

# Statement of Organization INAUGURAL COMMITTEE

	Type of Statement							
$\Box$ NEW		🖾 AMENDED						
This committee is registering with the Vin State Board of Elections for the first time.		This committee is filing an amended Statement of Organization.						
		nges Took Effect	SBE-issued Committee ID					
	03	3/10/2022	IC-21-00014					
Committee Information								
Jason Miyares Inaugural committee 2022								
Full Name of Committee								
PO Box 3193								
Street Address/P.O. Box								
Virginia Beach	VA		23454					
City	State		Zip Code					
info@Jasonmiyares.com	nmiyares.com (757) 699-1776							
Email Address								
https://www.jasonmiyares.com								
Committee Website								
	Elected Offi	icial Informati	on					
Miyares	Jason							
Salutation Last Name	First Na	me	Middle Name	Suffix				
1724 Jermyn Lane								
1724 Jenniyn Lane								
Residence Address		Apt #						
Residence Address	VA	Apt #	23454					
	VA State	Apt #	23454 Zip Code					
Residence Address Virginia Beach		Apt #						
Residence Address Virginia Beach		Apt #						
Residence Address Virginia Beach City		-						
Residence Address Virginia Beach City Elected Office:	State	-	Zip Code					
Residence Address   Virginia Beach   City   Elected Office:   Governor   Lieutenant Governor	State	□ Other office:	Zip Code					
Residence Address Virginia Beach City Elected Office:	State	□ Other office:	Zip Code					
Residence Address   Virginia Beach   City   Elected Office:   Governor   Lieutenant Governor   Southern Bank	State	□ Other office:	Zip Code Attorney General					



# Statement of Organization INAUGURAL COMMITTEE

Treasurer						
Treasurer Information	Atkinson Salutation Last Name clay@atkinsonrealty.com		Claiborne Middle Name 57) 285-7055	Suffix		
	Email Address	Daytime Phone #				
Treasurer Residential Address	5511 Dawson Rd Street Address		B Apt #			
	Virginia Beach	VA	VA 23451			
	City	State	Zip Code			
Treasurer Business Address	932 Laskin Road Street Address/P.O. Box		3rd Floor Suite #			
	Virginia Beach	VA	23451			
	City	State	Zip Code	1		
	Principal Cust	odian of the Books				
Principal Custodian Information	<ul> <li>□ Check this box if the Principal of are the same person, skip this sect Atkinson</li> <li>Salutation Last Name</li> <li>clay@atkinsonrealty.com</li> <li>Email Address</li> <li>COB</li> </ul>	ion. John First Name (7	e same person as the Treasu Claiborne Middle Name 257) 285-7055 ytime Phone #	rer. If they Suffix		
Principal Custodian Residential Address	Position or Title 5511 Dawson Road Street Address Virginia Beach	VA	B Apt # 2345			
Principal Custodian Business Address	City 932 Laskin Road	State	Zip Code 3rd Floor			
	Street Address/P.O. Box Virginia Beach	VA	Suite # 2345'	1		
	City	State	Zip Code			
	-	Books are Maintained	F COL			
Address Where Books are Maintained	932 Laskin Rd Street Address (P.O. Boxes are not ac	-	<b>3rd Floor</b> Suite #			
	Virginia Beach	VA	2345			
	City	State	Zip Code			



# Statement of Organization INAUGURAL COMMITTEE

Filing Method					
Please indicate the method by which this commit	tee will submit its campa	aign finance reports:			
File electronically using SBE's Electron	ic Filing Program				
□ File electronically using an <b>SBE Approv</b> (Please indicate Name of Vendor:)					
Signature		Date			
	Committee A	ctivity			
Please provide the following dates. (If an action l	has not vet occurred for t	this committee, write "N/A")			
Date first contribution accepted:	11/18/2021				
Date first expenditure made:		_			
Date committee depository designated:	11/18/2021	-			
	11/18/2021	_			
Date treasurer appointed:	11/18/2021	_			
Date committee organized:	11/10/2021	_			
Statement of Treasurer					
Campaign Finance Disclosure Act (Title 24.2, Ch and things of value which this political committe required by the <i>Code of Virginia</i> for late or un-fil	hapter 9.3 of the <i>Code of</i> e receives or expends in led reports. I also underst	nd that I am required to comply with the provisions of the <i>FVirginia</i> ). I understand that I must truthfully report all monies a timely manner. Civil penalties will be assessed in the manner tand that if I provide false information on any document visions 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 <u>anv</u> 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 <u>Code of Virginia</u>.

### **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 <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: <u>https://cf.el</u>ections.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: <u>http://www.sbe.virginia.gov/cms/Campaign\_Finance/</u>