



* VIRGINIA *
DEPARTMENT of ELECTIONS

CITY OF ALEXANDRIA
Statement of Organization
Candidate
JAN 08 2015
**VOTER REGISTRATION
ELECTORAL BOARD**

*Please read instructions before completing this form.

| Type of Statement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|-------------------------------|---------------------|---------------|--------------------------------------|------------|-----------|-----------------------|------------------|-----------------------|--|---------|------------------|-------------------|----|-------|-------|------------|----------|------------------------|--------------|------|---------------|-----------------|--|------------------|-----------|--|--|-----------------------------|------------------------|--|--|------------------------|--------------|--|--|---------------|-----------------|--|--|---|--|--|--|
| <input checked="" type="checkbox"/> NEW This committee is registering with the Virginia Department 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%; margin-top: 10px;"> <tr> <td style="width: 50%;">Date Changes Took Effect</td> <td style="width: 50%;">Issued Committee ID</td> </tr> <tr> <td> </td> <td> </td> </tr> </table> | Date Changes Took Effect | Issued Committee ID | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date Changes Took Effect | Issued Committee ID | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Committee Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Committee Information | <table style="width: 100%;"> <tr> <td colspan="3" style="font-size: 1.2em;">Alexandrians For Kerry Donley</td> </tr> <tr> <td colspan="3">Name of Candidate Campaign Committee</td> </tr> <tr> <td colspan="3" style="font-size: 1.2em;">609 N. Pickett Street</td> </tr> <tr> <td>Street Address/PO Box</td> <td style="text-align: center;">Suite #</td> <td> </td> </tr> <tr> <td style="font-size: 1.2em;">Alexandria</td> <td style="font-size: 1.2em;">VA</td> <td style="font-size: 1.2em;">22304</td> </tr> <tr> <td>City</td> <td style="text-align: center;">State</td> <td style="text-align: center;">Zip Code</td> </tr> <tr> <td style="font-size: 1.2em;">kerry.donley@gmail.com</td> <td colspan="2" style="font-size: 1.2em;">703/901-1584</td> </tr> <tr> <td>Email Address</td> <td colspan="2">Daytime Phone #</td> </tr> <tr> <td colspan="3">Campaign Website</td> </tr> </table> | Alexandrians For Kerry Donley | | | Name of Candidate Campaign Committee | | | 609 N. Pickett Street | | | Street Address/PO Box | Suite # | | Alexandria | VA | 22304 | City | State | Zip Code | kerry.donley@gmail.com | 703/901-1584 | | Email Address | Daytime Phone # | | Campaign Website | | | | | | | | | | | | | | | | | | | |
| | Alexandrians For Kerry Donley | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Name of Candidate Campaign Committee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 609 N. Pickett Street | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Street Address/PO Box | Suite # | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Alexandria | VA | 22304 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| kerry.donley@gmail.com | 703/901-1584 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Email Address | Daytime Phone # | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Campaign Website | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Candidate Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Candidate Information | <table style="width: 100%;"> <tr> <td style="font-size: 1.2em;">Donley</td> <td style="font-size: 1.2em;">Kerry</td> <td style="font-size: 1.2em;">J.</td> <td> </td> </tr> <tr> <td>Salutation</td> <td>Last Name</td> <td>First Name</td> <td>Middle Name</td> </tr> <tr> <td colspan="4" style="font-size: 1.2em;">609 N. Pickett Street</td> </tr> <tr> <td colspan="3">Residence Address</td> <td style="text-align: center;">Apt #</td> </tr> <tr> <td style="font-size: 1.2em;">Alexandria</td> <td style="font-size: 1.2em;">VA</td> <td style="font-size: 1.2em;">22304</td> <td> </td> </tr> <tr> <td>City</td> <td style="text-align: center;">State</td> <td colspan="2" style="text-align: center;">Zip Code</td> </tr> <tr> <td style="font-size: 1.2em;">Alexandria</td> <td colspan="3" style="font-size: 1.2em;">226763536</td> </tr> <tr> <td>County or City of Residence</td> <td colspan="3">Voter Identification #</td> </tr> <tr> <td style="font-size: 1.2em;">kerry.donley@gmail.com</td> <td colspan="3" style="font-size: 1.2em;">703-901-1584</td> </tr> <tr> <td>Email Address</td> <td colspan="3">Daytime Phone #</td> </tr> <tr> <td colspan="4"> <input type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above. </td> </tr> </table> | Donley | Kerry | J. | | Salutation | Last Name | First Name | Middle Name | 609 N. Pickett Street | | | | Residence Address | | | Apt # | Alexandria | VA | 22304 | | City | State | Zip Code | | Alexandria | 226763536 | | | County or City of Residence | Voter Identification # | | | kerry.donley@gmail.com | 703-901-1584 | | | Email Address | Daytime Phone # | | | <input type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above. | | | |
| | Donley | Kerry | J. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Salutation | Last Name | First Name | Middle Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 609 N. Pickett Street | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Residence Address | | | Apt # | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Alexandria | VA | 22304 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Alexandria | 226763536 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| County or City of Residence | Voter Identification # | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| kerry.donley@gmail.com | 703-901-1584 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Email Address | Daytime Phone # | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Election Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Election Information | <table style="width: 100%;"> <tr> <td style="font-size: 1.2em;">Mayor</td> <td>District (if one)</td> </tr> <tr> <td>Office Sought</td> <td> </td> </tr> <tr> <td style="font-size: 1.2em;">Democratic</td> <td style="font-size: 1.2em;">2015</td> </tr> <tr> <td>Political Party</td> <td>Year of Election</td> </tr> <tr> <td> </td> <td> <input checked="" type="checkbox"/> November <input type="checkbox"/> May <input type="checkbox"/> Special </td> </tr> <tr> <td> </td> <td style="text-align: center;">Type of Election</td> </tr> </table> | Mayor | District (if one) | Office Sought | | Democratic | 2015 | Political Party | Year of Election | | <input checked="" type="checkbox"/> November <input type="checkbox"/> May <input type="checkbox"/> Special | | Type of Election | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Mayor | District (if one) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Office Sought | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Democratic | 2015 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Political Party | Year of Election | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input checked="" type="checkbox"/> November <input type="checkbox"/> May <input type="checkbox"/> Special | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Type of Election | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |



