

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

11 AUG 11 AM 10:28

Office use only

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

12FE4M5

Courtney Lynch for Senate

ADDRESS (number and street)

10332 Main Street

#287

(Check if address is changed)

Fairfax

VA

22030

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

teamlynch@lynchforva.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.lynchforva.com

2. DATE 08 / 10 / 2011 Y

3. FEC IDENTIFICATION NUMBER

C

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

X

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 Angie Morgan

Signature of Treasurer

[Handwritten Signature]

Date

08 M / 10 P / 2011 Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9630 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

11020322339

5. TYPE OF COMMITTEE (Check One)

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 Courtney Lynch

Candidate Party Affiliation DEM 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 _____ (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

- (f) 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	<u>C</u> _____
2.	_____	FEC ID number	<u>C</u> _____
3.	_____	FEC ID number	<u>C</u> _____
4.	_____	FEC ID number	<u>C</u> _____

11020322340

Write or Type Committee Name

Courtney Lynch for Senate

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

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 Angle Morgan

Mailing Address 10332 Main Street
#287
Fairfax VA 22030

Title or Position ▼ Treasurer CITY ▲ STATE ▲ ZIP CODE ▲
Telephone number 571 - 419 - 1034

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 Angle Morgan

Mailing Address 10332 Main Street
#287
Fairfax VA 22030

Title or Position ▼ Treasurer CITY ▲ STATE ▲ ZIP CODE ▲
Telephone number 571 - 419 - 1034

11020322341

Full Name of Designated Agent

Lora Haggard

Mailing Address

10332 Main Street

#287

Fairfax

VA

22030 -

Title or Position

CITY

STATE

ZIP CODE

Compliance

Telephone number

571

419

1034

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.

Bank of America

Mailing Address

10440 Main Street

Fairfax

VA

22030 -

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

11020322342

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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8-11-11

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USPS EXPRESS MAIL

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

UPS

DHL

AIRBORNE EXPRESS

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Date of Receipt

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DH

DATE PREPARED

8-11-11

11020322343

11020322344

