STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY
RECEIVED

JUL 14 2022

DUVAL COUNTY ELEC. By

1. Full Name of Committee		Telephone					
VLSC Charter Am	sendment Referendum Con	nmittee	904-301-				
Mailing Address (include city, state and zip code)							
427 North 3RD Street; Jacksonville Beach, FL 32250							
Street Address (include city, state and zip code)							
427 North 3RD Street; Jacksonville Beach, FL 32250							
2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)							
Name of Affiliated or Connected Organization	Mailing Address		Relationship				
3. Area, Scope and Jurisdiction of the Committee To promote passage of VLSC Referendum on NOV. 2022 ballot							
4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)							
5. Identify by Name, Address an	d Position, the Custodian of Books and Acc	a fact that the same of the sa					
Full Name	Mailing Address	Committee Title or Position					
Susan Marie Wallis	Ponte Vedra Bch, FL 32082	Treasurer					
			American Committee of the Committee of t				

	and Position, Other Principal (Any (include chairman's name)		ers and Mem	bers of the		
Full Name	Full Name Mailing Address		Committee Title or Position			
James W. Emer	y 1764 Maritime C Atlantic Beac)ak Dr, (ch, FL 32233	Chairman			
7. List by Name, Address Committee is Supporti	, Office Sought and Party Affiliang (if none, please indicate)	ation Each Candidate o	r Other Indivi	dual that this		
Full Name	Mailing Address	Office Sought		Party		
NONE		_	_			
8. List Any Issues this Co	emmittee is Supporting: pass	sage of VLSC 1	Referend	lum, NOV 2022		
9. If this Committee is Su	pporting the Entire Ticket of a	Party, Give Name of Pa	rty NOX	16		
10. In the Event of Dissol	ution, What Disposition will be	Made of Residual Fund	ls?			
11. List all Banks, Safety	Deposit Boxes, or Other Depos	sitories Used for Comm	ittee Funds			
Name of Bank or Depository & Account Number		Mailing Address				
Community Fi of Florida,	637 N. Lee Street, Jacksonville, FL 32204					
12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any						
Report Title	Dates Required to be Filed	Name & Position of Off	ficial M	ailing Address		
NONE	_	-		_		
STATE OF FLOR	DUVAL COUNTY					
I, TAMES W. EMERY , certify that the information in this Statement of						
Organization is complete, t	rue and correct.					
X Jamos Signature of	W. Emory Chairman of Political committee	-	7/7/2 Da	te		