

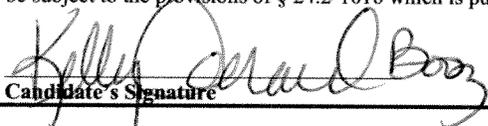
Statement of Organization CANDIDATE COMMITTEE

*Please read instructions before completing this form.

Type of Statement					
<input checked="" type="checkbox"/> NEW This committee is registering with the Virginia State Board of Elections for the first time.	<input type="checkbox"/> AMENDED This committee is filing an amended Statement of Organization.				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Date Changes Took Effect</td> <td style="width: 50%;">SBE-issued Committee ID</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		Date Changes Took Effect	SBE-issued Committee ID		
Date Changes Took Effect	SBE-issued Committee ID				
Committee Information					
Committee Information	<div style="font-size: 1.2em; font-family: cursive;">Friends of Kelly Carmichael Booz</div> Name of Candidate Campaign Committee				
	<div style="font-size: 1.2em; font-family: cursive;">P.O. Box 2937</div> Street Address/PO Box				
	<div style="font-size: 1.2em; font-family: cursive;">Alexandria</div> City				
	<div style="font-size: 1.2em; font-family: cursive;">VA</div> State				
	<div style="font-size: 1.2em; font-family: cursive;">22301</div> Zip Code				
	<div style="font-size: 1.2em; font-family: cursive;">Kellycbooz@gmail.com</div> Email Address				
<div style="font-size: 1.2em; font-family: cursive;">www.Kellycarmichaelbooz@gmail.com</div> Campaign Website					
Candidate Information					
Candidate Information	<div style="font-size: 1.2em; font-family: cursive;">Mrs. Booz Kelly Carmichael</div> Salutation Last Name First Name Middle Name Suffix				
	<div style="font-size: 1.2em; font-family: cursive;">307 East Braddock Rd.</div> Residence Address				
	<div style="font-size: 1.2em; font-family: cursive;">Alexandria</div> City				
	<div style="font-size: 1.2em; font-family: cursive;">VA</div> State				
	<div style="font-size: 1.2em; font-family: cursive;">22301</div> Zip Code				
	<div style="font-size: 1.2em; font-family: cursive;">Alexandria</div> County or City of Residence				
	<div style="font-size: 1.2em; font-family: cursive;">Kellycbooz@gmail.com</div> Email Address				
<input checked="" type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above.					
Election Information					
Election Information	<div style="font-size: 1.2em; font-family: cursive;">School Board</div> Office Sought				
	<div style="font-size: 1.2em; font-family: cursive;">B</div> District (if one)				
	<div style="font-size: 1.2em; font-family: cursive;">Democrat</div> Political Party				
<div style="font-size: 1.2em; font-family: cursive;">2012</div> Year of Election					
<input checked="" type="checkbox"/> November <input type="checkbox"/> May <input type="checkbox"/> Special					
<div style="font-size: 1.2em; font-family: cursive;">703-244-6396</div> Daytime Phone #					
<div style="font-size: 1.2em; font-family: cursive;">919195626</div> Voter Identification #					



Statement of Organization CANDIDATE COMMITTEE

Filing Method	
Filing Method	<p>Please indicate the method by which this committee will submit all required campaign finance reports:</p> <p><input checked="" type="checkbox"/> File electronically using SBE's Electronic Filing Application.</p> <p><input type="checkbox"/> File electronically using an SBE Approved Vendor (Please indicate Name of Vendor: _____)</p> <p><input type="checkbox"/> File paper reports.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;">  Signature </div> <div style="text-align: center;"> <p>5/25/12</p> Date </div> </div>
Signatures	
Candidate's Signature	<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: 20px;"> <div style="text-align: center;">  Candidate's Signature </div> <div style="text-align: center;"> <p>5/25/12</p> Date </div> </div>
Treasurer's Signature	<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: 20px;"> <div style="text-align: center;">  Treasurer's Signature </div> <div style="text-align: center;"> <p>5/25/12</p> Date </div> </div>