

Type of Statement			
□ NEW	▲ AMENDED		
This committee is registering with the Virginia State Board of Elections for the first time.	This committee is filing an amended Statement of Organization.		
	Date Changes Took Effect	SBE-issued Committee ID	
	06/05/2019	PAC-15-00210	
	Name of Committee		
Virginia Free Enterprise PAC			
Full Name of Committee			
Committee Acronym (if applicable)			
☐ Check this box if this committee is establi	shed or controlled by a corporat	ion doing business in Virginia	
C	Committee Mailing Address		
PO Box 71596			
Street Address/P.O. Box		Suite #	
Henrico	VA	23255	
City	State	Zip Code	
john@forestcs.com	(804) 270-0791		
Email Address	Business Phone		
Committee Website	Fliated Organization on DA	C	
All	filiated Organization or PA	C .	
☐ Check this box if this committee is affiliated	with another organization or PA	C. If so, provide the following information:	
Full Name of Affiliated Organization			
Street Address/P.O. Box		Suite #	
City	State	Zip Code	
Relationship of this Committee to Affiliated Orga	nization		



Purpose of Committee			
Indicate the purpose of this Committee (please be as specific as possible):			
To promote and support candidates for	r the Virginia General	Assembly	
Candi	dates this Committee (skip to next section if suppo	ee Supports or Opposes orting a specific party)	
Full Name and Address of Candidate	Office Sought	Party Affiliation	Support or Oppose?
Candidate Sheet Attached with 14 Candidates			
(attach additional sheets if more space needed)			
Area, Scope and Jurisdiction of the Committee			
This Committee intends to participate in elections on the following levels: (check all that apply)			
 X Statewide elections X General Assembly elections X Local elections 			
If "Local Elections" is checked please list the cities, counties and/or towns the committee intends to be active in: 1) Henrico County 4)			



Treasurer				
	Mr. Selph	John	G.	
Treasurer Information	Salutation Last Name	First Name	Middle Name	Suffix
	john@forestcs.com		(804) 270-0791	
	Email Address		Daytime Phone #	
	3218 Matilda Cove #112			
Treasurer Residential Address	Street Address	Apt #		
Tudi ess	Henrico	VA	23294	
	City	State	Zip Code	;
	PO Box 71596			
Treasurer Business Address	Street Address/P.O. Box	Suite #		
	Henrico	VA	23255	
	City	State	Zip Code	:
	Principal Custo	odian of the Books		
	☐ Check this box if the Principal Care the same person, skip this section. Mr. Selph		s is the same person as the Treasu G.	rer. If they
Principal Custodian	Salutation Last Name	First Name	Middle Name	Suffix
Information	john@forestcs.com		(804) 270-0791	
	Email Address Daytime Phone #			
	Principal			
	Position or Title			
	3218 Matilda Cove #112			
Principal Custodian Residential Address	Street Address		Apt #	
	Henrico	VA	23294	
	City	State	Zip Code	;
	PO Box 71596			
Principal Custodian	Street Address/P.O. Box		Suite #	
Business Address	Henrico	VA	23255	
	City	State	Zip Code	:
Additional Officers (optional)				
Additional Officers	Senator Walter A. Stosch Sena	itor Walter A.	Officer1 8045	277798
	Full Name	,	Title Daytin	ne Phone #
	Full Name		Title Daytin	ne Phone #



Committee Depository				
Bank of America				
Name of Primary Financial Inst	titution		Name of Other Financial Inst	titution (if applicable)
Richmond	VA			
City	State	:	City	State
	A	ddress Where Boo	ks are Maintained	
	8501 Mayland	d Drive Ste 107		
Address Where Books are	Street Address (P.O. Boxes are not accep	stable) Suite #	
Maintained	Henrico		VA	23294
	City		State	Zip Code
		Committee	e Activity	
Please provide the following dates. (If an action has not yet occurred for Date contributions exceeded \$200: Date expenditures exceeded \$200: Date committee depository designated: Date treasurer appointed: 03/31/2015 04/21/2015 03/06/2015		or this committee, write "N/A	")	
		Filing M	Iethod	
Please indicate the method by which this committee will submit all required campaign finance reports: The 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 does not intend to accept contributions or make expenditures in excess of \$10,000 during the calendar year)				
Signature			Date	



Statement of Treasurer

Member or Employee Contributions not Required: Any stock or nonstock corporation, labor organization, membership organization, cooperative, or other group of persons may establish and administer for political purposes, and solicit and expend contributions for, a political action committee, provided that:

- 1. No political action committee shall make a contribution or expenditure by utilizing money or anything of value secured by physical force, job discrimination, financial reprisal, threat of force, or as a condition of employment.
- 2. Any person soliciting a contribution to a political action committee shall, at the time of solicitation, inform the person being solicited of (i) his right to refuse to contribute without any reprisal and (ii) the political purposes of the committee.

