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FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

PORIVI I		(See instructio	ns)	2008 A	[Bifficerrick out] M 10: 09
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	and from a sugar-
Second Distric	t Republican Co	mmittee of Virgir	jia 		ليبيبين
L	<u> </u>		<u> </u>		
ADDRESS (number and s	street) 505	S Independence	Blvd Ste 201		لتتستيت
(Check if addre	ss			<u> </u>	ليبيبين
is changed)	Virg	inia Beach		LYA	23452
COMMITTEE'S E-MAI	u ADDDESS	•	CITY	STATE	ZIP CODE
john@forestcs					
	11111				
COMMITTEE'S WEB	PAGE ADDRESS (I	JRL)			
<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>
	· · · · · · · · · · · · · · · · · · ·	<u>.l. l. l. l. l. l. l. l</u>			
COMMITTEE'S FAX N 8044214183	NUMBER	_ا	·		
2. DATE M M M 0.7	7 29 / Y	2008			
3. FEC IDENTIFICA	TION NUMBER	ž.) de smired	C		
4. IS THIS STATEM	IENT 🚺 NEV	V (N) OR	AMENDED (A)		·
I certify that I have examin	ned this Statement and	to the best of my know	ledge and belief it is true, correct and	complete	
Type or Print Name of	Treasurer <u>J</u>	5hm G. S	Selph		
Signature of Treasure	Electronically Fil	ed by Tol	The ph	Date 0.7	[1] [20,08]
NOTE: Submission of fals			subject the person signing this Statem		
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 12/2007)

		FEC F	orm 1 (Revised 12/2007)			Page 2	
5.	TYPE	OF CO	DMMITTEE (Check One)				
	Cand	id <u>ate</u> C	ommittee:				
	(a)		This committee is a principal campaign committee. (Complete	e the candidate infor	rmation below.)		
	(b)		This committee is an authorized committee, and is NOT a prininformation below.)	ncipal campaign cor	mmittee. (Comp	lete the candidate	
	Name Cand	e of lidate	<u> </u>	<u>.'-!-lll</u>	<u></u>	<u></u>	1
		lidate Affiliati	on Office House	Senate	President	State District	Seeman in the se
	(c)		This committee supports/opposes only one candidate, and is I	NOT an authorized	committee.		
	Name Cand	e of lidate		<u>i </u>	<u>- </u>	<u> </u>	. J <u>'</u>
	Party	Comm	littee:				
	(d)	X	This committee is a SUB (National, State (or subordinate) co	mmittee of the	REP	(Democratic, Republican, etc.)	Party.
	D = 1141						
		ICAI ACI	ion Committee (PAC):		- I' C \ lb		
	(e)		This committee is a separate segregated fund. (Identify conne	cted organization of	n line 6.) its cor	nected organization	on is a:
			Corporation Corporation w	o Capital Stock	- L	abor Organization	
			Membership Organization Trade Associa	tion		Cooperative	
	(f)		This committee supports/opposes more than one Federal cano committee. (i.e., nonconnected committee)	lidate, and is NOT a	separate segr	egated fund or par	ty
			In addition, this committee is a Leadership PAC. (Identify	sponsor on line 6.))		
	loint	Eundra	alsing Representative:				
	(g)		This committee collects contributions, pays fundraising expens committees/organizations, at least one of which is an authorize				al [.]
	(b)		This committee collects contributions, pays fundraising expens				al
	(h)	L	committees/organizations, none of which is an authorized com	mittee of a federal o	andidate.	·	
		Com	mittees Participating in Joint Fundraiser		A STANDARY COMMANDERS OF THE PARTY OF THE PA		
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			2.	FEC ID number	C	rest in remigning reminder reminder reminder.	
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			5.	FEC ID number	c		- t

F	ECForm 1 (Revised 1	2/2007)		Page3
	ype Committee Name and District Republi	can Committee of Virginia		
6. Name	of Any Connected O	ganization, Affiliated Committee, Leadership	p PAC Sponsor or Joint Fund	raising Representative
RĘPŲ	BLICAN PARTY OF	VIRGINIA INC	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>
1. 1 1		<u> </u>	<u> </u>	<u> </u>
Mailing	g Address	115 EAST GRACE STREET	r	<u> </u>
		<u> </u>		<u> </u>
	•	, RICHMOND	LYA L	23219
		CITYA	STATE	ZIP CODE
Relation	onship:	gh ong. Az		
	Connected Organization	X Affiliated Committee Leade	rship PAC Sponsor Join	t Fundraising Representation
Mailin	g Address	PO Box 71596		
		Richmond		23255 _
Title o	or Position ∀	CITY A	STATE	ZIP CODE A
	Treasurer		Telephone number 804	- 270 - 0791
		and address (phone number optional) o		tee; and the
Full N of Tre		3. Selph		
Mailin	g Address	PO Box 71596		
		Richmond	VA	23255
Title o	or Position ∀	CITY A	STATE	ZIP CODE A
	Treasurer		Telephone number 804	_ 270 _ 0791
			releptione number	

FEC Form 1 (Re	evised 12/	2007)					Page 4
Full Name of Designated Agent							
Mailing Address	_						
T	_	·					
Title or Position.♥			C	ITY A		STATE A	ZIP CODE A
			·		Telepho	one number	- <u>-</u>
Banks or Other Deposafety deposit boxes Name of Bank, Depos	or maintai	List all bar	nks or other	r depositories	in which the co	ommittee deposits fund	s, holds accounts, rents
safety deposit boxes Name of Bank, Depos	or maintain sitory, etc. RBC Cer	ns funds. ntura Bank					s, holds accounts, rents
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