

Statement of Organization POLITICAL PARTY COMMITTEE

Type of Statement								
	□ 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					
		06/18/2022	PP-12-00505					
Name of Committee								
6Th Cong	ressional District Republican Com	mittee						
<u>_</u>	of Committee							
Party Affil	igtion							
Party Affiliation ☐ Democratic								
X	Republican							
Committee Mailing Address								
218 Skyla	nd Ave.							
Street Add	ress/P.O. Box		Suite #					
Waynesboro		VA	22980					
City		State	Zip Code					
curtlilly@ntelos.net		(540) 256-7801						
Email Address			Business Phone					
Committee		as and Iunisdiction of the Co	ammittaa					
	Area, Scop	oe and Jurisdiction of the Co (Please Check Only One)	ommutee					
	National Party Committee							
	State Party Committee							
	Party Caucus							
	County Party Committee (cou	nty:)					
	City Party Committee (city:)					
	Local Magisterial District (local	ality:						
X	Congressional District (district	t: Election - District 6						
	Virginia House District (distric	ct:)						
	Virginia Senate District (distri	ct:)						



Committee Activity								
Please provide the following dates. (If an action has not yet occurred for this committee, write "N/A")								
Date first contribution Date first expenditure	01/01/2012		_ 					
Date committee depo Date treasurer appoi	06/18/2022							
Candidates this Committee Supports or Opposes								
Full Name and Addre	ess of Candidate	Office Sought		Party Affiliation	Support or Oppose?			
Candidate Sheet Attac Candidates								
(attach additional sheets if more space needed)								
Committee Depository								
Atlantic Union Bank								
Name of Primary Financial Institution			Name of Other Financial Institution (if applicable)					
Waynesboro \		/A						
		tate	City		State			
Address Where Books are Maintained								
	218 Skyland Av							
Address Where Books are Maintained	Street Address (P.O	s (P.O. Boxes are not accep			Suite #			
	Waynesboro			VA	22980			
	City			State	Zip Code			



Statement of Organization POLITICAL PARTY COMMITTEE

	,	Treasurer					
	Lilly	Sheila	E.				
Treasurer Information	Salutation Last Name	First Name	Middle Name	Suffix			
	curtlilly@ntelos.net	(5	(540) 256-7801				
	Email Address	Day	Daytime Phone #				
	218 Skyland Avel						
Treasurer Residential Address	Street Address		Apt #				
Tada Obb	Waynesboro	VA	2298	0			
	City	State	Zip Co	ode			
	218 Skyland Ave.						
T D' A 11	Street Address/P.O. Box		Suite #				
Treasurer Business Address	Waynesboro	VA	22980				
	City	State	Zip Co				
	Principal C	ustodian of the Books					
Principal Custodian Information	are the same person, skip this s Lilly Salutation Last Name	oal Custodian of the Books is the section. Sheila First Name	E Middle Name	Suffix			
Information	curtlilly@ntelos.net		(540) 256-7801				
	Email Address	Daytime Phone #					
	Principal						
	Position or Title						
Principal Custodian	218 Skyland Ave.						
Residential Address	Street Address		Apt #				
	Waynesboro	VA					
	City	State	Zip Co	ode			
	218 Skyland Ave.						
Principal Custodian Business Address	Street Address/P.O. Box		Suite #				
	Waynesboro	VA	2298				
	City	State	Zip Co	ode			
	Additiona	l Officers (optional)					
Additional Officers	Full Name	Title	Day	time Phone #			
	Full Name	Title	Day	time 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.