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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.

12FB4M5

Applebaum for Congress

ADDRESS (number and street)

P.O. Box 10081

(Check if address
is changed)

Baltimore

MD

21285

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

Vote4Gary@comcast.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

ApplebaumforCongress.com

COMMITTEE'S FAX NUMBER

410-363-2023

2. DATE

01 24 2006

3. FEC IDENTIFICATION NUMBER ▶

C

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

Rick Smith

Signature of Treasurer

Rick Smith

Date

01 24 2006

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 202-894-1100

FEC FORM 1
(Revised 02/2003)

26038973079

5. TYPE OF COMMITTEE (Check One)

- (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 Gary Applebaum

Candidate Party Affiliation Rep Office Sought: House Senate President State MD District 03

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

Name of Candidate _____

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

- (e) This committee is a separate segregated fund.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

26038973080

Write or Type Committee Name

Applebaum for Congress

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 Rick Smith

Mailing Address P.O. Box 10081
Baltimore
Baltimore MD 21285

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 410-363-0961

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 Rick Smith

Mailing Address P.O. Box 10081
Baltimore MD 21285

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 410-363-0961

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

26038973081

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.

Mercantile Bank and Trust

Mailing Address

409 Washington Ave.

TOWSON

MD

21204

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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Federal Election Commission
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Jm U
 PREPARER
 (3/2005)

2-3-06
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