

Type of Statement				
X 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.			
PAC-15-00901	Date Changes Took Effect	SBE-issued Committee ID		
	Name of Committee			
Prince George Unity PAC				
Full Name of Committee				
Committee Acronym (if applicable)				
□ Check this box if this committee is establ	ished or controlled by a corporat	ion doing business in Virginia		
	Committee Mailing Address			
8516 Holdsworth Road				
Street Address/P.O. Box		Suite #		
Disputanta City	VA	23842 7in Codo		
City pgunitypac@gmail.com	State Zip Code			
Email Address	(804) 991-3419 Business Phone			
	AII AUU1055 DUSIII055 F IIOII0			
Committee Website				
Af	filiated Organization or PA	C		
□ Check this box if this committee is affiliated with another organization or PAC. 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	anization			



Purpose of Committee

Indicate the purpose of this Committee (please be as specific as possible):

Support Qualified Candidates for Board of Supervisors in Prince George

Full Name and Address of Candidate	Office Sought	Party Affiliation	Support or Oppose?
Candidate Sheet Attached with 5 Candidates			
(attach additional sheets if more space need	ed)		
Area,	Scope and Jurisdict	ion of the Committee	
This Committee intends to p	articipate in elections	on the following levels: (ch	eck all that apply)
 Statewide elections General Assembly elections Local elections 			
If "Local Elections" is checked please list the	cities, counties and/or tow	ons the committee intends to be	active in:
1) Prince George County	4)		



Treasurer					
	Mr. Tucker	Raymond	Royce	I	
Treasurer Information	Salutation Last Name	First Name	Middle Name	Suffix	
	pgunitypac@gmail.com	(80	4) 991-3419		
	Email Address	Day	time Phone #		
	8516 Holdsworth Road				
Treasurer Residential Address	Street Address		Apt #		
11001055	Disputanta	VA	VA 23842		
	City	State	Zip C	ode	
	8516 Holdsworth Road				
Treasurer Business Address	Street Address/P.O. Box		Suite #		
	Disputanta	VA	238	42	
	City	State	Zip C	ode	
	Principal Cu	stodian of the Books			
	□ Check this box if the Principa are the same person, skip this so Mr. Tucker		same person as the Trea	surer. If they	
Principal Custodian	Salutation Last Name	First Name	Middle Name	Suffix	
Information	pgunitypac@gmail.com	(80	(804) 991-3419		
	Email Address Daytime Phone #				
	Principal				
	Position or Title				
	8516 Holdsworth Road				
Principal Custodian Residential Address	Street Address		Apt #		
	Disputanta	VA	2384	2	
	City	State	Zip C	ode	
	8516 Holdsworth Road				
Principal Custodian Business Address	Street Address/P.O. Box		Suite #		
	Disputanta	VA	2384	2	
	City	State	Zip C	ode	
	Additional	Officers (optional)			
Additional Officers	Full Name	Title	Day	time Phone #	
	Full Name	Title	Day	time Phone #	



Committee Depository					
Fort Lee Federal Credit U	nion				
Name of Primary Financial Ins	titution		Name of Other Financial Ir	nstitution (if applicable)	
Prince George	VA				
City	State	2	City	State	
	A	ddress Where Boo	oks are Maintained		
	8516 Holdsw	orth Road			
Address Where Books are	Street Address (P.O. Boxes are not accept		otable) Suite #		
Maintained	Disputanta		VA	23842	
	City		State	Zip Code	
		Committe	e Activity		
Date contributions exceeded \$200:Date expenditures exceeded \$200:Date committee depository designated:Date treasurer appointed:					
		Filing N	lethod		
Please indicate the method by which this committee will submit all required campaign finance reports:					
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.

□ 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

- 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 **any** 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
 - \circ $\;$ Insert the name, email and phone number of the treasurer.



- 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: <u>https://cf.el</u>ections.virgin
- 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>

Statement of Treasurer

• Please read and sign the Statement.

Candidates Supported or Opposed

1	Name: Alan R. Carmichael Office Sought: Supervisor	Supported ——— Political Party:	12461 Foxwood Drive Disputanta, VA 23842
2	Name: B. Renee Taylor Garnett Office Sought: Supervisor	Supported Political Party:	4092 Basswood Lane Disputanta, VA 23842
3	Name: Donald R. Hunter Office Sought: Supervisor	Supported Political Party:	6255 Hunter Place Prince George, VA 23875
4	Name: Otis R. Bryant Office Sought: Supervisor	Supported Political Party:	2702 Manchester Drive Prince George, VA 23875
5	Name: T.J. Webb Office Sought: Supervisor	Supported Political Party:	8500 Hines Road Disputanta, VA 23842