Only

## STATEMENT OF

PAGE 1/6

**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. Sara Gideon for Maine PO Box 812 ADDRESS (number and street) (Check if address is changed) South Freeport 04078 ME CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS gideon@mbacg.com (Check if address is changed) Optional Second E-Mail Address Isnyder@mbacg.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://saragideon.com/ (Check if address is changed) DATE 30 2019 C00709899 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. Lunn, Lisa, , Ms., Type or Print Name of Treasurer Lunn, Lisa, , Ms., [Electronically Filed] 09 30 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 Fo	orm 1 (Revised 02/2009) Page 2	
		COMMITTEE e Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Nam	e of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)	!
	didate	Gideon, Sara, , ,	
	didate / Affiliati	Office State	ME
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		<u> </u>
Par	ty Con	nmittee:  (National, State (Democratic,	
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) P	arty.
Poli	tical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	is a
		Corporation Corporation w/o Capital Stock Labor Organization	n
		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 segregated fund or p committee. (i.e., nonconnected committee)	arty
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.	
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	_
	2.	FEC ID number	_
	3.	FEC ID number	Ξ
	4		

FEC <b>Form 1</b> (Revised 0	72/2009)	Page <b>3</b>
Write or Type Committee Name		r age 3
Sara Gideon for		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
-		у по орошос.
Van Hollen/Gideon Joi	nit Fund 2020	
Mailing Address	10605 Concord St	
·	Ste 202	
	Kensington MD 20895	.  -
	CITY STATE ZI	P CODE
		L: D400
Relationship: Connected	d Organization Affiliated Committee X Joint Fundraising Representative Leader	ership PAC Sponsor
books and records.	tify by name, address (phone number optional) and position of the person in posse	ession of committee
Mele, Stev	ren, , ,	
Full Name	,PO Box 15845	
Mailing Address	10 200 13040	
	Washington DC 20003	
Title or Position	CITY STATE ZI	P CODE
Asst Treasurer	Telephone number	.  -
	isispilore hamser.	
3. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	e and address of
Full Name Lunn, Lisa,	, Ms.,	1
of Treasurer	IPO Box 919	
Mailing Address		
	_	
	Bangor ME 04402	
Title or Position , Treasurer		P CODE 5 , , 0873 ,
<u> </u>	Telephone number	

FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent	ele, Steven, , ,		
Mailing Address	PO Box 15845		
	Washington CITY	DC 20003 STATE	ZIP CODE
Title or Position Asst Treasurer	Telephone no	umber	
Banks or Other Dep safety deposit boxes	<b>positories:</b> List all banks or other depositories in which the comm or maintains funds.	ittee deposits funds, ho	ds accounts, rents
Name of Bank, Depo	ository, etc.		
A	malgamated Bank		
Mailing Address	1825 K St NW		
	Washington	DC 20006	
	CITY	STATE	ZIP CODE
Name of Bank, Depo	ository, etc.		
<u> </u> M	&T Bank 15190 Frederick Rd		
Mailing Address	13130 Frederick Ru		
	Rockville	MD 20850	
	CITY	STATE	ZIP CODE

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

Amended to add joint fundraising representatives.

Form/Schedule: Transaction ID:

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_

TITLE OR POSITION ▼  FEC ID number C  FEC ID number ID  FULL Number ID  FUL	(g) or (h).	Joint Fundraising	Participant:		
3.	1.			FEC ID number	С
A.   FEC ID number   C    Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Gideon Hegar 2020 Victory  Mailing Address   611 Pennsylvania Ave SE	2.			FEC ID number	С
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Gideon Hegar 2020 Victory  Mailing Address  611 Pennsylvania Ave SE  Num 143  Washington  CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization  Affiliated Committee  ✓ Joint Fundraising Representative  Leadership PAC Sponsor  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	3.			FEC ID number	C
Gideon Hegar 2020 Victory  Mailing Address  611 Pennsylvania Ave SE  Num 143  Washington  CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponso  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲ STATE ▲ ZIP CODE ▲	4.			FEC ID number	C
Gideon Hegar 2020 Victory  Mailing Address    611 Pennsylvania Ave SE					
Mailing Address    Mailing Address   Mum 143				ing Representative	e, or Leadership PAC Sponsor
Num 143  Washington  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Sponso  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  ZIP CODE ▲	Gio	deon Hegar 202	0 Victory		
Num 143  Washington  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Sponso  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  ZIP CODE ▲					
Num 143  Washington  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponso  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  ZIP CODE ▲			611 Pennsylvania Ave SE		
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponso  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	ľ	Mailing Address	Num 143		
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponso  Designated Agent: Identify by name, address (phone number – optional)  Full Name				DC	20003
Connected Organization		<b>.</b>			
Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY ▲  STATE ▲  ZIP CODE ▲	ŀ	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲	. Desigr	nated Agent: Identify	by name, address (phone number - optional)		
TITLE OR POSITION ▼	Fu	ıll Name	by name, address (phone number – optional)		
TITLE OR POSITION ▼	Fu	ıll Name	by name, address (phone number – optional)		
TITLE OR POSITION ▼	Fu	ıll Name	by name, address (phone number – optional)		
	Fu	ıll Name		STATE A	7IR CODE A
	Fu Ma	all Name	CITY A		ZIP CODE A
Banks or Other	Fu	ıll Name			
	Fu Ma	ailing Address	CITY   CITY   Teleposites: List all banks or other depositories in which the	phone Number	
Name of Bank, Depository, etc.	Fu Ma	ailing Address  TITLE OR POSITION  or Other Depositori deposit boxes or main of Bank,	CITY   CITY   Teleposites: List all banks or other depositories in which the	phone Number	
	Fu  Ma  Ti  Banks safety  Name Deposi	ailing Address  TITLE OR POSITION  or Other Depositori deposit boxes or mail of Bank, sitory, etc.	CITY   CITY   Teleposites: List all banks or other depositories in which the	phone Number	
Depository, etc.	Fu  Ma  Ti  Banks safety  Name Deposi	ailing Address  TITLE OR POSITION  or Other Depositori deposit boxes or mail of Bank, sitory, etc.	CITY   CITY   Teleposites: List all banks or other depositories in which the	phone Number	
Depository, etc.	Fu  Ma  Ti  Banks safety  Name Deposi	ailing Address  TITLE OR POSITION  or Other Depositori deposit boxes or mail of Bank, sitory, etc.	CITY   CITY   Teleposites: List all banks or other depositories in which the	phone Number	