Committees Formed Between October 1 and Election Day: 24.2-949.6 & \$24.2-949.6 (D) requires any political action committee filing this form on or after October 1 and before the November election day in any odd numbered year (i) to file a campaign finance report for the committees activities within 24 hours of filing its Statement of Organization and (ii) to file reports within 24 hours of receiving any contribution or making an expenditure of \$500 or more during the period between the date of filing its statement of organization and election day.

Use of Candidate Name: Any PAC that intends to use the name of a candidate as part of the name of their PAC must file, along with this form, a copy of:

- the written authorization of the candidate consenting the use of his name; or
- the political committee's notice to the candidate of use of his/her name and evidence that the letter was received. The letter must be sent at least twenty-one days prior to the filing of this form.

If two candidates have the same last name, the political committee shall include the first name, or other initial or nickname, in the name of the political committee to identify which candidate is associated with the political committee.

the pointear committee to identify which candidate is associated with the point	ilear committee.
☐ I accept the appointment of Treasurer for this committee. I understand Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the <i>Code of Virg</i> and things of value which this political committee receives or expends in a tin required by the <i>Code of Virginia</i> for late or un-filed reports. I also understand submitted to the State Board of Elections that I may be subject to the provision	ginia). I understand that I must truthfully report all monies nely manner. Civil penalties will be assessed in the manner that if I provide false information on any document
Signature	Da te



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.

*** 24.2-949.6 & \$24.2-949.6 (D) requires any political action committee filing this form on or after October 1 and before the November election day in any odd numbered year (i) to file a campaign finance report for the committees activities within 24 hours of filing its Statement of Organization and (ii) to file reports within 24 hours of receiving any contribution or making an expenditure of \$500 or more during the period between the date of filing its statement of organization and election day.

Name of Committee

- Please insert the full name of your committee. You may include the acronym but you must spell out all acronyms for you committee.
- Check the box if this committee is established or controlled by a corporation which is headquartered outside of Virginia and is registered with the State Corporation Commission.

Committee Mailing Address

- Insert the committee's primary mailing address.
 - The address must be within the Commonwealth unless the affiliated organization is a business headquartered outside
 of the Commonwealth, but registered with the Virginia State Corporation Commission.
- Insert the committee's primary business phone, fax and email address.
- Insert the committee's website address (if one).

Affiliated Organization or PAC

- Please provide the name and contact information of the affiliated organization of the PAC.
- Indicate the nature of the relationship between the PAC and the affiliate.

Purpose of the Committee

• Indicate the primary purpose of the committee (e.g. health care, labor).

Candidate's Supported or Opposed

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

Area, Scope and Jurisdiction of the Committee

Please choose the designation that applies.

Treasurer and 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.

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 affiliated organization is headquartered outside of the Commonwealth, but registered with the State Corporation Commission.

Filing Method

- Indicate whether the committee intends to file <u>all</u> of their campaign finance disclosure reports electronically.
- Electronic Filing Option
 - If you choose to file electronically, log into the following Web site address: https://cf.elections.virgin
- 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.

1	Name: Dan Schmitt Office Sought: Board of Supervisors	Supported ————————————————————————————————————	10286 Staples Mill Rd Ste 218 Glen Allen VA 23060
2	Name: Emmett Hanger Office Sought: Senate of Virginia	Supported Political Party:	PO Box 2 Mount Solon VA 22843
3	Name: GayDonna Vandergriff Office Sought: House of Delegates	Supported Political Party:	3329 White Chimneys Court Glen Allen VA 23060
4	Name: Glen Sturtevant Office Sought: Senate of Virginia	Supported Political Party:	PO Box 2535 Midlothian VA 23113
5	Name: Heidi S. Barshinger Office Sought: Clerk of Court	Supported Political Party:	PO Box 29054 Henrico VA 23242
6	Name: John McGuire Office Sought: House of Delegates	Supported Political Party:	11357 Nuckols Rd Ste 156 Glen Allen VA 23059
7	Name: Lori A. Losi Office Sought: House of Delegates	Supported Political Party:	PO Box 3941 North Chesterfield VA 23235
8	Name: Mary Margaret Kastelberg Office Sought: House of Delegates	Supported Political Party:	PO Box 70365 Henrico VA 23255
9	Name: Owen Conway Office Sought: Commonwealth's Attorney	Supported Political Party:	PO Box 29203 Henrico VA 23242

Candidates Supported or Opposed

	Name: Patricia S. O'Bannon	Supported	8111 Rose Hill Road	
10	Office Sought: Board of Supervisors	Political Party:	Henrico VA 23229	
	Name: R. Lee Ware	Supported		
11	Office Sought: House of Delegates	Political Party:	PO Box 689 Powhatan VA 23139	
	Name: Robert Matson	Supported		
12	Office Sought: Sheriff	Political Party:	PO Box 911 Glen Allen VA 23060	
13	Name: Siobhan Dunnavant	Supported	PO Box 70849 Henrico VA 23255	
	Office Sought: Senate of Virginia	Political Party:		
	Name: Thomas M. Brannin	Supported	PO Box 71596 Henrico	
14	Office Sought: Board of Supervisors	Political Party:	VA 23255	