



Statement of Organization INAUGURAL COMMITTEE

Type of Statement							
<input type="checkbox"/> NEW This committee is registering with the Virginia State Board of Elections for the first time.	<input checked="" type="checkbox"/> AMENDED This committee is filing an amended Statement of Organization. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 50%; padding: 2px;">Date Changes Took Effect</td> <td style="width: 50%; padding: 2px;">SBE-issued Committee ID</td> </tr> <tr> <td style="text-align: center; padding: 2px;">11/21/2017</td> <td style="text-align: center; padding: 2px;">IC-17-00747</td> </tr> </table>			Date Changes Took Effect	SBE-issued Committee ID	11/21/2017	IC-17-00747
Date Changes Took Effect	SBE-issued Committee ID						
11/21/2017	IC-17-00747						
Committee Information							
Northam Inaugural Committee							
Full Name of Committee							
PO Box 597							
Street Address/P.O. Box			Suite #				
Richmond	47	23218					
City	State	Zip Code					
kbuchanan.inc@gmail.com		(202) 423-4742					
Email Address		Business Phone					
Committee Website							
Elected Official Information							
Northam	Ralph	Shearer					
Salutation	Last Name	First Name	Middle Name Suffix				
Residence Address		Apt #					
City	State	Zip Code					
Elected Office:							
<input type="checkbox"/> Governor <input type="checkbox"/> Lieutenant Governor <input type="checkbox"/> Attorney General <input type="checkbox"/> Other office: _____							
Committee Depository							
Wells Fargo							
Name of Primary Financial Institution		Name of Other Financial Institution (if applicable)					
McLean	VA						
City	State	City	State				



Statement of Organization INAUGURAL COMMITTEE

Treasurer				
Treasurer Information	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> Narasimhan Salutation Last Name </div> <div style="text-align: center;"> Shekar First Name </div> <div style="text-align: center;"> N Middle Name </div> <div style="text-align: center;"> Suffix </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 60%;"> ralph@ralphnortham.com Email Address </div> <div style="width: 40%;"> (804) 592-1106 Daytime Phone # </div> </div>			
Treasurer Residential Address	<div style="display: flex; justify-content: space-between;"> <div style="width: 80%;"> 2502 Sandburg Street Street Address </div> <div style="width: 20%;"> Apt # </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 40%;"> Dunn Loring City </div> <div style="width: 20%;"> 47 State </div> <div style="width: 40%;"> 22027 Zip Code </div> </div>			
Treasurer Business Address	<div style="display: flex; justify-content: space-between;"> <div style="width: 80%;"> 8000 Westpark Drive Street Address/P.O. Box </div> <div style="width: 20%;"> Suite # </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 40%;"> McLean City </div> <div style="width: 20%;"> 47 State </div> <div style="width: 40%;"> 22102 Zip Code </div> </div>			
Principal Custodian of the Books				
Principal Custodian Information	<input type="checkbox"/> 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. <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> Buchanan Salutation Last Name </div> <div style="text-align: center;"> Katherine First Name </div> <div style="text-align: center;"> M Middle Name </div> <div style="text-align: center;"> Suffix </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 60%;"> kbuchanan.inc@gmail.com Email Address </div> <div style="width: 40%;"> (202) 423-4742 Daytime Phone # </div> </div> <div style="margin-top: 5px;"> Principal Position or Title </div>			
Principal Custodian Residential Address	<div style="display: flex; justify-content: space-between;"> <div style="width: 80%;"> 1751 Potomac Greens Dr Street Address </div> <div style="width: 20%;"> Apt # </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 40%;"> Alexandria City </div> <div style="width: 20%;"> 47 State </div> <div style="width: 40%;"> 22314 Zip Code </div> </div>			
Principal Custodian Business Address	<div style="display: flex; justify-content: space-between;"> <div style="width: 80%;"> 1751 Potomac Greens Dr Street Address/P.O. Box </div> <div style="width: 20%;"> Suite # </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 40%;"> Alexandria City </div> <div style="width: 20%;"> 47 State </div> <div style="width: 40%;"> 22314 Zip Code </div> </div>			
Address Where Books are Maintained				
Address Where Books are Maintained	<div style="display: flex; justify-content: space-between;"> <div style="width: 80%;"> 1751 Potomac Greens Dr Street Address (P.O. Boxes are not acceptable) </div> <div style="width: 20%;"> Suite # </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 40%;"> Alexandria City </div> <div style="width: 20%;"> 47 State </div> <div style="width: 40%;"> 22314 Zip Code </div> </div>			



Statement of Organization INAUGURAL COMMITTEE

Filing Method

Please indicate the method by which this committee will submit its campaign finance reports:

☐ File electronically using **SBE's Electronic Filing Program**

☒ File electronically using an **SBE Approved Vendor**

(Please indicate Name of Vendor:) NGP VAN, Inc.

Signature

Date

Committee Activity

Please provide the following dates. (If an action has not yet occurred for this committee, write "N/A")

Date first contribution accepted: 11/14/2017

Date first expenditure made: 11/14/2017

Date committee depository designated: 11/14/2017

Date treasurer appointed: 11/14/2017

Date committee organized: 11/14/2017

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 *Code of Virginia*). 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 *Code of Virginia* 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

General Guidelines

- An original of this form must be submitted to the State Board of Elections at 1100 Bank Street, Richmond, VA 23219.
- All requested information on the form is **required** unless otherwise noted below.
- An amended Statement is required to be filed within 10 days of the change if **any** of the information reported on this form changes. Failure to amend this form in a timely fashion may result in civil penalties of up to **\$500** to be assessed according to the procedure described in §24.2-929 of the Code of Virginia.

Type of Statement

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

Committee Mailing Address

- Please insert the full name of your committee.
- Insert the committee's primary mailing address.
- Insert the committee's email address.
- Insert the committee's primary business phone and fax number.
- Insert the committee's website.

Elected Official Information

- Enter the name and residence address of the elected official for whom the Inaugural Committee is supporting.
- Indicate the elected office to which the individual has been elected.

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.

Treasurer and Books Information

- Treasurer
 - Insert the name and residential address of the person who will be responsible for maintaining and keeping accurate financial records and reporting these records on the prescribed forms
***Note:** The Treasurer must be a resident of the Commonwealth of Virginia.
 - Email Address
***Note:** An email address for the treasurer is required if the committee intends to file electronically (see below for e-filing requirements). The email address is optional for all other committees.
- 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.

Address Where Books are Maintained

***Note:** The books must be maintained at an address within the Commonwealth of Virginia.

(Continued on Next Page)

**Filing Method**

- Indicate whether the committee intends to file all 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.virgi>
- **Approved Vendor Option**
 - 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/