 - Depositories must be in an account located within the Commonwealth unless the committee is a National Party committee.

Address Where Books are Maintained

- Please list the address where the committee's records are maintained.
 - o This address must be in the Commonwealth unless the committee is a National Party committee.



Virginia State Board of Elections

Treasurer and Custodian of the Books Information

- Treasurer
 - o Insert the name, email and phone number of the treasurer.
 - o Insert the residence address of the treasurer.
 - The treasurer must be a resident of the Commonwealth unless the affiliated organization is headquartered outside of the Commonwealth, but registered with the State Corporation Commission.
- Custodian of the Books (if one)
 - You may leave this section blank if the treasurer also serves as the Custodian of the Books.
 *Note: The Custodian of the Books must be a resident of the Commonwealth of Virginia unless the affiliated organization is headquartered outside of the Commonwealth, but registered with the State Corporation Commission.
- Please list the names of any additional officers affiliated with the organization.

Filing Method

- Indicate whether the committee intends to file <u>all</u> of their campaign finance disclosure reports electronically.
- Electronic Filing Option
 - o If you choose to file electronically, log into the following Web site address: https://cf.elections.virginia.gov
- Approved Vendor Option
 - o If you choose to contract with a private company, SBE recommends that you use an "Approved Vendor." These companies meet SBE's standards for e-filing. Although you are free to use any company you wish, we cannot guarantee that the company you choose will completely comply with SBE's standards. As a result, your committee may end up paying penalties for incomplete, late or un-filed reports. For a list of "Approved Vendors" please visit our website: http://www.sbe.virginia.gov/cms/Campaign Finance/

Statement of Treasurer

Please read and sign the Statement.