Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Lashar for Congress 3414 Rockway Avenue ADDRESS (number and street) (Check if address is changed) Annapolis 21403 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS david@lashar2018.us (Check if address is changed) Optional Second E-Mail Address |dlashar@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://lashar2018.us (Check if address is changed) DATE 2018 C00676742 FEC IDENTIFICATION NUMBER > 3. X 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. Johnston, Bob, , , Type or Print Name of Treasurer Johnston, Bob, , , [Electronically Filed] 04 19 2018 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 02/2009)		Page 2
TYPE OF COMMITTEE		
Candidate Committee:		
(a) This committee is a principal car	mpaign committee. (Complete the candidate information below.))
information below.)	committee, and is NOT a principal campaign committee. (Com	plete the candidate
Name of Candidate Lashar, James, Da	ıvid, ,	
Candidate Office		State
Party Affiliation LIB Sough	ht: X House Senate President	District 03
(c) This committee supports/opposes	s only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committee:		
(d) This committee is a		(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):		
(e) This committee is a separate se	gregated fund. (Identify connected organization on line 6.) Its cor	nected organization is a:
Corporation	Corporation w/o Capital Stock	Labor Organization
Membership Organizatio	n Trade Association	Cooperative
In addition, this co	ommittee is a Lobbyist/Registrant PAC.	
(f) This committee supports/oppose committee. (i.e., nonconnected co	es more than one Federal candidate, and is NOT a separate semmittee)	egregated fund or party
In addition, this committee	e is a Lobbyist/Registrant PAC.	
In addition, this committee	e is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:		
(6)	ons, pays fundraising expenses and disburses net proceeds for tw t one of which is an authorized committee of a federal candidate.	vo or more political
	ons, pays fundraising expenses and disburses net proceeds for tw f which is an authorized committee of a federal candidate.	o or more political
Committees Participating in Joint F	undraiser	
1. [_ _ _	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

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Write or Type Committee Nar	me	-
Lashar for Cor	ngress	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
NONE		
Mailing Address		
-		
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Representative Lo	eadership PAC Sponsor
Custodian of Records: Id books and records.	lentify by name, address (phone number optional) and position of the person in po	ossession of committee
Lashar, -	James, David, ,	
Mailing Address	3414 Rockway Avenue	
Maining / Nauress		
	Annapolis MD 21403	
Title or Position	CITY STATE	ZIP CODE
Candidate	Telephone number 410 –	267 6147
Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and the n , assistant treasurer).	ame and address of
Full Name Johnstor of Treasurer	n, Bob, , ,	
Mailing Address	P. O. Box 1633,	
	Bel Air	
Title or Position Treasurer	CITY STATE Telephone number	310 - 5373

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Full Name of Designated Agent	ashar, Margaret, , ,	
Mailing Address	3414 Rockway Aveune	
	Annapolis MD 21403 CITY STATE Z	IP CODE
Title or Position Assistant Treasure	er Telephone number	
safety deposit boxe Name of Bank, Dep	epositories: List all banks or other depositories in which the committee deposits funds, holds as or maintains funds. pository, etc. Bank of America	accounts, rents
	Sank of America	
<u>[</u>		
Mailing Address	2200 Forest Drive	
L		
L		
L	2200 Forest Drive Annapolis MD 21404	IP CODE
L	2200 Forest Drive Annapolis CITY STATE Z	IP CODE
Mailing Address	2200 Forest Drive Annapolis CITY STATE Z	IP CODE
Mailing Address	2200 Forest Drive Annapolis CITY STATE Z pository, etc.	
Mailing Address Name of Bank, Dep	2200 Forest Drive Annapolis CITY STATE Z pository, etc.	
Mailing Address Name of Bank, Dep	2200 Forest Drive Annapolis CITY STATE Z pository, etc.	