RECEIVED

2012 AUG 13 AM 8: 10

Committee Name:	FEC MAIL CENTER
MARYLAND HORSE ASSOCIATION	
If registered, FEC ID:	
Today's Date:	
08/08/2012	

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

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.

Respectfully submitted,

Treasurer's Name:		
Quine	Caramante	, Treasurer
()		

12030873266

FEC

STATEMENT OF

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:

FORM 1		ORGANIZ	ZATION		2 AUG 13 AM 8: 10
NAME OF COMMITTEE (in	ı full)	(Check if name is changed)	Example: If typing, type over the lines.	C1 (00 NR 61 NNC)	
MARYLAN	ND HC	RSE ASSOC	IATION		·
					
ADDRESS (number a	nd street)		11111111		
(Check if an is changed)					
is changed)					
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA (Check if is change	address	SS (Please provide only one many one many one	e-mail address) ociation@gmai	I,com	
COMMITTEE'S WEB	PAGE ADI				
(Check if is change		marylandhor	seassociation.t	umbir.çan	
2. DATE) ************************************			
3. FEC IDENTIFIC	CATION NU	IMBER C			
4. IS THIS STATE	MENT X	NEW (N) OR	AMENDED (A)	
I certify that I have a		Iulio Caram	est of my knowledge and beli nante	ef it is true, correct	and complete.
Signature of Treasure	er <u> </u>	Julie Ca	tamante	Date 08	1 08 1 2012
NOTE: Submission of			on may subject the person sign		the penalties of 2 U.S.C. §437g.
Office Use Only			For further informati Federal Election Com Toll Free 800-424-953	mission	FEC FORM 1 (Revised 02/2009)

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		COMMITTEE	
			<i>(</i>)
(a	"	This committee is a principal campaign committee. (Complete the candidate information below	<i>i.</i>)
(b		This committee is an authorized committee, and is NOT a principal campaign committee. (Coninformation below.)	mplete the candidate
	ame of andidate		111111
_	andidate arty Affiliati	Office Sought: House Senate President	State District
(c	·	This committee supports/opposes only one candidate, and is NOT an authorized committee.	ir ritan.
	ame of andidate		
P	arty Con		
(d) []	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
P	olitical A	action Committee (PAC):	
(е) [This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected 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 committee. (i.e., nonconnected committee)	segregated fund or party
		In addition, this committee is a Lebbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Jo	oint Fund	draising Representative:	
(g) [This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
	Corr	nmittees Participating in Joint Fundraiser	
	1.		
	2.		-:
	3 .	FEC ID number C	
	4.		

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FEC Form 1 (Revise	ed 02/2009)	Page 3
Write or Type Committee N	ame	
MARYLAND H	IORSE ASSOCIATION	
6. Name of Any Cohnecte	d Organization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
,None:		
		<u> </u>
		
Mailing Address		
	CITY STAT	E ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
* · · · · · · · · · · · · · · · · · · ·		
 Custodian of Records: books and records. 	Identify by name, address (phone number optional) and position of t	he person in possession of committee
Full Name Pau	la Bacon	
Mailing Address	1504,S. Houston Street	
Walling Addition		
	ıKaufman ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı	(1 175142 1-1
Title or Position	CITY STATE	ZIP CODE
Custodian of R	ecords Telephone number	972, - 824, - 1073
8. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the comm g., assistant treasurer).	ittee; and the name and address of
Full Name Julio	e Caramante	
Mailing Address	1504 S. Houston Street	
	Kaufman T	75142
Title or Position	CITY STATE	ZIP CODE
Treasurer		281 _ 766 _ 4040
1		· ·

FEC Form 1 (Revis	ed 02/2009)		Page 4		
Full Name of Designated Agent Paula	a Bacon	1_1_1_1			
Mailing Address	1504 S. Houston Street	 			
		للللل			
	[Kaufman city	STATE	75142 - ZIP CODE		
Title or Position Assistant Treasure	Telephone nu	ımber <u>[97</u>	28241073		
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,					
JPMo	organ Chase Bank				
Mailing Address	811 Preston Road				
					
	Dallas	LX	75525		
	CITY	STATE	ZIP CODE		
Name of Bank, Depository	, etc.				
ـــــ					
Mailing Address					
		Ш	لىسا-لىسا		
	CITY	STATE	ZIP CODE		

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING BOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt** Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify):** Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED