



**2016 Reporting Year**

<input type="checkbox"/> Check here if this report is an Amended filing. Amended Count Number: _____ Committee ID Number: _____	
NAME OF POLITICAL PARTY COMMITTEE	
MAILING ADDRESS (INCLUDE NUMBER AND STREET), CITY, STATE AND ZIP CODE	
DAYTIME TELEPHONE NUMBER (of person preparing this report)	EMAIL ADDRESS FOR ACKNOWLEDGEMENTS
<b>NO ACTIVITY STATEMENT</b>	
<input type="checkbox"/> I declare that except for the addition of interest or dividend payments and/or subtraction of any bank service charges, no monies or other things of value have been received and no monies have been expended for this reporting cycle. Any interest or dividend payments and/or subtraction of bank service charges will be reported on the appropriate schedule of the next report for any period in which other activity occurs. The balance on hand at the end of the last reporting period was: \$ _____	
<b>POLITICAL PARTY COMMITTEE FILING SCHEDULE</b>	
<input type="checkbox"/> <b>APRIL 15, 2016</b>	<input type="checkbox"/> <b>JULY 15, 2016</b>
<input type="checkbox"/> <b>OCTOBER 17, 2016</b>	<input type="checkbox"/> <b>JANUARY 17, 2017</b>
<b>Statement of Treasurer or Custodian of the Books</b>	
I declare, subject to the provisions of § 24.2-1016 which is punishable up to a Class 5 Felony, that this report for the period _____ through _____, including all its accompanying schedules, is to the best of my knowledge and belief true, correct and complete.	
_____ (DATE)	_____ SIGNATURE OF TREASURER OR CUSTODIAN OF THE BOOKS

## Instructions for Completing this Form

**Campaign Finance Report for Political Party Committees:** This cover sheet must be filed with every report either:

- When any item of value is received and/or when money is spent, this form must be filed along with Schedules G and H and any other schedules required by items reported thereon;
- OR**
- If nothing of value, other than interest or dividends has been received and, except for payment of bank service charges, no monies are spent during the reporting period, file this form checking only the “**No Activity**” box. In this case, you will report in the space indicated, the “same balance” as that stated on line 19 of Schedule H of your last report until such time as you file a report for any period in which other activity has occurred. In the meantime, accurate record keeping is essential.

## REQUIRED INFORMATION

### Amended Filing

If this filing is amending a previously filed report, please indicate here by checking the box. The filer needs to only include the cover sheet and the schedules that are affected by the amendment.

### Committee ID Number

List the registration number that was issued to the committee upon registering with the Virginia Department of Elections

### Name Line

List the full name of the party committee.

### Mailing Address

List the complete mailing address of the party committee, the same way it appears on the *Statement of Organization* form.

### Daytime Telephone Number and Email Address

List the daytime telephone number of the person that prepared this report. If you would like an electronic acknowledgement that the report is received, list the appropriate email address. If you list an email address, communication between Virginia Department of Elections Campaign Finance Division and your committee will be done via the email address provided.

### Date Report Completed and Signature

The treasurer or other committee officer whose name appears on the Statement of Organization must sign and date indicating the report is correct and complete.

### Where to file Campaign Finance reports:

- **ALL Political Party Committees** that file **electronically** must file with the Virginia Department of Elections only. *Electronic filers must file by 11:59pm on the report's due date.*
- **Political Party Committees** that file paper reports: The original must be mailed and postmarked on or before the report's due date

Virginia Department of Elections  
Washington Building  
1100 Bank Street, First Floor  
Richmond, VA 23219