

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

Friends Of Kevin O'Neill

ADDRESS (number and street)

PO Box 302

(Check if address is changed)

Williamsburg

VA

23187

0302

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

campaign@kevinforvirginia.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.kevinforvirginia.com

COMMITTEE'S FAX NUMBER

8005906388

2. DATE

12 / 10 / 2007

3. FEC IDENTIFICATION NUMBER

C C00440487

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

Malcolm Patel

Signature of Treasurer

Electronically Filed by Malcolm Patel

Date

12 / 10 / 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

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

FEC FORM 1 (Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 **Kevin O'Neill**

Candidate Party Affiliation **REP** Office Sought: House Senate President State **VA** District **01**

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

Name of Candidate

- (d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.
- (e) This committee is a separate segregated fund
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

None

Mailing Address

CITY STATE ZIP CODE

Relationship

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or Type Committee Name

Friends Of Kevin O'Neill

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 Timothy Koch

Mailing Address 901 N Washington Street
Suite 102
Alexandria VA 22314 - 1535

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Custodian of Records Telephone number 703 - 299 - 8571

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 Malcolm Patel

Mailing Address 2506 Camberwell Court
Herndon VA 20171 - 2979

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 703 - 860 - 5124

Full Name of Designated Agent Timothy Koch

Mailing Address 901 N Washington Street
Suite 102
Alexandria VA 22314 - 1535

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number 703 - 299 - 8571

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.

SunTrust Bank

Mailing Address

1186 Jamestown Road

Williamsburg

VA

23185 - 3343

CITY ▲

STATE ▲

ZIP CODE ▲