

RECEIVED

2014 APR 15 PM 2: 23

PROPERTO. FEC MAIL CENTER

April 15, 2014

VIA HAND DELIVERY

Federal Election Commission 999 E Street, NW Washington, DC 20463

R6:

LAVERN CHATMAN FOR CONGRESS

FEC ID: C00556209

AMENDED FEC FORM 1 Statement of Organization

To whom it may concern:

Attached please find a completed and executed AMENDED FEC FORM 1 designating the undersigned as Assistant Treasurer for LAVERN CHATMAN FOR CONGRESS.

No other changes are being made to the information previously filed with the FEC.

If you have any questions or concerns about the foregoing or the attached, or if you need any additional information, please do not hesitate to contact me.

Best regards.

Jéffrey A. Ruppert

14031214625

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2014 APR 15 PM 2: 23

FORM 1	ONGANIZATION	FEC MAIL CENTER Office Use Only
NAME OF COMMITTEE (in full)	(Check if name Example: If typing, is changed) over the lines.	type 12FE4M5
LAVERN CH	ATMAN FOR CONGRESS	5
ADDRESS (number and stree	, PO BOX 11139	
(Check if address is changed)	ALEXANDRIA	VA 22312
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL ADD (Check if address is changed)	ORESS (Please provide only one e-mail address) INFO@LAVERNCHAT s	MAN.COM, , , , , , , , , , , , , , , , , , ,
COMMITTEE'S WEB PAGE (Check if address is changed)	LAVERNCHATMAN.C	ЭМ
2. DATE 04 '	15 2014	•
3. FEC IDENTIFICATION	N NUMBER C 00556209	
4. IS THIS STATEMENT	NEW (N) OR AMENDE	D (A)
I certify that I have examine Type or Print Name of Treas	ed this Statement and to the best of my knowledge and surer	Troelief it is true, correct and complete. RT, ASST. TREASURER
Signature of Treasurer	Digitally signed by Jeffrey A Ruppe DN: cn=Jeffrey A Ruppert, o=The R Co, LLC, ou, ————————————————————————————————————	uppert ΠΔ" / 15" / 2011Δ "
NOTE: Submission of false, e	rroneous, or incomplete informs on thay subject the person ANY CHANGE IN INFORMATION SHOULD BE REPO	
Office Use	For further info Federal Election Toll Free 800-42	

aa	8	2

FEC	Form	1 (F	<i>levised</i>	02/2009

Į	J	Į
ľ	`	į
	1	
	_	
	`	
	-	
	í	
Ć	:)
Ç	Ş	ľ
_	PIC N	1

_	F	EC Fo	m 1 (Revised 02/2009)	Page 2
5.			DMMITTEE	
		didate	Committae: This committee is a principal campaign committee. (Complete the candidate information below	
	(a)			
	(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Cor information below.)	npiete the candidate
	Name Cand		LAVERN, J. CHATMAN,	
	Cand		DEM Office D	State VA
	Party	Affiliation	on DEM Sought: X House Senate President	District 08
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Cand	-		
	Part	y Con	mittee:	
	(d)		(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
	Poli	tical A	ction Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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 s committee. (i.e., nonconnected committee)	segregated 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.)	
	Join	t Fund	raising Representative:	
	(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for	
			committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committee collects contributions.	
	(h)	Ц	committees/organizations, none of which is an authorized committee of a federal candidate.	we or more political
		Com	mittees Participating in Joint Fundraiser	
		1.	FEC ID number C	
		2.	FEC ID number C	
		3.	FEC ID number C	
		4.		

1
~
W
7
Sec.
~ 1
N
-
M
0
T

:

FEC Form 1 (Revise	ed 02/2009)	Page	3
Write or Type Committee Na	ame		
LAVERN CH	ATMAN FOR CONGRESS		
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraisin	g Representative, or Leadership PAC Sp	onsor
		 	
مل <u>د کو دارد کی در دارد کی در دارد</u>		┢ ┉ ╃╼┷ ╍╘┉╚╸ ╬╴╸╇ ╸╇╸╇╸╇╺╇╸╇╸ ╄╸ ┊╴╏╴╏╶╏	
Mailing Address		<u> </u>	<u>i </u>
			لللل
	CITY	STATE ZIP CODE	
Relationship: Conne	ected Organization Affiliated Committee Joint Fund	fraising Representative Leadership PA	C Sponsor
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and	d position of the person in possession of	committee
books and records.			
Full Name	GAN IRVING TYLER	<u> </u>	لبب
Mailing Address	9715 HOLMHURST ROAD		
ū			1 ! 1
	BETHESDA	MD 20817	
		berd besteel besteelend be	
Title or Position	CITY	STATE ZIP CODE	
CAMPAIGN N	MANAGER Telepho	ne number 843, - 270, - 8	3 96 ,1 , ,
C care of or commission of the		Total Service Colleges of Total Service Control of Control of Total Service Control of C	
8. Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer	of the committee; and the name and add	dress of
Full Name of Treasurer	GĘLA MOODY		لحيلا
Mailing Address	42957 GOLF VIEW DRIVE		
•	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , 1
	CHANTILLY	VA: 20152. I-	
	CITY	STATE ZIP CODE	
Title or Position Treasurer, , ,	1	ne number 703, - 863, - 2	254,1 ,
1100001	Telephon Telephon	ne number 705 - 005 - 2	<u>- Y - 1</u>

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated	CEEDEV A DUIDDEDT		
Agent	EFFREY A. RUPPERT		
Mailing Address	35 East Gay Street	<u> </u>	
	Suite 248	11111111	
	Columbus crry	OH) STATE	43215 - -
Title or Position Asst.,Treasu	ıçer	Telephone number [937]	
Banks or Other De safety deposit boxes	positories: List all banks or other depositories in w or maintains funds.	hich the committee deposits fu	nds, holds accounts, rents
Name of Bank, Depo	ository, etc.		
<u>_v</u>	VELLS FARGO BANK		
Mailing Address	14601, DUKE, STREET		
	ALEXANDRIA	VA VA	22304
	CITY	STATE	ZIP CODE

CITY

STATE

ZIP CODE

14031214628

Name of Bank, Depository, etc.

Mailing Address

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. Date of Receipt Hand Delivered

Hand Delivered	Date of Receipt 4/15/14
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Ne	ext Business Day Delivery
Received from House Records & Registration C	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
PREPARER	Y//S//Y DATE PREPARED

(8/2013)