## Virginia State Board of Elections



## Statement of Organization CANDIDATE

CITY OF ALEXANDRIA

DEC 222008

New Candidate

VOTER REGISTRATION

☐ Amended Stateoteral BOARD

\*Please read instructions before completing this form.

	Francis H. 7 Name of Candidate Campaign Commit	FANNOY IV	
	Name of Candidate Campaign Commit	tee	
	City Council A	excity Kep.	5-5-09
	Office Sought District  Street Address/PO Box	(if one) Political Party	Date of Election
	Street Address/PO Box	4 2 3 2, 3	
	City O	State 7in	
	Street Address/PO Box Al-Exandra Vi City Frank, fannon agn Email Address	1ail.com 703-5	19-2845
	Email Address	Daytime Phone #	
	Mr. FIAN FANNON Mr./Ms. Last Name	Francis 11	1-7-68
	Mr./Ms. Last Name //05 Dcke Si		Date of Birth
	Residence Address	Suite #	,
	Alexandia	VM 223/4	
	City FAMADON ( Sen)	Suite #  223/4  State Zip  Tusticom 703-86/-  Daytime Phone #	County or City
	Email Address	Daytime Phone #	007
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	Mr./Ms. Last Name	Ohai First Name	03/30/1969
			Date of Birth
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	7 70000	T	
	Residence Address	Suite #	
	Residence Address  Alexandra	Suite #    Z   Z   Y	Alexandra
	Residence Address  Alexandria  City	Suite #  ZZ31  State Zip	Alwindran County or City
	Residence Address  Alexandra  City  John V Yuhan and Branch Address	Suite #    ZZ314     State   Zip     F jond Villat @ Mill. Low     Daytime Phone #	Alexandran County or City
	Residence Address  Alexandria City  John C-VP Yuhan 1 2  Email Address	Suite #    ZZ314     State   Zip     F   John Villat & Mil. Low     Daytime Phone #	Alwindren County or City TU3:589-838
0 1 1	Alexandra 1 City John-Ve Yuhou un 8 Emait Address	Suite #    ZZ31     State   Zip     F John Villad @ Much Low     Daytime Phone #	Alexandrae County or City 703 - 589 - 838
BurketA	Alexandria ( City  John-Ve Yuhan can a  Email Address	Suite #    ZZ314   State   Zip   Tond Villat @ Mix. Low   Daytime Phone #	Alexandrea County or City
1775 TA	Alexandra 1 City John-Ve Yuhou un 8 Emait Address	Suite #    ZZ31     State   Zip     F   John Villad & Michael Phone #	Alwindra County or City 703-589-838



## Statement of Organization CANDIDATE

	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 Code of Virginia). 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 Code of Virginia. 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.    Total Campaign Finance Disclosure Act (Title 24.2, and the provision of the Code of Virginia). I may be subject to the Date of the Treasurer's duties until the position 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.
	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 Code of Virginia). 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 Code of Virginia 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 of felony.  Treasurer's Signature  Date
	Electronic Filer - 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.  I intend to electronically file using Virginia's VAFiling Program.  I intend to use an SBE Approved Vendor  (Please Ener Name of Vendor)  Signature  Date
Versal some Control of the Control o	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.  I intend to electronically file using Virginia's VAFiling Program.  I intend to use an SBE Approved Vendor  (Please Enter Name of Vendor)