

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

Friends of Mark Warner

ADDRESS (number and street)

1751 Potomac Greens Drive

(Check if address is changed)

Alexandria

CITY ▲

VA

STATE ▲

22314-6233

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

katie@markwarnerva.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

http://www.markwarnerva.com

2. DATE

04 / 08 / 2021

3. FEC IDENTIFICATION NUMBER ►

C C00438713

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 Buchanan, Katherine, M, ,

Signature of Treasurer

Buchanan, Katherine, M, ,

[Electronically Filed]

Date

04 / 08 / 2021

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 Use Only				
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For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

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 Warner, Mark, R, ,

Candidate Party Affiliation DEM Office Sought: House Senate President State VA District 00

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

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (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.)

Joint Fundraising 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.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C _____
2. _____ FEC ID number C _____
3. _____ FEC ID number C _____
4. _____ FEC ID number C _____

Write or Type Committee Name

Friends of Mark Warner

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

One Virginia PAC

Mailing Address

1751 Potomac Greens Drive

Alexandria

VA

22314-6233

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee 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.

Full Name Buchanan, Katherine, M, ,

Mailing Address 1751 Potomac Greens Drive

Alexandria

VA

22314-6233

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 202 - 423 - 4742

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).

Full Name of Treasurer Buchanan, Katherine, M, ,

Mailing Address 1751 Potomac Greens Dr

Alexandria

VA

22314-6233

CITY

STATE

ZIP CODE

Title or Position Treasurer

Telephone number 202 - 423 - 4742

Full Name of Designated Agent Buchanan, Katherine, M, ,
Mailing Address 1751 Potomac Greens Drive
Alexandria VA 22314-6233
CITY STATE ZIP CODE
Title or Position Treasurer Telephone number 202 - 423 - 4742

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.

Wells Fargo
Mailing Address 1753 Pinnacle Drive
Third Floor
McLean VA 22102
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Amalgamated Bank
Mailing Address 1825 K Street, NW
Suite 650
Washington DC 20006
CITY STATE ZIP CODE