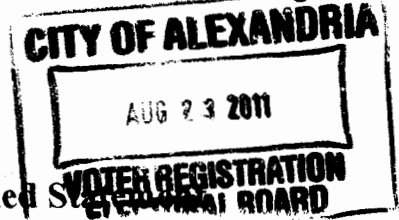




Statement of Organization  
CANDIDATE



New Candidate

Amended Statement

\*Please read instructions before completing this form.

Campaign Committee's Mailing Address			
Campaign Committee's Mailing Address	FRIENDS OF CHRIS MARSTON		
	Name of Candidate Campaign Committee		
	CLERK OF CIRCUIT COURT -	REPUBLICAN	11/8/2011
	Office Sought	District (if one)	Political Party
	PO BOX 26414		
	Street Address/PO Box		Suite #
ALEXANDRIA	VA	22313	
City	State	Zip	
info@marstonforclerk.com			
Email Address		Daytime Phone #	
Candidate's Information			
Candidate Information	MR MARSTON CHRISTOPHER M		
	Mr./Ms.	Last Name	First Name
	110 SHOOTERS CT		
	Residence Address		Suite #
	ALEXANDRIA	VA	22314
	City	State	Zip
chris.marston@gmail.com		703-627-4679	
Email Address		Daytime Phone #	
County or City			
ALEXANDRIA			
Treasurer Information			
Treasurer's Name and Address	MR CROFT GEORGE D		
	Mr./Ms.	Last Name	First Name
	7600 TREMAYNE PL 101		
	Residence Address		Suite #
	MCLEAN	VA	22102
	City	State	Zip
george-croft@hotmail.com		703-216-3043	
Email Address		Daytime Phone #	
County or City			
FAIRFAX			
Campaign Depository			
CHAIN BRIDGE BANK NA 1445-A LAUGHLIN AVE MCLEAN VA 22101			
Primary Financial Institution and Address		Secondary Financial Institution and Address (if applicable)	



## Statement of Organization CANDIDATE

<b>Signatures</b>	
<b>Candidate's Signature</b>	<p>I affirm that, to the best of my knowledge, all of the information on this form is complete and truthful. 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 also understand that my Treasurer and I must truthfully report, in a timely manner, all monies and things of value which this campaign committee receives or expends. Civil penalties shall be assessed for late or un-filed reports in the manner required by the <i>Code of Virginia</i>. I further understand that if I do not appoint a treasurer, or if at any time the treasurer's position is vacant, that I, as the candidate, will assume and accept all of the Treasurer's duties until the position is filled. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">               Candidate's Signature         </div> <div style="text-align: center;">             8/23/2011              Date         </div> </div>
<b>Treasurer's Signature</b>	<p>I accept the appointment of Treasurer of this campaign 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 campaign 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 non-filed reports. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">               Treasurer's Signature         </div> <div style="text-align: center;">             8-23-11              Date         </div> </div>
<b>Filing Method</b>	
<b>Electronic Filing Agreement</b>	<p><input checked="" type="checkbox"/> <b>Electronic Filer</b> - I, as treasurer of this campaign committee, intend to file all required campaign financial disclosure reports to the State Board of Elections by electronic means. I agree that if at anytime the campaign committee does not intend to file electronically, that I will submit an amended Statement of Organization stating such.</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> intend to electronically file using Virginia's <i>VAFiling</i> Program.</p> <p style="margin-left: 40px;"><input type="checkbox"/> I intend to use an SBE Approved Vendor</p> <p style="margin-left: 40px;">_____ (Please Enter Name of Vendor)</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">               Signature         </div> <div style="text-align: center;">             8-23-11              Date         </div> </div> <p style="margin-top: 20px;"><input type="checkbox"/> <b>Paper Filer</b> - I, as treasurer of this campaign committee, intend to file all required campaign financial disclosure reports on paper. I agree that if at any time the campaign committee does not intend to file on paper, that I must submit an amended Statement of Organization stating such.</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">             _____              Signature         </div> <div style="text-align: center;">             _____              Date         </div> </div>