Image# 202107069450983205				07/06/2021 11 : 25
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 5 🗕
			Offi	ce Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
	irginia PAC			
ADDRESS (number and street)	PO Box 15845			
(Check if address	c/o Mele Brengarth and Asso	ociates		
is changed)	Washington	· · · · · · · · · · · ·	DC 2000)3
			L_⊥_ L⊥_ STATE ▲	
COMMITTEE'S E-MAIL ADDF	FSS			
(Check if address	accountabilityva@mba	icg.com		
is changed)		· · · · · · · · · · · · · · · · · · ·		
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE A (Check if address is changed)				
	02 / Y Y Y Y 2021			
3. FEC IDENTIFICATION		00783746		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
4. IS THIS STATEMENT				
certify that I have examined	this Statement and to the best	of my knowledge and belief it	t is true, correct and	complete.
Type or Print Name of Treasu	rer Begun, Jeremy, , ,			
Signature of Treasurer	run, Jeremy, , ,	[Electronically Filed]	Date 07	06 / Y Y Y Y 2021
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMAT	may subject the person signing ION SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the	e candidate information below.)
(b) This committee is an authorized committee, and is NOT a princip information below.)	bal campaign committee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Office Sought: House S	Senate President State District
(c) This committee supports/opposes only one candidate, and is NO	T an authorized committee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee	ee of the (Democratic, Republican, etc.) Par
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected	d organization on line 6.) Its connected organization is
Corporation Corporation w/	/o Capital Stock Labor Organization
Membership Organization Trade Associat	tion Cooperative
In addition, this committee is a Lobbyist/Registrant F	PAC.
(f) This committee supports/opposes more than one Federal candida committee. (i.e., nonconnected committee)	ate, and is NOT a separate segregated fund or par
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sp	oonsor on line 6.)
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses an committees/organizations, at least one of which is an authorized cor	
(h) This committee collects contributions, pays fundraising expenses an committees/organizations, none of which is an authorized committee	
Committees Participating in Joint Fundraiser	
1	FEC ID number
2.	FEC ID number
3.	FEC ID number
4	FEC ID number

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Accountability Virginia PAC

6. 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 Join	nt Fundraising Representativ	e Leadership PAC Sponsor
 Custodian of Records: Ident books and records. 	ify by name, address (phone number optior	nal) and position of the pers	on in possession of committee
Begun, Jer	emy,,,		
Mailing Address	PO Box 15845		
	Washington		20003
Title or Position	CITY	STATE	ZIP CODE
Treasurer	т т	elephone number	

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	Begun, Jeremy, , ,
Mailing Address	PO Box 15845
	Washington DC 20003 -
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent																						1			I		1			_
Mailing Address																														
			L				1																							
						1	1	1		1											I			1		1]-			
	CITY															ST/	λΤΕ				ZI	> C	OD	Ε						
Title or Position																														
															Tele	eph	ione	e ni	umt	ber			_							

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.

Amal	amated Bank		
Mailing Address	275 Seventh Ave		
	New York	NY [10001 - [] - []]	
	CITY	STATE ZIP CODE	
Name of Bank, Depository	etc.		
Mailing Address			
	CITY	STATE ZIP CODE	

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: