

Statement of Organization POLITICAL PARTY COMMITTEE

		Type of Statement			
⊠ NI	EW	□ 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		
PP-20-00	0003				
		Name of Committee			
Manassas Manassas P	ark Cities Democratic	Committee			
Full Name of Committee					
Party Affiliation					
D emocratic					
☐ Republican	C	ommittee Meiling Adduses			
		ommittee Mailing Address			
PO Box 4041					
Street Address/P.O. Box			Suite #		
Manassas			VA 20108		
City		State	Zip Code		
mmpcdc@gmail.com Email Address		(571) 358-9893 Business Phone			
	:td		Dusiness I none		
http://www.manassasc	itydemocrats.org				
Committee II essage	Area, Scop	e and Jurisdiction of the Co	ommittee		
		(Please Check Only One)			
	arty Committee				
☐ State Party	Committee				
☐ Party Cau	cus				
☐ County Pa	rty Committee (cour	nty:)		
☑ City Party	City Party Committee (city: Manassas City)				
☐ Local Mag	isterial District (loca	ılity:	_ district:)	
□ Congression	onal District (district	:			
□ Virginia H	ouse District (distric	t:)			
☐ Virginia Senate District (district:)					



Committee Activity					
Please provide the following dates. (If an	action has not yet occ	urred for this committee, write "N/A")			
Date first contribution accepted:	01/15/2020				
Date first expenditure made:	01/15/2020				
Date committee depository designated:	01/15/2020				
Date treasurer appointed:	01/15/2020				

Date treasurer appor	nicu.			
	Candid	lates this Comn	nittee Supports or Opp	oses
Full Name and Addre	ess of Candidate	Office Sought	Party Affiliatio	n Support or Oppose?
Candidate Sheet Attached with 3 Candidates				
(attach additional sheet	s if more space need		ee Depository	
BB&T				
Name of Primary Financial Institution		Name of Other Financial Institution (if applicable)		
Manassas	v	/ A		
City	St	ate	City	State
	A	ddress Where l	Books are Maintained	
	8928 Sweetbriar			
Address Where Books are Maintained	Street Address (P.O. Boxes are not acceptable) Suite #		Suite #	
ui o manitumou	Manassas		VA	20110
	City		State	Zip Code



Statement of Organization POLITICAL PARTY COMMITTEE

	Т	reasurer			
	Mrs. Fields	Patt			
Treasurer Information	Salutation Last Name	First Name	Middle Name Suffix		
	pfields555@yahoo.com	(703) 335-2671		
	Email Address Daytime Phone #		·		
	8928 Sweetbriar St.				
Treasurer Residential	Street Address Apt #				
Address	Manassas	VA	VA 20110		
	City	State	Zip Code		
	N/A Street Address/P.O. Box Suite #				
Treasurer Business Address			Suite #		
	N/A	VA State	20110		
	City	State	Zip Code		
	Principal Cus	stodian of the Books			
	\Box 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.				
	Mr. Freeland Salutation Last Name	Mike First Name	Middle Name Suffix		
Principal Custodian Information					
	mikefree43@gmail.com Email Address	(703) 409-0641 Daytime Phone #			
		Dayu	ine I noic "		
	co-chair Position or Title				
Principal Custodian	9002 Peabody St Street Address		Apt #		
Residential Address			_		
	Manassas	VA State	20110 Zip Code		
	City	State	Zip Code		
	N/A		Washington, DC 20515		
Principal Custodian Business Address	Street Address/P.O. Box		Suite #		
Dusiness Address	N/A	VA	20110		
	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.