

# FEC FORM 1

# STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines

12FE4M5

Fimian For Congress 2010 (Fimian 2010)

ADDRESS (number and street)

PO Box 3131

(Check if address is changed)

Oakton

VA

22124

9131

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

pcrosby@fimian2010.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.keithfimian.com

2. DATE 

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	0

3. FEC IDENTIFICATION NUMBER

C C00464552

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 J. Paul Crosby

Signature of Treasurer Electronically Filed by J. Paul Crosby

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	0

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

**FEC FORM 1**  
(Revised 02/2009)

5. TYPE OF COMMITTEE (Check One)

Candidate 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. (Complete the candidate information below.)

Name of Candidate **Keith S. Fimian**

Candidate Party Affiliation **REP** Office Sought:  House  Senate  President State **VA** District **11**

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d)  This committee is a  (National, State (or subordinate) committee of the  (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation  Corporation w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  Cooperative
- (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 addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising 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 federal 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.

Committees Participating in Joint Fundraiser

1.	<input type="text"/>	FEC ID number	<b>C</b> <input type="text"/>
2.	<input type="text"/>	FEC ID number	<b>C</b> <input type="text"/>
3.	<input type="text"/>	FEC ID number	<b>C</b> <input type="text"/>
4.	<input type="text"/>	FEC ID number	<b>C</b> <input type="text"/>

Write or Type Committee Name

**Fimian For Congress 2010 (Fimian 2010)**

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

**VA-11 Congressional Victory Committee**

Mailing Address **264 N Lumpkin Street**  
**Suite 202**  
**Athens** **GA** **30601** - **2832**  
CITY ▲ STATE ▲ ZIP CODE ▲

Relationship:

Connected Organization  Affiliated Committee  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 **J. Paul Crosby**  
Mailing Address **4935 Birch Lane**  
**Alexandria** **VA** **22312** - **2110**  
CITY ▲ STATE ▲ ZIP CODE ▲  
Title or Position ▼ **Treasurer** Telephone number **703** - **621** - **7169**

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 **J. Paul Crosby**  
Mailing Address **4935 Birch Lane**  
**Alexandria** **VA** **22312** - **2110**  
CITY ▲ STATE ▲ ZIP CODE ▲  
Title or Position ▼ **Treasurer** Telephone number **703** - **621** - **7169**

Full Name of Designated Agent

Joseph R Bullock, Jr.

Mailing Address

2124 Silentree Dr.

Vienna

VA

22182

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Assistant Treasurer

Telephone number

703

944

4842

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.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

CITY ▲

STATE ▲

ZIP CODE ▲

**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.

[ ADDITIONAL ]

Chain Bridge Bank

Mailing Address

1445A Laughlin Avenue

Mclean

VA

22101

5709

CITY ▲

STATE ▲

ZIP CODE ▲

[ ADDITIONAL ]

Name of Any Connected Organization, 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

[ ADDITIONAL ]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ ADDITIONAL ]

FEC ID number

C

**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.

[ ADDITIONAL ]

Wachovia Bank

Mailing Address

10944 Fairfax Boulevard

Fairfax

VA

22030

4329

CITY ▲

STATE ▲

ZIP CODE ▲

[ ADDITIONAL ]

Name of Any Connected Organization, 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

[ ADDITIONAL ]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ ADDITIONAL ]

FEC ID number

C

**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.

[ ADDITIONAL ]

Sun Trust Bank

Mailing Address

PO Box 4418

Atlanta

GA

30302

4418

CITY ▲

STATE ▲

ZIP CODE ▲

[ ADDITIONAL ]

Name of Any Connected Organization, 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

[ ADDITIONAL ]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ ADDITIONAL ]

FEC ID number

C