

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

Friends of Cathy Johnson Pendleton

ADDRESS (number and street)

P.O. Box 5004

(Check if address is changed)

Laurel

MD

20726-1504

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

gamjampublishing@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

CathyJohnsonPendletonforcongress.com

2. DATE

03 07 2012

3. FEC IDENTIFICATION NUMBER

000500694

4. 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.

Type or Print Name of Treasurer

Michelle Moore / Cathy Johnson Pendleton - Asst. Treas.

Signature of Treasurer

Cathy Johnson Pendleton

Date

03 07 2012

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 Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

12030752754

5. TYPE OF COMMITTEE

Candidate 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 Affiliation **DEM** Office Sought: House Senate President State **MD** District **05**

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a **Nat** (National, State or subordinate) committee of the **DEM** (Democratic, Republican, etc.) Party.

Political 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
- 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 party 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 Fundraising 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.

Committees Participating in Joint Fundraiser

- 1. _____ FEC ID number **C**
- 2. _____ FEC ID number **C**
- 3. _____ FEC ID number **C**
- 4. _____ FEC ID number **C**

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Write or Type Committee Name

Friends of Cathy Johnson Pendleton for Congress

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership 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.

Full Name

Michelle Moore

Mailing Address

PO Box 5004

Laurel

MD

20726-1504

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

301-498-8913

8. 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

Michelle Moore

Mailing Address

PO Box 5004

Laurel

MD

20726-1504

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

[Empty grid lines for telephone number]

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Full Name of Designated Agent Cathy Johnson Pendleton

Mailing Address PO Box 5004

Laurel MD 20736
CITY STATE ZIP CODE

Title or Position Asst. Treasurer Telephone number 240-593-4144

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.

Name of Bank, Depository, etc.

M&T Bank

Mailing Address 1470 D MAIN Street

Upper Marlboro MD 20772
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Wells Fargo Bank

Mailing Address 14817 Baltimore Ave

Laurel MD 20707
CITY STATE ZIP CODE

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Federal Election Commission
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 FOR INCOMING DOCUMENTS**

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