REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full): Campaign For Maryland's Future

ADDRESS (number and street) ☐ Check if different than previously reported: c/o Blair, White & Associates, P.C. 1901 Research Blvd, Suite 300

CITY, STATE and ZIP CODE: Rockville, MD 20850

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER: C00299365

NOV 18 AM '97

3. ☐ This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☒ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 07/01/96 through 12/31/96		
6. (a) Cash on Hand January 1, 1996		$ 6,099.95
(b) Cash on Hand at Beginning of Reporting Period	$ 6,094.84	
(c) Total Receipts (from Line 19)	$ 53.95	$ 111.09
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 6,148.79	$ 6,211.04
7. Total Disbursements (from Line 30)	$ 60.00	$ 122.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 6,088.79	$ 6,088.79
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ NONE	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ NONE	

For further information contact: Federal Election Commission, 999 E Street, NW, Washington, DC 20463, Toll Free 800-424-9530, Local 202-376-3120

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: DOUGLAS C. WHITE

Signature of Treasurer: [signature]

Date: 11/10/97

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X

(revised 1/1/91)