Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Van Hollen/McGrath Victory Fund 2020 10605 Concord St ADDRESS (number and street) Ste 202 (Check if address is changed) Kensington 20895 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS stacey@vanhollen.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00723627 FEC IDENTIFICATION NUMBER > 3. X 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. Maud, Stacey, , , Type or Print Name of Treasurer Maud, Stacey, , , [Electronically Filed] 10 19 2019 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC F	Form 1 (Revised 02/2009)	Page 2
TYPE OF	COMMITTEE	
Candida	te Committee:	
(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. (Complinformation below.)	ete the candidate
Name of Candidate		
Candidate Party Affilia	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	ommittee:	
(d)		Democratic, epublican, etc.) Party.
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	ected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fur	ndraising Representative:	
(g) <b>x</b>	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Со	mmittees Participating in Joint Fundraiser	
1.	VAN HOLLEN FOR SENATE FEC ID number C C0057	73758
2.	AMY MCGRATH FOR SENATE, INC. FEC ID number C C0071	1549
3.	FEC ID number	
4.		

Write or Type Committee Na		Page 3
	ame	
Van Hollen/M	cGrath Victory Fund 2020	
. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STAT	E ZIP CODE
	Affiliated Committee Joint Fundraising Repressional Fundraising Repressional Fundraising Repr	
books and records.		
Maud, Full Name	Stacey, , ,	
Mailing Address	10605 Concord St	
	Ste 202	
	Kensington MD	20895
Title or Position	CITY STATE	ZIP CODE
Title or Position  Treasurer	CITY STATE  Telephone number	ZIP CODE  301 - 942 - 3768
Treasurer	and address (phone number optional) of the treasurer of the commi	301 - 942 - 3768
Treasurer  Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the commi	301 - 942 - 3768
Treasurer  Treasurer: List the name any designated agent (e.g. Full Name Maud, S.	and address (phone number optional) of the treasurer of the commig., assistant treasurer).	301 - 942 - 3768
Treasurer  Treasurer: List the name any designated agent (e.g. Full Name Maud, Soft Treasurer	and address (phone number optional) of the treasurer of the comming., assistant treasurer).  Stacey, , ,	301 - 942 - 3768
Treasurer  Treasurer: List the name any designated agent (e.g. Full Name Maud, Soft Treasurer	and address (phone number optional) of the treasurer of the commig., assistant treasurer).  Stacey, , ,	301 - 942 - 3768

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Full Name of Designated Maud Agent	d, Stacey, , ,	
Mailing Address	10605 Concord St	
	Ste 202	
	Kensington MD CITY STATE	20895 ZIP CODE
Title or Position Treasurer	Telephone number	301 - 942 - 3768
safety deposit boxes or Name of Bank, Deposit  M&  Mailing Address		
	I	
	Rockville   MD	20850
	Rockville MD  CITY STATE	20850 ZIP CODE
Name of Bank, Deposit	CITY STATE	
Name of Bank, Deposit	CITY STATE	
Name of Bank, Deposite	CITY STATE tory, etc.	
	CITY STATE tory, etc.	
	CITY STATE tory, etc.	