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FEC FORM 1	STATEMENT C ORGANIZATIO			ECEIVED	
1. NAME OF COMMITTEE (in full)	is changed) over t	ple:If typing, type he lines.	12FE4M5	ATL CENTER	<u></u>
Richard Bolger for Con	gress				
			<u>r'i: i i i i</u>	<u>1 1 1 1 1 1 1 1</u>]
ADDRESS (number and street)	P.O. Box 7,11,556				
(Check if address is changed)			VA 20 ⁴ STATE ▲	I71 ZIP CODE▲	
COMMITTEE'S E-MAIL ADDRE	58.			· • .	
(Check if address is changed)	kevin.wheatley@richardbo	iger.com			
	Optional Second E-Mail Address	an a			
• • •					
COMMITTEE'S WEB PAGE ADI	DRESS (URL)				
2. DATE 07 '08					
3. FEC IDENTIFICATION NU					
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
I certify that I have examined the	is Statement and to the best of my ki	nowledge and belief it i	s true, correct and	complete.	
Type or Print Name of Treasure	r James B. Veltri				
Signature of Treasurer	An		Date 07	12 20	(3)
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 co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	ntact:	FEC FORM 1 (Revised 06/2012)	

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FEC Form 1 (Revised 02/2009)

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5.	TYPE OF COMMITTEE						
	Cano	Candidate Committee:					
	(a)	X	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 Candi		Richard Owen Bolger				
	Candi Party	idate Affiliatio	on DEM Office State VA Sought: X House Senate President District 10				
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name of Candidate						
	Part	v Com	nmittee:				
	(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.				
	Polit	ical A	ction Committee (PAC):				
		n	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:				
	(e)	السل					
			🛄 Corporation 🛄 Corporation w/o Capital Stock 🛄 Labor Organization				
			Membership Organization				
			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 eddition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
	Joint	t Fund	Iraising 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 fedaral 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.				
		Com	Committees Participating in Joint Fundraiser				
		1.					
		•					
		2.					
		3.					
		4.	FEC ID number				

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Write or Type Committee Name

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6. Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
Mailing Address	
	CITY STATE ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
 Custodian of Records: Iden books and records. 	tify by name, address (phone number optional) and position of the person in possession of committee
Mailing Address	
	<u> </u>
Title or Position	CITY STATE ZIP CODE
8. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).
Full Name James	B. Veltri
Mailing Address	P.O. Box 711556
	L
	Herndon VA 20171 - <t< th=""></t<>
	Telephone number 703 631 4094

Full Name of Designated Agent	Kevin Michael Wheatley		
Mailing Address	P,O, Box 711556		
	Herndon CITY		20171
Title or Position Assistant Ti	easurer	Telephone number 571	<u>357</u> 4579
	Depositories: List all banks or other depositories in wh xes or maintains funds. Depository, etc.	ich the committee deposits fun	ds, holds accounts, rents
	First Virginia Community Bank		
Mailing Address	11325 Random Hills Road		
	Sµite 140		
	Fairfax		22030
	CITY	STATE	ZIP CODE
Name of Bank, I	Depository, etc.		
Mailing Address			
			L
	CITY	STATE	ZIP CODE

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USPS First Class Mail	Postmarked 7 / 15 / 13			
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USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
	Next Business Day Delivery			
Received from House Records & Registrat	Date of Receipt tion Office			
Received from Senate Public Records Offi	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
Amp	7/22/13			
PREPARER (7/2013)	DATE PREPARED			