**FEC** 

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Make Virginia Great Again Political Action Committee 6920 Braddock Rd ADDRESS (number and street) Ste E #662 (Check if address is changed) Annandale 22003 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS pkrason@apoliticalfirm.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00630814 FEC IDENTIFICATION NUMBER 3. X 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. Krason, Patrick, , , Type or Print Name of Treasurer Krason, Patrick, , , [Electronically Filed] 20 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

| _            |                      |  | D 0                                    |
|--------------|----------------------|--|--|
|              |                      | OMMITTEE   | Page 2                                 |
|              |                      | 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. (Compinformation below.)   | lete the candidate                     |
| Name<br>Cand | e of<br>lidate       |  |  |
|              | lidate<br>Affiliatio | Office<br>Sought: House Senate President   | State                                  |
| (c)          |                      | This committee supports/opposes only one candidate, and is NOT an authorized committee.  |  |
| Name<br>Cand | e of<br>lidate       |  |  |
| Part         | ty Com               | nmittee:   | Domoovatio                             |
| (d)          |                      | · · · ·  | Democratic,<br>Republican, etc.) Party |
| Poli         | tical A              | ction Committee (PAC):   |  |
| (e)          |                      | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)  | nected organization is                 |
|              |                      | Corporation Corporation w/o Capital Stock  | Labor Organization                     |
|              |                      | Membership Organization Trade Association  | Cooperative                            |
|              |                      | In addition, this committee is a Lobbyist/Registrant PAC.  |  |
| (f)          | x                    | This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)   | gregated fund or party                 |
|              |                      | In addition, this committee is a Lobbyist/Registrant PAC.  |  |
|              |                      | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)   |  |
| Join         | t Fund               | raising Representative:  |  |
| (g)          |                      | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate. | o or more political                    |
| (h)          |                      | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.         | o or more political                    |
|              | Com                  | mittees Participating in Joint Fundraiser  |  |
|              | 1.                   | FEC ID number  |  |
|              | 2.                   | FEC ID number  |  |
|              | 3.                   | FEC ID number  |  |
|              | 4.                   |  |  |

|            |   |   | _                  |
|------------|---|---|--------------------|
| 10         | FEC Form 1 (Revised (   |   | Page 3             |
|            | rite or Type Committee Name                                       |   |                    |
|            |   | Great Again Political Action Committee  | D40.5              |
| 6.         | -   | Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership                     | PAC Sponsor        |
| N          | ONE   |   |                    |
|            |   |   |                    |
|            | Mailing Address   |   |                    |
|            |   |   |                    |
|            |   |   |                    |
|            |   | CITY STATE ZI   | P CODE             |
|            | Relationship: Connected   | d Organization Affiliated Committee Joint Fundraising Representative Leader                             | ership PAC Sponsor |
| <b>'</b> . | Custodian of Records: Identification books and records.           | tify by name, address (phone number optional) and position of the person in posse                       | ssion of committee |
|            | Krason, Pa  | atrick, , ,   | ı                  |
|            | Full Name   | <sub>1</sub> 6920 Braddock Rd   |                    |
|            | Mailing Address   | Ste E #662  |                    |
|            |   | Annandale VA 22003  |                    |
|            |   |   |                    |
|            | Title or Position   | CITY STATE ZII  | CODE               |
|            | Treasurer   |   | 1 6896             |
|            | <b>Treasurer:</b> List the name and any designated agent (e.g., a | d address (phone number optional) of the treasurer of the committee; and the name issistant treasurer). | and address of     |
|            | Full Name Krason, Pa of Treasurer                                 | itrick, , ,   |                    |
|            | Mailing Address   | 6920 Braddock Rd  |                    |
|            |   | Ste E #662  |                    |
|            |   | Annandale VA 22003  |                    |
|            | Title or Position<br>Treasurer                                    |   | P CODE<br>1        |
|            |   | Telephone number  |                    |

| FEC <b>For</b> i  | m 1 (Revised 02/2009)   | Page <b>4</b>      |
|---|---|--------------------|
|   |   |                    |
| Full Name of Designated                                       | 1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |                    |
| Agent   |   |                    |
| Mailing Address   |   |                    |
|   |   |                    |
|   | CITY STATE  | ZIP CODE           |
| Title or Position   | CITI  | ZII CODE           |
|   | Telephone number  |                    |
|   |   |                    |
| Banks or Other<br>safety deposit b<br>Name of Bank,           | r Depositories: List all banks or other depositories in which the committee deposits funds, holoxes or maintains funds.  Depository, etc.  Access National Bank | ds accounts, rents |
| safety deposit b  | oxes or maintains funds.  Depository, etc.  Access National Bank  1800 Robert Fulton Dr   | ds accounts, rents |
| safety deposit b<br>Name of Bank,                             | Depository, etc.  Access National Bank  1800 Robert Fulton Dr   | ds accounts, rents |
| safety deposit b<br>Name of Bank,                             | Depository, etc.  Access National Bank  1800 Robert Fulton Dr  #105   | ZIP CODE           |
| safety deposit b<br>Name of Bank,                             | Depository, etc.  Access National Bank  1800 Robert Fulton Dr  #105  Reston  CITY  STATE  |                    |
| safety deposit b Name of Bank, Mailing Address                | Depository, etc.  Access National Bank  1800 Robert Fulton Dr  #105  Reston  CITY  STATE  Depository, etc.  | ZIP CODE           |
| safety deposit b Name of Bank, Mailing Address  Name of Bank, | Depository, etc.  Access National Bank  1800 Robert Fulton Dr  #105  Reston  CITY  STATE  Depository, etc.  | ZIP CODE           |
| safety deposit b Name of Bank, Mailing Address                | Depository, etc.  Access National Bank  1800 Robert Fulton Dr  #105  Reston  CITY  STATE  Depository, etc.  | ZIP CODE           |
| safety deposit b Name of Bank, Mailing Address  Name of Bank, | Depository, etc.  Access National Bank  1800 Robert Fulton Dr  #105  Reston  CITY  STATE  Depository, etc.  | ZIP CODE           |
| safety deposit b Name of Bank, Mailing Address  Name of Bank, | Depository, etc.  Access National Bank  1800 Robert Fulton Dr  #105  Reston  CITY  STATE  Depository, etc.  | ZIP CODE           |