

**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

Chris Register for Virginia-05

ADDRESS (number and street)

435 Merchant Walk Square

☐ (Check if address is changed)

STE 300-153

Charlottesville

CITY ▲

VA

STATE ▲

22902

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

chris4virginia@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

M M / D D / Y Y Y Y
12 / 17 / 2025

3. FEC IDENTIFICATION NUMBER ►

C C00930990

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 Register, Chris, , ,

Signature of Treasurer Register, Chris, , ,

Date

M M / D D / Y Y Y Y
12 / 17 / 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

C

Write or Type Committee Name

Chris Register for Virginia-05

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

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☐ Connected Organization ☐ Affiliated Organization ☐ 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 Register, Chris, , ,

Mailing Address 435 Merchant Walk Square

STE 300-153

Charlottesville

VA

22902

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Custodian of Record

Telephone number 434 - 409 - 7407

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 Register, Chris, , ,

Mailing Address 435 Merchant Walk Square

STE 300-153

Charlottesville

VA

22902

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number 434 - 409 - 7407

Full Name of
Designated
Agent

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

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.

Atlantic Union Bank

Mailing Address

1658 State Farm Blvd

Charlottesville

VA

22902

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