



Commonwealth of Virginia  
 Voter Registration  
 OCT 19 2017  
 CITY OF ALEXANDRIA

## Statement of Organization CANDIDATE COMMITTEE

\*Please read instructions before completing this form.

Type of Statement				
<input checked="" type="checkbox"/> <b>NEW</b>  This committee is registering with the Virginia State Board of Elections for the first time.  <b>CC-17-00704</b>	<input type="checkbox"/> <b>AMENDED</b>  This committee is filing an amended Statement of Organization.			
	Date Changes Took Effect	SBE-issued Committee ID		
Committee Information				
<b>Committee Information</b>	<b>Friends of Dak Hardwick</b>			
	Name of Candidate Campaign Committee			
	<b>5181 Brawner Place</b>			
	Street Address/PO Box		Suite #	
	<b>Alexandria</b>	<b>47</b>	<b>22304</b>	
	City	State	Zip Code	
<b>dakhardwick@gmail.com</b>	<b>571-215-3008</b>			
Email Address	Daytime Phone #			
<b>http://www.empoweralx.com</b>				
Campaign Website				
Candidate Information				
<b>Candidate Information</b>	<b>Hardwick</b>	<b>Derek</b>		
	Salutation	Last Name	First Name	Middle Name
		<b>5181 Brawner Place</b>		
	Residence Address		Apt #	
	<b>Alexandria</b>	<b>47</b>	<b>22304</b>	
	City	State	Zip Code	
	<b>ALEXANDRIA CITY</b>	<b>919807579</b>		
	County or City of Residence	Voter Identification #		
<b>dakhardwick@gmail.com</b>	<b>571-215-3008</b>			
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.				
Election Information				
<b>Election Information</b>	<b>Member City Council</b>		<b>Alexandria City</b>	
	Office Sought		District (if one)	
	<b>Democratic</b>	<b>2018</b>	<input checked="" type="checkbox"/> <b>November</b>	<input type="checkbox"/> <b>May</b> <input type="checkbox"/> <b>Special</b>
	Political Party	Year of Election	Type of Election	



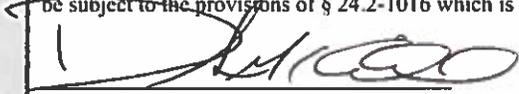
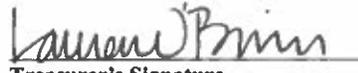
## Statement of Organization CANDIDATE COMMITTEE

Treasurer Information					
<b>Treasurer Information</b>	<b>O'Brien</b>	<b>Lauren</b>			
	Salutation	Last Name	First Name	Middle Name	
	815 N Patrick Street		306		
	Residence Address		Apt #		
	Alexandria		47		22314
	City		State		Zip Code
	ALEXANDRIA CITY		918745380		
County or City of Residence		Voter Identification #			
lobrien11@yahoo.com		703-761-3902			
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		47			
City		State		City	
State		State			
Committee Activity					
<b>Dates of Activity</b>	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:	_____			
	Date campaign depository designated:	_____			
	Date filing fee paid for party nomination:	_____			
	Date Statement of Qualification filed:	_____			
	Date treasurer appointed:	10/19/2017			

(continued on next page)



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Filing Method	
<b>Filing Method</b>	<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;"> <u>10/19/2017</u>                      Date                 </div> </div>
Signatures	
<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: 20px;"> <div style="text-align: center;">                       Candidate's Signature                 </div> <div style="text-align: center;"> <u>10/19/2017</u>                      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: 20px;"> <div style="text-align: center;">                       Treasurer's Signature                 </div> <div style="text-align: center;"> <u>10/19/17</u>                      Date                 </div> </div>