PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Libertarian Party of Virginia 1601 Willow Lawn Dr ADDRESS (number and street) Ste. 304 (Check if address is changed) Richmond 23230 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS treasurer@lpvirginia.org (Check if address X is changed) Optional Second E-Mail Address secretary@lpvirginia.org COMMITTEE'S WEB PAGE ADDRESS (URL) https://lpvirginia.org/ (Check if address is changed) DATE 2020 C00399865 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. John, Daniel, Joseph,, Type or Print Name of Treasurer John, Daniel, Joseph, , [Electronically Filed] 03 2022 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

FEC Fo	orm 1 (Revised 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. (Cominformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		
(d) <b>x</b>	This committee is a STA (National, State or subordinate) committee of the LIB	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected 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 se	egregated 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 Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo 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.	vo or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4		

FEC <b>Form 1</b> (Revis	ed 02/2009)	Page <b>3</b>
Write or Type Committee N		
Libertarian Pa	arty of Virginia	
	ed Organization, Affiliated Committee, Joint Fundraising Representative, o	r Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	ve Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the per-	son in possession of committee
	Daniel, Joseph, ,	
Full Name	709 N Nelson St	
Mailing Address		
	Arlington	22203
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	3 - 346 - 6280
. <b>Treasurer:</b> List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; a g., assistant treasurer).	and the name and address of
Full Name John, [ of Treasurer	Daniel, Joseph, ,	
Mailing Address	709 N Nelson St	
-		 
	Arlington	22203
T01 5 10	CITY STATE	ZIP CODE
Title or Position Treasurer	70:	3 - 346 - 6280

FEC <b>Fo</b>	m 1 (Revise	d 02/2009)	Page <b>4</b>
Full Name of Designated			
Agent			
Mailing Address	5		
		CITY STATE	ZIP CODE
Title or Position			
		Telephone number	]
<ul> <li>Banks or Other safety deposit</li> </ul>		ies: List all banks or other depositories in which the committee deposits funds ntains funds.	
safety deposit Name of Bank,	Depository,	ntains funds.	<u> </u>
safety deposit	Depository,	ntains funds. etc.	
safety deposit Name of Bank,	Depository,	etc.  214 North Tryon Street	8202 
safety deposit Name of Bank,	Depository,	etc.  214 North Tryon Street	8202 
safety deposit Name of Bank,	Depository,  Truist	ntains funds. etc.  214 North Tryon Street  Charlotte  CITY  STATE	
safety deposit Name of Bank, Mailing Addres	Depository,  Truist	ntains funds. etc.  214 North Tryon Street  Charlotte  CITY  STATE	
safety deposit Name of Bank, Mailing Addres	Depository,	ntains funds. etc.  214 North Tryon Street  Charlotte  CITY  STATE	
safety deposit Name of Bank, Mailing Addres	Depository,  Depository,	charlotte  CITY  STATE  CITY  STATE	
safety deposit Name of Bank, Mailing Addres Name of Bank,	Depository,  Depository,	charlotte  CITY  STATE  CITY  STATE	
safety deposit Name of Bank, Mailing Addres Name of Bank,	Depository,  Depository,	charlotte  CITY  STATE  CITY  STATE	

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1A Transaction ID:

Libertarian Party of Virginia was administratively terminated on 3/15/2022. We are still active and I request that the termination be undone or the PAC be reactivated. Please contact me with any further steps that need to be taken to complete this. Thank you.

Form/Schedule: Transaction ID: