Virginia State Board of Elections

Commonwealth of Virginia

Statement of Organization
CANDIDATE COMMITTEE

*Please read instructions before completing this form.

Type of Statement

☐ NEW

This committee is registering with the Virginia State Board of Elections for the first time.

☒ AMENDED

This committee is filing an amended Statement of Organization.

Date Changes Took Effect	SBE-issued Committee ID
07/16/2016	CC-12-00963

Committee Information

Committee Information

Lawhorne for Sheriff
Name of Candidate Campaign Committee

102 W. Alexandria Avenue
Street Address/PO Box | Suite #

Alexandria | VA | 22301
City | State | Zip Code

laurensmith77@gmail.com | 7037464114
Email Address | Daytime Phone #

Campaign Website

Candidate Information

Candidate Information

Lawhorne | Dana
Salutation | Last Name | First Name | Middle Name | Suffix

102 W. Alexandria Avenue
Residence Address | Apt #

Alexandria | VA | 22301
City | State | Zip Code

ALEXANDRIA CITY | 703022845
County or City of Residence | Voter Identification #

danalawhorne@verizon.net | 7037464114
Email Address | Daytime Phone #

☒ By checking this box, I certify that I am currently registered to vote at the address above.

Election Information

Election Information

Sheriff | Alexandria City
Office Sought | District (if one)

Democratic | 2017 | ☒ November ☐ May ☐ Special
Political Party | Year of Election | Type of Election

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Treasurer Information

Treasurer Information

Salutation	Last Name	First Name	Middle Name	Suffix
	Smith	Kathleen	T	

Residence Address: 2309 Scroggins Road
Apt #:

City: Alexandria
State: VA
Zip Code: 22302

County or City of Residence: ALEXANDRIA CITY
Voter Identification #: 712022208

Email Address: laurensmith77@gmail.com
Daytime Phone #: 7039634009

☒ By checking this box, I certify that I am currently registered to vote at the address above.

Campaign Depository

Name of Primary Financial Institution		Name of Other Financial Institution (if applicable)	
Burke and Herbert Bank			
City: Alexandria	State: VA	City:	State:

Committee Activity

Dates of Activity

Please provide the following dates. (If an action has not yet occurred for this committee, write "N/A")

Date first contribution accepted:	03/15/2005
Date first expenditure made:	03/15/2005
Date campaign depository designated:	03/15/2005
Date filing fee paid for party nomination:	03/15/2005
Date Statement of Qualification filed:	03/15/2005
Date treasurer appointed:	05/03/2010

(continued on next page)

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Filing Method	
Filing Method	Please indicate the method by which this committee will submit all required campaign finance reports: ☒ File electronically using **SBE's Electronic Filing Application.** ☐ File electronically using an **SBE Approved Vendor** (Please indicate Name of Vendor:) _____ ☐ File paper reports. **Signature** _____ **Date** _____
Signatures	
Candidate's Signature	I affirm that, to the best of my knowledge, all of the information on this form is complete and truthful. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the *Code of Virginia*). I also understand that my Treasurer and I must truthfully report, in a timely manner, all monies and things of value which this campaign committee receives or expends. Civil penalties shall be assessed for late or un-filed reports in the manner required by the *Code of Virginia*. I further understand that if I do not appoint a treasurer, or if at any time the treasurer's position is vacant, that I, as the candidate, will assume and accept all of the Treasurer's duties until the position is filled. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony. **Candidate's Signature** _____ **Date** 7/21/16
Treasurer's Signature	**I accept the appointment of Treasurer of this campaign committee.** I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the *Code of Virginia*). I understand that I must truthfully report all monies and things of value which this campaign committee receives or expends in a timely manner. Civil penalties will be assessed in the manner required by the *Code of Virginia* for late or non-filed reports. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony. **Treasurer's Signature** _____ **Date** 7/21/16