

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

5th Congressional District of Virginia Republican Committee

ADDRESS (number and street) 720 Megan Lane

(Check if address is changed)

Shipman VA 22971 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) Marian_Dixon@msn.com

Optional Second E-Mail Address ChairmanGOP@outlook.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) http://www.5thdistrictva.gop/

2. DATE 05 / 30 / 2022

3. FEC IDENTIFICATION NUMBER C C00454751

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dixon, Marian, , Mrs.,

Signature of Treasurer Dixon, Marian, , Mrs., [Electronically Filed] Date 05 / 30 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

5. TYPE OF COMMITTEE:

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State VA District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a SUB (National, State or subordinate) committee of the REP (Democratic, Republican, etc.) Party

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
- (g) This committee is an independent expenditure-only political committee (Super PAC).
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).
 - In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

- (i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____

2. _____

C _____

C _____

Write or Type Committee Name

5th Congressional District of Virginia Republican Committee

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

REPUBLICAN PARTY OF VIRGINIA INC

[Grid lines for organization name]

Mailing Address

115 EAST GRACE STREET

[Grid lines for address line 2]

RICHMOND

VA

23219

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Dixon, Marian, , Mrs.,

Full Name

[Grid lines for full name]

Mailing Address

720 Megan Lane

[Grid lines for address line 2]

Shipman

VA

22971

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

[Grid lines for title]

Telephone number

434

263

6694

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Dixon, Marian, , Mrs.,

Full Name of Treasurer

[Grid lines for full name]

Mailing Address

P. O. Box 75

[Grid lines for address line 2]

Lovingson

VA

22949

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

[Grid lines for title]

Telephone number

434

263

6694

Full Name of Designated Agent Buchanan, Richard, , Mr.,

Mailing Address P. O. Box 1411
Clarksville VA 23927
CITY STATE ZIP CODE

Title or Position Chairman Telephone number 540 497 1554

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Truist
Mailing Address P. O. Box 130
93 Front Street
Lovingsston VA 22949
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address
CITY STATE ZIP CODE