Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Chaz Haywood for Congress PO Box 71596 ADDRESS (number and street) (Check if address is changed) Richmond 23255 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS .john@forestcs.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 25 2018 C00661892 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. Selph, John, G., Mr., Type or Print Name of Treasurer Selph, John, G., Mr., [Electronically Filed] 01 25 2018 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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TYPE OF	COMMITTEE	
Candida	te Committee:	
(a) <b>x</b>	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. (Con information below.)	nplete the candidate
Name of Candidate	Haywood, Charles W., , ,	
Candidate	Office REP Sought: <b>X</b> House Senate President	State
Party Affil	ation REP Sought: X House Senate President	District 06
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	ommittee:	
(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politica	Action 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)	egregated 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 Fu	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Co	mmittees 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		
Chaz Haywo	od for Congress	
6. Name of Any Connec	ted Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conr	nected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
books and records.	: Identify by name, address (phone number optional) and position of the personal h, John, G., Mr.,	on in possession of committee
Mailing Address	PO Box 71596	
	Richmond	23255
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
	ne and address (phone number optional) of the treasurer of the committee; an e.g., assistant treasurer).	d the name and address of
Full Name Selph of Treasurer	n, John, G., Mr.,	
Mailing Address	PO Box 71596	
		23255
Title or Position Treasurer	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE 2	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other safety deposit box Name of Bank, D		
safety deposit box		
safety deposit box Name of Bank, D	Bank of America	
safety deposit box Name of Bank, D	Bank of America  3901 Stillman Parkway  Glen Allen  VA 23060	ZIP CODE
safety deposit box Name of Bank, D	Bank of America  3901 Stillman Parkway  Glen Allen  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address	Bank of America  3901 Stillman Parkway  Glen Allen  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address  Name of Bank, D	Bank of America  3901 Stillman Parkway  Glen Allen  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address	Bank of America  3901 Stillman Parkway  Glen Allen  CITY  STATE  Union Bank and Trust	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address  Name of Bank, D	Bank of America  3901 Stillman Parkway  Glen Allen  CITY  STATE  Pepository, etc.  Union Bank and Trust  9681 W Broad St	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address  Name of Bank, D	Bank of America  3901 Stillman Parkway  Glen Allen  CITY  STATE  Union Bank and Trust	ZIP CODE