PAGE 1/4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) SUBURBAN VIRGINIA REPUBLICAN COALITION (SUV GOP) PO BOX 26141 ADDRESS (number and street) (Check if address is changed) ALEXANDRIA 22313 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS .chris@electioncfo.com (Check if address is changed) Optional Second E-Mail Address brenda@electioncfo.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://suvgop.com (Check if address is changed) DATE 06 2018 C00676247 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. Marston, Chris, , , Type or Print Name of Treasurer Marston, Chris,,, [Electronically Filed] 02 2019 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. FEC FORM 1

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

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	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		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-	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name		
SUBURBAN VI	RGINIA REPUBLICAN COALITION (S	SUV GOP)
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
Support Republican W	/omen JFC	
Mailing Address	PO Box 26141	
ý		
	Alexandria	22313
	CITY STATE	ZIP CODE
Datationality	d Constitution Affiliated Constitution Make the Constitution Constitution	I and archin DAC Common
Relationship: Connected	d Organization Affiliated Committee Solution Joint Fundraising Representative	Leadership PAC Sponsor
books and records. Hankins, E Full Name Mailing Address	Brenda, , , PO Box 26141	
	Alexandria	22313
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	
8. Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	d the name and address of
Full Name Marston, C	Chris, , ,	1
of Treasurer	PO Box 26141	
Mailing Address		
		22313 7ID CODE
Title or Position Treasurer	CITY STATE	ZIP CODE

Telephone number

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit boxes	epositories: List all banks or other depositories in which the committee deposits funds, hole s or maintains funds.	ds accounts, rents
safety deposit boxes Name of Bank, Depo	ository, etc.	ds accounts, rents
safety deposit boxes Name of Bank, Depo	s or maintains funds.	ds accounts, rents
safety deposit boxes Name of Bank, Depo	ository, etc.	ds accounts, rents
safety deposit boxes Name of Bank, Depo	s or maintains funds. pository, etc. Eagle Bank	ds accounts, rents
safety deposit boxes Name of Bank, Depo	s or maintains funds. pository, etc. Eagle Bank	ds accounts, rents
safety deposit boxes Name of Bank, Depo	Eagle Bank 2001 K St NW	ds accounts, rents
safety deposit boxes Name of Bank, Depo	Eagle Bank 2001 K St NW Washington CITY STATE	
safety deposit boxes Name of Bank, Depo	Eagle Bank 2001 K St NW Washington CITY STATE	
Safety deposit boxes Name of Bank, Depo	Eagle Bank 2001 K St NW Washington CITY STATE	
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Safety deposit boxes Name of Bank, Depo	Eagle Bank 2001 K St NW Washington CITY STATE	