



Statement of Organization
POLITICAL PARTY COMMITTEE REGISTRATION
ELECTORAL BOARD

New Committee

Amended Statement

ALEXANDRIA REPUBLICAN CITY COMMITTEE

Insert full name of committee (you may include acronyms, but please spell them out)

PO BOX 245

Street/PO Box (*See Instructions)

ALEXANDRIA

VA

22313

City

State

Zip Code

(703) 627-4679

(703) 997-2544

TREASURER@ALEXGOP.ORG

Business Phone

Fax

E-Mail Address (*see instructions)

Full Name and Address of Candidate(s)	Office Sought	Party Affiliation	Support or Oppose?

BORKE & HERBERT BANK & TRUST CO.

Primary Bank Name or Depository

ALEXANDRIA, VA

Address of Depository

CHAIN BRIDGE BANK, NA

Secondary Bank Name or Depository

MCLEAN VA

Address of Depository

- National Party Committee
- State Party Committee
- County Party Committee
- City Party Committee
- Local Magisterial District

- Party Caucus
- Legislative District Party Committee
(District _____)
- Congressional
- Virginia House
- Virginia Senate



Statement of Organization POLITICAL PARTY COMMITTEE

Treasurer	Mr./Ms.	ME MARSTEN	CHRIS
		Last Name	First Name
		N/A	
	Business Address, City, State and Zip Code		
	110 SHOOTERS CT		—
Principal Custodian of the Books	Street Address (Residence)		Suite #
	ALEXANDRIA VA 22314		
	City, State and Zip Code		
	TREASURER @ ALEX GOP. ORG		763-627-4679
	Email Address (*see instructions)		Daytime Phone #
Address Where Books are Maintained	SAME AS TREASURER		
	Mr./Ms.	Last Name	First Name
	Business Address, City, State and Zip Code		
	Street Address (Residence)		Suite #
	City, State and Zip Code		
Email Address (*see instructions)		Daytime Phone #	
Address Where Books are Maintained	110 SHOOTERS CT		—
	Street Address (P.O. Boxes are Not Acceptable)		Suite #
	ALEXANDRIA VA 22314		
		City, State and Zip Code	



Electronic Filer - I, as treasurer of this political action 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, I will submit an amended Statement of Organization stating such.

I intend to electronically file using SBE's *VAFiling Program*.

I intend to use an **SBE Approved Vendor** (please indicate name of vendor): _____

[Handwritten Signature]
Signature

1/17/2010
Date

Paper Filer - I, as treasurer of this political committee, declare that this committee does not intend to accept contributions or make expenditures in excess of \$10,000 during this calendar year; or, that this committee is a county, city or local district committee and therefore exempt from the electronic filing requirement.

Signature

Date

I accept the appointment of Treasurer for this 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 political 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 un-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 the provisions of § 24.2-1016 which is punishable by a Class 5 felony.

[Handwritten Signature]
Signature

1/17/2010
Date

FOR SBE OFFICE USE ONLY	
DATE ENTERED:	_____
ENTERED BY:	_____
COMMITTEE ID:	_____
CIRCLE ONE N or A	