Image# 201510299003253494			_	DACE 1 / 5
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 5 —
			Of	fice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Progressive Grov				
ADDRESS (number and street)	2916 8th Street NE			
(Check if address is changed)	Apt. 3			
is changed)	Washington		DC 200	17
			STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address is changed)	progressivegrowthMD	@gmail.com		
	Optional Second E-Mail Ad	dress		
(Check if address is changed)				
	9 / Y Y Y Y 2015			
3. FEC IDENTIFICATION N	UMBER ► C C	:00590893		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
certify that I have examined t	his Statement and to the best	of my knowledge and belief i	it is true, correct and	complete.
	Durade			
Type or Print Name of Treasure	er Durand Ford			
Signature of Treasurer	und Ford	[Electronically Filed]	Date 10	29 / Y Y Y Y 2015
NOTE: Submission of false, error		may subject the person signing		penalties of 2 U.S.C. §437ç
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

10/29/2015 14 : 23

-	
FEC F	orm 1 (Revised 02/2009)   Page 2
	COMMITTEE
Candidat	e 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. (Complete the candidate information below.)
Name of Candidate	
Candidate Party Affilia	tion Sought: House Senate President
	District
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	
(d)	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Patient
Political /	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization
	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 pa committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fun	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.
Cor	nmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

I

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

## Progressive Growth Maryland

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N										
	Mailing Address									
		CITY		STATE	ZIP CODE					
	Relationship: Connected	Organization Affiliated Committee	ee Joint Fundraising	Representative Le	eadership PAC Sponsor					
7.	. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.									
	Dewardric	McNeal								
	Mailing Address	Po Box 12183								
		Silver Spring		MD 20906						
	Title or Position	CITY		STATE	ZIP CODE					
	Executive Chairman		Telephone num	ber 240 –	602   - <b>4085</b>					
8.	Treasurer: List the name and	l address (phone number optional	) of the treasurer of the	committee; and the na	ame and address of					

 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	Durand Ford
Mailing Address	7104 Mahogany Dr.
	Landover
	CITY STATE ZIP CODE
Title or Position	

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																														
Mailing Address			L																											
			L																											
			L																					L						
CITY									STATE ZIP CODE																					
Title or Position																														
									ĺ						Tele	eph	ione	e ni	uml	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.

Wells F	-argo		
Mailing Address	3852 International Dr		
	Silver Spring		20906
	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: