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FEC FORM 1

10030513569

STATEMENT OF ORGANIZATION

2010 DEC -8 AM 8: 03 TEC MAIL CENTER

			Office Use Only					
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5					
Viryginia i	Bird Distric	t. Repudalin	Gun Committee					
	11111111							
ADDRESS (number and street	, 15.807, PIRA	asiant, Woods						
(Check if address is changed)	PO, V, T, S, M, O, V, T	-h	Ver 237,031-11,5,50					
		CITY	STATE ZIP CODE					
COMMITTEE'S E-MAIL ADD	RESS (Please provide only one e	e-mail address)						
(Check if address is changed)	10 1+116 COD							
COMMITTEE'S WEB PAGE	ADDRESS (URL)							
(Check if address is changed)	Viivginia3	D.D.Go.G.C.O.M.						
2. DATE ()	0412010							
3. FEC IDENTIFICATION	NUMBER C	0.490946						
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)						
I certify that I have examine	d this Statement and to the bes	t of my knowledge and belief	it is true, correct and complete.					
Type or Print Name of Treas	surer Arthur L	ee talley	<u>,</u>					
Signature of Treasurer Check and Date 12 04 2010								
NOTE: Submission of false, erreneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.								
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530						

FEC FO	rm 1 (Hevised 02/2009) Page 2
	COMMITTEE
	e 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 Affiliat	Office State Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Cor	
(d) X	This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.
	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 Lobbyiou/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor an line 6.)
Joint Fund	draising Representative:
(g)	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.
(h)	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.
Com	nmittees Participating in Joint Fundraiser
1.	FEC ID number C
2.	FEC ID number C
3.	FEC ID number
4.	

FEC Form 1 (Revised	02/2009)	Page 3										
Write or Type Committee Nam	ne											
Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor												
Nome IIIII												
Mailing Address												
	CITY STATE Z	ZIP CODE										
Relationship: [] Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Lead	lership PAC Sponsor										
7. Custodian of Records: Ide books and records.												
Full Name												
Mailing Address												
		لتبييا										
Title or Position	CITY STATE Z	IP CODE										
Liiii	Telephone number	لــــا-لـــ										
8. Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee, and the nam assistant treasurer).	e and address of										
Full Name of Treasurer Avithuv Lee Tallicy												
Mailing Address	5.8.07 Pleasunt Woods CT	لىسىسا										
Talo as Desiver	PONTS MOUTH 123.7.00 CITY STATE Z	(2)-(1550) IP CODE										
Title or Position $ \int_{1}^{\infty} V_{1} G_{1} G_{2} V_{1} V_{1} C_{1} V_{1} $	Telephone number [7.5.7] - [5]	351-14037										

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Full Name of Designated Agent		
Mailing Address		
	CITY	ATE ZIP CODE
Title or Position	***	
	Telephone number	
Banks or Other Depo	sitories: List all banks or other depositories in which the committee d	deposits funds, holds accounts, rents
safety deposit boxes or	maintains funds.	•
Name of Bank, Deposit	tory, etc.	
Wa	ichoving Bank	
Mailing Address	11.22 E Grace ST	
	Richmond	La 23,21,91-LI

10030513572

Name of Bank,	Depos	itor	у, е	tc.																													
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										CIT	Υ										(STA	ATE	:			Z	IP (CO	DE			

STATE

ZIP CODE

CITY

Federal Election Commis ENVELOPE REPLACEMENT PAGE FOR IN The FEC added this page to the end of this filing to	COMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
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Delivery Confirmation™ or Signatu	ıre Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Nex	t Business Day Delivery
Received from House Records & Registration Of	Date of Receipt fice
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
88	12/8/10
PREPARER (3/2005)	DATE PREPARED