| Treasurer Information | |
|---|--|
| Treasurer Information | Krahn Sally Ann Kernick Salutation Last Name First Name Middle Name Suffix |
| | 209 W. Mt. Ida Avenue Residence Address Apt # |
| | Alexandria VA 22305 City State Zip Code |
| | Alexandria 704020791 County or City of Residence Voter Identification # |
| | sallyannkk@aol.com 703-395-8704 Email Address Daytime Phone # |
| | <input checked="" type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above. |
| Campaign Depository | |
| John Marshall Bank Name of Primary Financial Institution | Name of Other Financial Institution (if applicable) |
| Alexandria VA City State | City State |
| Committee Activity | |
| Dates of Activity | Please provide the following dates. (If an action has not yet occurred for this committee, write "N/A") |
| | Date first contribution accepted: _____ |
| | Date first expenditure made: <u>N/A</u> |
| | Date campaign depository designated: <u>1/6/15</u> |
| | Date filing fee paid for party nomination: <u>N/A</u> |
| | Date Statement of Qualification filed: _____ |
| Date treasurer appointed: <u>1/5/15</u> | |

(continued on next page)



| 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 ELECT's Electronic Filing Application.</p> <p><input type="checkbox"/> File electronically using an ELECT Approved Vendor (Please indicate Name of Vendor: _____)</p> <p><input type="checkbox"/> File paper reports.</p> <p style="margin-top: 20px;"> <i>Sally Ann K. Krahn</i> 1-5-15 </p> <p style="margin-top: 5px;"> <i>Sally Ann K. Krahn</i> 1-5-15 </p> |
| 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 Department 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> <p style="margin-top: 20px;"> <i>Kenny Jones</i> 1/5/15 </p> <p style="margin-top: 5px;"> <i>Kenny Jones</i> 1/5/15 </p> |
| 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 Department 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> <p style="margin-top: 20px;"> <i>Sally Ann K. Krahn</i> 1/5/15 </p> <p style="margin-top: 5px;"> <i>Sally Ann K. Krahn</i> 1/5/15 </p> |