



# Statement of Organization CANDIDATE COMMITTEE

MAR 26 2015

VOTER REGISTRATION  
ELECTORAL BOARD

\*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-15-00189</b>	<input type="checkbox"/> <b>AMENDED</b>  This committee is filing an amended Statement of Organization.				
<table border="1" style="width: 100%;"> <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					
<b>Committee Information</b>	<b>Joe Murray for State Senate</b>				
	Name of Candidate Campaign Committee				
	<b>PO Box 26141</b>				
	Street Address/PO Box				
	<b>Alexandria</b>				
	City				
<b>chris@electioncfo.com</b>					
Email Address					
<b>www.murrayforva.com</b>					
Campaign Website					
Candidate Information					
<b>Candidate Information</b>	<b>Murray</b> <b>Joseph</b> <b>R</b>				
	Salutation   Last Name                      First Name                      Middle Name                      Suffix				
	<b>1024 N Pelham St</b>				
	Residence Address				
	<b>Alexandria</b>				
	City				
	<b>ALEXANDRIA CITY</b>				
	County or City of Residence				
<b>joemurray7@gmail.com</b>					
Email Address					
<b>919899727</b>					
Voter Identification #					
<b>703-307-1274</b>					
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 Senate Of Virginia</b> <b>State Senate - 39th District</b>				
	Office Sought				
	<b>Republican</b> <b>2015</b> <input checked="" type="checkbox"/> November <input type="checkbox"/> May <input type="checkbox"/> Special				
	Political Party                      Year of Election                      Type of Election				



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Treasurer Information					
<b>Treasurer Information</b>		<b>Marston</b>	<b>Christopher</b>	<b>M</b>	
	Salutation	Last Name	First Name	Middle Name	
	Residence Address		Apt #		
	<b>110 Shooters Ct</b>		<b>VA</b>	<b>22314-464</b>	
	City		State	Zip Code	
	<b>Alexandria</b>		<b>917572194</b>		
	County or City of Residence		Voter Identification #		
Email Address		Daytime Phone #			
<b>chris@electioncfo.com</b>		<b>703-627-4679</b>			
<input checked="" type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above.					
Campaign Depository					
Name of Primary Financial Institution			Name of Other Financial Institution (if applicable)		
<b>Chain Bridge Bank, NA</b>					
City	State	City	State		
<b>McLean</b>	<b>VA</b>				
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:	<b>03/19/2015</b>			
	Date filing fee paid for party nomination:	_____			
	Date Statement of Qualification filed:	_____			
Date treasurer appointed:	<b>03/19/2015</b>				

(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 type="checkbox"/> File electronically using SBE's Electronic Filing Application.</p> <p><input checked="" type="checkbox"/> File electronically using an SBE Approved Vendor (Please indicate Name of Vendor: <u>ACISTAR</u>)</p> <p><input type="checkbox"/> File paper reports.</p> <p style="margin-top: 20px;"><u><i>[Signature]</i></u> Signature</p> <p style="text-align: right; margin-right: 50px;"><u>3/19/15</u> Date</p>
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> <p style="margin-top: 20px;"><u><i>[Signature]</i></u> Candidate's Signature</p> <p style="text-align: right; margin-right: 50px;"><u>3/19/2015</u> Date</p>
<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> <p style="margin-top: 20px;"><u><i>[Signature]</i></u> Treasurer's Signature</p> <p style="text-align: right; margin-right: 50px;"><u>3/19/15</u> Date</p>