

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Campaign for Maryland

ADDRESS (number and street)

220 Broadway

☐Check if different
than previously
reported. (ACC)

Centreville

MD

21617

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00384263

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☒April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2007

through

03

31

2007

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

Lynn Caligiuri

Signature of Treasurer

Electronically Filed by Lynn Caligiuri

Date

04

12

2007

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

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Campaign for Maryland

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		5050.86
(b) Cash on Hand at Beginning of Reporting Period	5050.86	
(c) Total Receipts (from Line 19)	6250.00	6250.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11300.86	11300.86
7. Total Disbursements (from Line 31)	2100.00	2100.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9200.86	9200.86
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
Campaign for Maryland

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	250.00	250.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	250.00	250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	6000.00	6000.00
(c) Other Political Committees (such as PACs)	6250.00	6250.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	6250.00	6250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6250.00	6250.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		2100.00	2100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		2100.00	2100.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		0.00	0.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		2100.00	2100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		2100.00	2100.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	6250.00	6250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6250.00	6250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2100.00	2100.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2100.00	2100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Campaign for Maryland

A. Full Name (Last, First, Middle Initial)

Stephen B Phillips

Mailing Address 1215 E. Fort Ave.

City State Zip Code
 Baltimore MD 21230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Chair

Occupation
Phillips Seafood

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.4874

Amount of Each Receipt this Period

250.00

donation/fundraising luncheon

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 10

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Campaign for Maryland

Full Name (Last, First, Middle Initial)
A. AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15TH STREET, NW #802

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00010868**

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 9 / 2 0 0 7

Transaction ID: SA11C.4885

Amount of Each Receipt this Period

1000.00

Donation/Fundraising Luncheon

Full Name (Last, First, Middle Initial)
B. AMERICAN PILOTS' ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 499 SOUTH CAPITOL STREET SW #409

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C C00041061**

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 7

Transaction ID: SA11C.4866

Amount of Each Receipt this Period

500.00

contribution/fundraising lunch

Full Name (Last, First, Middle Initial)
C. CONSTELLATION ENERGY GROUP INC. FEDERAL PAC

Mailing Address 750 E. Pratt St. 5th Floor
P.O. Box 1475

City State Zip Code
Baltimore MD 21202

FEC ID number of contributing federal political committee. **C C00041376**

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 9 / 2 0 0 7

Transaction ID: SA11C.4884

Amount of Each Receipt this Period

1000.00

Donation/Fundraising Luncheon

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Campaign for Maryland

A. DEAN FOODS COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 2515 McKinney Avenue Suite 1200

City State Zip Code
 Dallas TX 75201

FEC ID number of contributing
federal political committee. **C** C00340083

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 7 / 2 0 0 7

Transaction ID: SA11C.4869

Amount of Each Receipt this Period

1000.00

contribution/fundraising
lunch

B. FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 50 F Street NW
 Suite 900

City State Zip Code
 Washington DC 20001

FEC ID number of contributing
federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 0 8 / 2 0 0 7

Transaction ID: SA11C.4862

Amount of Each Receipt this Period

1000.00

contribution

C. GENESIS HEALTH VENTURES INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 101 EAST STATE STREET

City State Zip Code
 KENNETT SQUARE PA 19348

FEC ID number of contributing
federal political committee. **C** C00292094

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 9 / 2 0 0 7

Transaction ID: SA11C.4886

Amount of Each Receipt this Period

1000.00

Donation/Fundraising Luncheon

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 10

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Campaign for Maryland

A. Full Name (Last, First, Middle Initial)

NSTA PAC

Mailing Address 113 SOUTH WEST STREET 4TH FLR

City State Zip Code
 ALEXANDRIA VA 22314

FEC ID number of contributing
federal political committee.

C C00179275

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 9 / 2 0 0 7

Transaction ID: SA11C.4883

Amount of Each Receipt this Period

500.00

Donation/Fundraising luncheon

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

6000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Campaign for Maryland

A. Full Name (Last, First, Middle Initial) Lynn Caligiuri		Transaction ID: SB21B.4864 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 7</div> </div>	
Mailing Address 220 Broadway			
City Centreville	State MD	Zip Code 21617	
Purpose of Disbursement fundraising services		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>1000.00</div>	

B. Full Name (Last, First, Middle Initial) Lynn Caligiuri		Transaction ID: SB21B.4865 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 0 7</div> </div>	
Mailing Address 220 Broadway			
City Centreville	State MD	Zip Code 21617	
Purpose of Disbursement fundraising services		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>1000.00</div>	

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

TOTAL This Period (last page this line number only) ►

2000.00