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## STATEMENT OF

FORM 1	ORGANIZATION				Office Use Only			
1. NAME OF COMMITTEE (In	ı full)		Check if name changed)	Example:If typing, type over the lines.	12FE4M			
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is changed)		الاشت	giliniliai	Beach	VA	234511-		
				CITY	STATE	ZIP CODE		
COMMITTEE'S E-MA	AL ADDRE	SS (Please	provide only one	e-mail address)				
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COMMITTEE'S WEB	PAGE AD	DRESS (UR	IL)					
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2. DATE	3 ′ 6	] ' []	616					
3. FEC IDENTIFIC	CATION N	UMBER		0,0,4,6,8,2,6,4				
4. IS THIS STATE	MENT	NEW (	(N) OR	AMENDED (A)		. <u>-</u>		
I certify that I have o	xamined t	his Statemei	nt and to the be	st of my knowledge and belief i	t is true, corre	ect and complete.		
Type or Print Name	of Treasure	· I	iel Harl	ey Thomas IV				
Signature of Treasure		Am	)-R	THE STATE OF THE PARTY OF THE P	Date O	3 64 2010		
NOTE: Submission of	false, erron			n may subject the person signing TION SHOULD BE REPORTED V		to the penalties of 2 U.S.C. §437g.		
Öffice Use Only	e Y	Tura i i i i i i i i i i i i i i i i i i i		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)		

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FEC Form 1 (Revised	<del></del>	· · · · · · · · · · · · · · · · · · ·	Page 3
Write or Type Committee Name	The area of a second	Breed Coat of Marketing	3
Name of Any Connected C	Organization, Affiliated Committee, Join	t Fundraising Representative,	or Leadership PAC Sponsor
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Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of tassistant treasurer).	the treasurer of the committee;	and the name and address of
Full Name of Treasurer  Litibit	1eili Hiairilieigi Thio	mas III	111111111
Mailing Address	3536 Boyd Rd		
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