



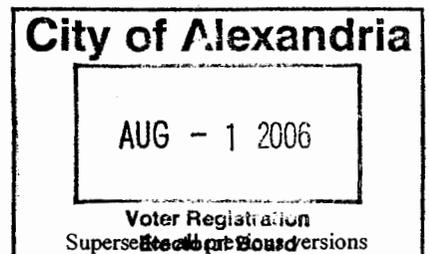
Statement of Organization CANDIDATE

New Candidate

Amended Statement

*Please read instructions before completing this form.

Candidate's Information			
Candidate Information	Mr./Ms.	Mrs. Ticer	Patricia
	Last Name	Senate	30 th
	First Name	Democrat	11/2007
	Office Sought	District (if one)	Political Party
	Street Address (Residence)	512 Prince Street	
	City	State	Zip
	Alexandria	VA	22314
	lesalexdem@yahoo.com		703 598 8710
	Email Address (*See Instructions)		Daytime Phone #
Campaign Committee's Mailing Address			
Campaign Committee's Mailing Address	Ticer for Senate		
	Name of Candidate Campaign Committee		
	PO Box 1726		
	Street Address/PO Box		
	Alexandria VA		
	City		
	State	Zip	Suite #
	VA	22307	
	lesalexdem@yahoo.com		703 598 8710
	Email Address		Daytime Phone #
Treasurer's Information			
Treasurer's Name and Address	Mr./Ms.	Ms. Smith	Lauren
	Last Name		4/10/1977
	First Name	24 D Auburn Court	
	Street Address (Residence)	Alexandria VA	
	City	State	Zip
		Alexandria	VA
	lesalexdem@yahoo.com		703 598 8710
	Email Address		Daytime Phone #
Campaign Depository			
Burke + Herbert Bank + Trust			
S. Fairfax Street, Alex VA			
Primary Financial Institution and Address		Secondary Financial Institution and Address (if applicable)	
22314			





Statement of Organization CANDIDATE

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 of the <u>Code of Virginia</u>). 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 non-filed reports in the manner required by the <u>Code of Virginia</u>. 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.</p> <p style="font-size: 1.2em; font-family: cursive;">Patricia S. Heer</p> <p style="text-align: right; font-size: 1.2em; font-family: cursive;">7/25/06</p> <p style="font-size: 0.8em;">Candidate's Signature Date</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 of the <u>Code of Virginia</u>). 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 <u>Code of Virginia</u> for late or non-filed reports. I also understand that if I provide false information on any document submitted to the State Board of Elections that I may be subject to a Class 5 felony.</p> <p style="font-size: 1.2em; font-family: cursive;">L. Smith</p> <p style="text-align: right; font-size: 1.2em; font-family: cursive;">7/25/06</p> <p style="font-size: 0.8em;">Treasurer's Signature Date</p>

Please Note: The section below is not required to be submitted by candidates for local office. This page is required to be filled out only by candidates for the General Assembly or for Statewide offices.

Filing Method	
Electronic Filing Agreement <small>(Does Not Apply to Candidates for Local Office)</small>	<p><input checked="" type="checkbox"/> Electronic Filer - I, as treasurer of this campaign committee, intend to file all required campaign finance 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.</p> <p><input checked="" type="checkbox"/> I intend to electronically file using Virginia's <i>VA Filing</i> Program.</p> <p><input type="checkbox"/> I intend to use an SBE Approved Vendor</p> <p style="text-align: center; font-size: 0.8em;">(Please Enter Name of Vendor)</p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p style="font-size: 1.2em; font-family: cursive;">L. Smith</p> <p style="text-align: right; font-size: 1.2em; font-family: cursive;">7/25/06</p> <p style="font-size: 0.8em;">Signature Date</p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p><input type="checkbox"/> Paper Filer - I, as treasurer of this campaign committee, understand that if I choose to file this campaign's finance disclosure reports on paper that I must submit the reports to the State Board of Elections and to the electoral board where the candidate resides.</p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p style="font-size: 0.8em;">Signature Date</p>