**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Voters for Steve Worton 2805 Page Ct ADDRESS (number and street) (Check if address is changed) Fallston 21047 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS worton4congress@gmail.com (Check if address is changed) Optional Second E-Mail Address steve.worton@yahoo.com COMMITTEE'S WEB PAGE ADDRESS (URL) worton4congress.org (Check if address is changed) DATE 2017 C00658609 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Kovac, John, M,, Type or Print Name of Treasurer Kovac, John, M,, [Electronically Filed] 08 2017 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 <b>2</b>			
TYPE OF COMMITTEE				
Candidate Committee:				
(a) This committee is a principal campaign committee. (Comple	ete the candidate information below.)			
(b) This committee is an authorized committee, and is NOT a information below.)	principal campaign committee. (Complete the candidate			
Name of Candidate Worton, Stephen, Kenneth, ,				
Candidate Office Party Affiliation DEM Sought: X House	State			
Party Affiliation DEM Sought: X House	Senate President District 01			
(c) This committee supports/opposes only one candidate, and	is NOT an authorized committee.			
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) co	(Democratic, Republican, etc.) Party.			
Political Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify cor	nnected organization on line 6.) Its connected organization is a:			
Corporation	tion w/o Capital Stock Labor Organization			
Membership Organization Trade A	ssociation Cooperative			
In addition, this committee is a Lobbyist/Regi	strant 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 exper committees/organizations, at least one of which is an authorize	•			
(h) This committee collects contributions, pays fundraising expendent committees/organizations, none of which is an authorized contributions.				
Committees Participating in Joint Fundraiser				
1.	FEC ID number			
2.	FEC ID number			
3	FEC ID number C			
4.	FEC ID number			

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Write or Type Committee Na		5
Voters for Ste	ve Worton	
	d Organization, Affiliated Committee, Joint Fundraising Representative	ve, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponso
. Custodian of Records: I books and records.	dentify by name, address (phone number optional) and position of the	e person in possession of committee
Kovac,	John, M, ,	
Mailing Address	2428 Dixie Lane	
	Forest Hill MD	21050
Title or Position	CITY STATE	ZIP CODE
treasurer	Telephone number	443 - 243 - 0519
Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee., assistant treasurer).	ee; and the name and address of
Full Name Kovac, of Treasurer	John, M, ,	
Mailing Address	2428 Dixie Lane	
	Forest Hill MD	21050
Title or Position	CITY STATE	ZIP CODE
treasurer	Telephone number	443 - 243 - 0519

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Full Name of Designated Agent	Worton, Michael, J., ,			
Mailing Address	1208 Coyote CT			
	Abingdon MD 21009  CITY STATE ZI	IP CODE		
Title or Position Asst Treasurer		50   -   1425		
. 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.				
	Bank of America			
Mailing Address	1427 Rock Spring Road			
	Bel Air 21014			
	CITY STATE Z	IP CODE		
Name of Bank, Depository, etc.				
Mailing Address				
	CITY STATE Z	IP CODE		

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1A Transaction ID:

As this is a new committee - A bank account has not been opened until the committee is recorded and an ID number provided. Should there be any question - please contact me at 443-966-0063 - Steve Worton or contact John Kovac Treasurer at 443-243-0519

Form/Schedule: Transaction ID: