

Type of Statement				
$\Box$ 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.			
	Date Changes Took Effect	SBE-issued Committee ID		
	06/07/2019	PAC-12-00467		
	Name of Committee			
Republicans of the Commonwealth				
Full Name of Committee				
Committee Acronym (if applicable)				
$\Box$ Check this box if this committee is established or controlled by a corporation doing business in Virginia				
(	Committee Mailing Address			
PO Box 71596		<u> </u>		
Street Address/P.O. Box	Suite #			
Henrico	VA	23255-1596		
City	State Zip Code			
john@forestcs.com	(804) 270-0791			
Email Address	Business Phone			
Committee Website	filiated Organization or PA	n		
	iniated Organization of TA			
Check this box if this committee is affiliated with another organization or PAC. If so, provide the following information:				
Full Name of Affiliated Organization				
Fun Name of Anniateu Organization				
Street Address/P.O. Box		Suite #		
		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 Virginia Republican candidates

Candidates this Committee Supports or Opposes (skip to next section if supporting a specific party)				
Full Name and Address of Candidate	Office Sought	Party Affiliation	Support or Oppose?	
Candidate Sheet Attached with 8 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	neck all that apply)	
<ul> <li>Statewide elections</li> <li>General Assembly elections</li> <li>Local elections</li> </ul>				
If "Local Elections" is checked please list the 1) Henrico County	4)			
2) 3) Hanover County	5) . 6)			



	Treasurer			
	Mr. Selph	John	G.	
Treasurer Information	Salutation Last Name	First Name	Middle Name Suffix	
	john@forestcs.com	(804	) 270-0791	
	Email Address	Dayti	me Phone #	
Treasurer Residential Address	3218 Matilda Cove #112			
	Street Address		Apt #	
	Henrico	VA	23294	
	City	State	Zip Code	
	PO Box 71596			
Treasurer Business Address	Street Address/P.O. Box		Suite #	
	Henrico	VA	23255-1596	
	City	State	Zip Code	
	Principal C	ustodian of the Books		
	are the same person, skip this s Mr. Selph		ame person as the Treasurer. If they	
Principal Custodian Information	Salutation Last Name john@forestcs.com Email Address Principal Position or Title		Middle Name Suffix 2) 270-0791 me Phone #	
	john@forestcs.com Email Address Principal Position or Title	(804	Middle Name Suffix 2) 270-0791	
Information Principal Custodian	john@forestcs.com Email Address Principal	(804	Middle Name Suffix 2) 270-0791	
Information	john@forestcs.com Email Address Principal Position or Title 3218 Matilda Cove #112 Street Address	(804 Dayti	Middle Name Suffix 4) 270-0791 me Phone # Apt #	
Information Principal Custodian	john@forestcs.com Email Address Principal Position or Title 3218 Matilda Cove #112	(804	Middle Name Suffix 4) 270-0791 me Phone #	
Information Principal Custodian	john@forestcs.com Email Address Principal Position or Title 3218 Matilda Cove #112 Street Address Henrico City PO Box 71596	(804 Dayti	Middle Name Suffix 2) 270-0791 me Phone # Apt # 23294 Zip Code	
Information Principal Custodian Residential Address Principal Custodian	john@forestcs.com Email Address Principal Position or Title 3218 Matilda Cove #112 Street Address Henrico City	(804 Dayti	Middle Name Suffix 4) 270-0791 me Phone # Apt # 23294	
Information Principal Custodian Residential Address	john@forestcs.com Email Address Principal Position or Title 3218 Matilda Cove #112 Street Address Henrico City PO Box 71596	(804 Dayti	Middle Name Suffix  a) 270-0791 me Phone # Apt # 23294 Zip Code Suite # 23255-1596	
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		Committee I	Depository	
Union Bank and Trust				
Name of Primary Financial Ins	titution		Name of Other Financial Insti	tution (if applicable)
Glen Allen VA				
City	State	e	City	State
	A	Address Where Boo	ks are Maintained	
	8501 Maylan	d Drive Ste 107		
Address Where Books are	Street Address (P.O. Boxes are not accept		otable) Suite #	
Maintained	Henrico		VA	23294
	City		State	Zip Code
		Committee	Activity	
Please provide the following of Date contributions exceed Date expenditures exceed Date committee deposito Date treasurer appointed	eded \$200: ded \$200: ory designated:	10/13/2006 12/30/2006 07/31/2008 03/30/2016		)
		Filing M	lethod	
<ul> <li>Please indicate the method by</li> <li>☑ File electronically usi</li> <li>□ File electronically usi (Please indicate Name)</li> <li>□ File paper reports. (By choosing this \$10,000 during th</li> </ul>	ng SBE's VAFil ng an SBE Appr e of Vendor:) option, I affirm (	ling Application. roved Vendor		ts: ions or make expenditures in excess of
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: Dan Schmitt Office Sought: Board of Supervisors	Supported Political Party:	10286 Staples Mill Road Ste 218 Glen Allen VA 23060
2	Name: GayDonna Vandergriff Office Sought: House of Delegates	Supported  Political Party:	PO Box 1236 Glen Allen VA 23060
3	Name: Mary Margaret Kastelberg Office Sought: House of Delegates	Supported  Political Party:	PO Box 70365 Henrico VA 23255
4	Name: Patricia S. O'Bannon Office Sought: Board of Supervisors	Supported  Political Party:	8111 Rose Hill Road Henrico VA 23229
5	Name: Ryan T. McDougle Office Sought: Senate of Virginia	Supported Political Party:	PO Box 187 Mechanicsville VA 23111
6	Name: Siobhan S. Dunnavant Office Sought: Senate of Virginia	Supported  Political Party:	PO Box 70849 Henrico VA 23255
7	Name: Thomas M. Branin Office Sought: Board of Supervisors	Supported ——— Political Party:	3902 Liesfeld Place Glen Allen VA 23060
8	Name: W. Canova Peterson Office Sought: Board of Supervisors	Supported Political Party:	7231 Cold Harbor Road Mechanicsville VA 23111