

Statement of Organization POLITICAL PARTY COMMITTEE

		Type of Statement		
	□ NEW	□ 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.		
State Boar	d of Elections for the first time.	Date Changes Took Effect	SBE-issued Committee ID	
		01/06/2022	PP-12-00090	
		Name of Committee		
Portsmou	uth Democratic Committee			
Full Name	of Committee			
Party Affil	iation			
X	Democratic			
	Republican	Yammittaa Mailina Addussa		
		Committee Mailing Address		
P. O. Box				
Street Address/P.O. Box			Suite #	
Portsmou	ıth	VA State	23705	
City		State	Zip Code	
Email Add	nn@verizon.net		Business Phone	
Linui i i co	1035		Dusiness i none	
Committee	e Website			
	Area, Scor	pe and Jurisdiction of the Co	ommittee	
	National Party Committee	(Please Check Only One)		
	State Party Committee			
_	•			
	Party Caucus		,	
	County Party Committee (cou	_		
X	City Party Committee (city: P			
			_ district:)	
	Congressional District (district	t:)		
	Virginia House District (distric	ct:)		
	Virginia Senate District (distri	ct:)		



α	•	A 40 04	
Com	mittee	Activity	7

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

Date first contribution accepted: Date first expenditure made: Date committee depository designated: 04/02/2010 02/03/2011 04/02/2010

04/01/2010

Date treasurer appoi	nted:	04/01/2010		
	Candid	lates this Com	nittee Supports or Oppo	oses
Full Name and Addre	ess of Candidate	Office Sought	Party Affiliation	Support or Oppose?
Candidate Sheet Attached with 2 Candidates				
(attach additional sheet	s if more space need	led)		
		Commit	tee Depository	
Towne Bank				
Name of Primary Financi	al Institution		Name of Other Financial Insti	itution (if applicable)
Portsmouth	v	′ A		
City	Sta	ate	City	State
	A	ddress Where	Books are Maintained	
	3924 Merrifields			
Address Where Books are Maintained	Street Address (P.O.	Boxes are not accep	otable)	Suite #
	Portsmouth		VA	23703
	City		State	Zip Code



Statement of Organization POLITICAL PARTY COMMITTEE

	Trea	surer				
	Gunn	Curtis	Lee			
T	Salutation Last Name	First Name	Middle Name	Suffix		
Treasurer Information						
	curtis.gunn@verizon.net Email Address		(757) 593-4913 Daytime Phone #			
		24,	jemie i none "			
Treasurer Residential	3924 Merrifields Blvd.					
Address	Street Address	Apt #				
	Portsmouth	VA				
	City	State	Zip Cod	le		
	P.O. Box 783					
Treasurer Business Address	Street Address/P.O. Box	Suite #				
Treasurer Business Address	Portsmouth VA		23705	23705		
	City			Zip Code		
	Principal Custoo	lian of the Books				
	☐ Check this box if the Principal Cu are the same person, skip this section Gunn	n. Curtis	Lee	·		
Principal Custodian Information	Salutation Last Name	First Name	Middle Name	Suffix		
I I I I I I I I I I I I I I I I I I I	curtis.gunn@verizon.net (757) 593-4913					
	Email Address Daytime Phone #					
	Principal Position or Title					
	rostion of Title					
Principal Custodian	3924 Merrifields Blvd.					
Residential Address	Street Address	Apt#				
	Portsmouth	VA	23703			
	City	State	Zip Cod	le		
	P. O. Box 783					
Principal Custodian Business Address	Street Address/P.O. Box	Suite #				
Business Address	Portsmouth	VA 23705		1		
	City	State Zip (le		
	Additional Off	icers (optional)				
	Vernon Tillage	Chai	ir 757	-761-3921		
A 13'd 1 000	Full Name	Title		me Phone #		
Additional Officers	Yolanda Daughtry Full Name		/ice Chair 757	-582-8028 me 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.