

2010 JUL 23 AM 7:46

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

Constitutionist

ADDRESS (number and street)

1546 MARGOVA AVE

(Check if address
is changed)

MARGAOK NA 1235021

CITY

STATE

ZIP CODE

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

(Check if address
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

~~None at this time~~
WWW.YOURCONSTITUTIONISTPARTY.COM

2. DATE

07 / 19 / 2010

3. FEC IDENTIFICATION NUMBER

C00462168

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

BARBARA J. CRIVEAU

Signature of Treasurer

Barbara J. Criveau

Date

07 / 19 / 2010

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

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

FEC FORM 1
(Revised 02/2009)

10030392438

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 JAMES D. CRIVELLO

Candidate Party Affiliation CONSTITUTIONIST Sought: House Senate President State VA District

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

Name of Candidate DEATRINA M. LIPOMBA (VICE PRESIDENTIAL)

Party Committee:

(d) This committee is a NAT (National State or subordinate) committee of the CON (Democratic, Republican, etc) Party. Constitutionist

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.	<u> </u>	FEC ID number	<u>C</u>
2.	<u> </u>	FEC ID number	<u>C</u>
3.	<u> </u>	FEC ID number	<u>C</u>
4.	<u> </u>	FEC ID number	<u>C</u>

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Write or Type Committee Name

Constitutionist Political Party

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

NONE AT THIS TIME

Mailing Address

[Redacted address fields]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodians of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name

DEATRA MARIE LOOMER

Mailing Address

30276 Old Highway 41

OKOLONA

MS

38860

Title or Position

CITY

STATE

ZIP CODE

N.I.C. PRESIDENT CANDIDATE

Telephone number

662-448-0959

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

BARBARA J. CAIVEAU

Mailing Address

1546 NORCOVA AVE.

NORFOLK

VA

23502

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

757-853-5427

10030392440

Full Name of Designated Agent

JAMES DUNNIS, CRIVIAV

Mailing Address

1546 NORCOVA AV

NORFOLK VA 23502

CITY

STATE

ZIP CODE

Title or Position

Residential Candidate

Telephone number

757-853-5427

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

MILITARY CIRCLE

1880 North Military Highway

NORFOLK VA 23502

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

BANK OF AMERICA

Mailing Address

MILITARY CIRCLE

1880 N. Military Hwy

NORFOLK VA 23502

CITY

STATE

ZIP CODE

10030392441

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 7/19/10
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

[Signature]
 PREPARER

7/23/10
 DATE PREPARED

10030392442