## 12030730915

FEC FORM

## STATEMENT OF ORGANIZATION

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FORM 1	ORGANIZATION	ZUIZ FED -Z AITTI 1-					
		OMEGOS MODELL CENTER					
NAME OF COMMITTEE (in	full) (Check if name Example: If ty over the lines	· · · · · · · · · · · · · · · · · · ·					
Nancy Jac	obs for Congress						
ADDRESS (number a	Weyrich Cronin and So	orra, 139 N. Main Street, 201					
(Check if a is changed)	1	MD 21014					
	CITY	STATE ZIP CODE					
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-mail address)	orcongress.com					
is change							
COMMITTEE'S WEB	PAGE ADDRESS (URL)						
(Check if is change		ss.com					
2. DATE 0	<u>3</u> 2012						
3. FEC IDENTIFICATION NUMBER C00509216							
4. IS THIS STATE	MENT NEW (N) OR AME	ENDED (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 of Print Name of Treasurer Lesley Lookingbill, CPA							
Type or Print Name	Treasurer						
Signature of Treasure	. Jesley Loshin fall, C	PA Date 01 30° 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	Federal El	er information contact: ection Commission 100-424-9530 (Revised 02/2009) 694-1100					

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	nalaate	• Committee:  This committee is a principal campaign committee. (Complete the candidate information below.)	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	ne of	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
	didate	Nancy Camp Jacobs	
	didate y Affiliati	on Rep Office Sought: House Senate President	State MD District 02
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	ne of didate		
Par	ty Con	nmittee:	
(d) ·			Democratic, Republican, etc.) Part
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	nected organization is
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
<b>(f)</b>		This committee supports/opposes more than one Federal candidate, and is NOT a separate sec	regated fund or part
(4)		committee. (i.e., nonconnected committee)	,
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is ล โ⊫eaderehip PAC. (Identify sponsor en line 6.)	
Joir	nt Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a faderal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number	
	3.	FEC ID number C	
	4.		andre a feet after after a feet

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Write or Type Committee Name						
Nancy Jacobs for Congress						
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Represe	ntative, or Leadership PAC Sponsor				
Mailing Address						
	CITY	TATE ZIP CODE				
	OH 1	IAIL ZIF CODE				
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Rep	presentative Leadership PAC Sponsor				
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of	of the person in possession of committee				
Full Name	aron Taylor					
Mailing Address	Weyrich Cronin and Sorra, 139 N Mair	St, 201				
	[					
	Bel Air	MD 21014 -				
Title or Position	CITY STA	ATE ZIP CODE				
Bookkeeper	Telephone number	[410, ]-[879, ]-[2237, ]				
3. Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the cong., assistant treasurer).	nmittee; and the name and address of				
Full Name Les	ley Lookingbill					
Mailing Address	Weyrich Cronin and Sorra, 139 N Main	St., 201				
	Bel Air N	/D 21014				
Title or Position	CITY STA	TE ZIP CODE				
Treasurer	Telephone number	410 - 879 - 2237				

Title or Position

Designated

Agent

|Assistant Treasurer

Telephone number

STATE

STATE

410 \_ \_ 879 \_ \_ 2237 \_ ]

ZIP CODE

ZIP CODE

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.

CITY

Name of Bank, Depository, etc.

PNC I	3ank, , , , , , , , , , , , , , , , , , ,							
Mailing Address	140 N Main Street							
	Bel Air	MP)	21014					
	CITY	STATE	ZIP CODE					
Name of Bank, Depository, etc.								
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A4-'9' A-1-1	1							
Mailing Address								
Mailing Address								

CITY

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(3/2005)

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS** Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify):