**FEC** 

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Libertarian Party of Maryland PO Box 176 ADDRESS (number and street) (Check if address is changed) Abingdon 21009 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS treasurer@lpmaryland.org (Check if address is changed) Optional Second E-Mail Address katie@dbcapitolstrategies.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://lpmaryland.org/ (Check if address is changed) DATE 2016 C00618249 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. Michael Linder Type or Print Name of Treasurer Michael Linder [Electronically Filed] 80 2016 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 Only

Local 202-694-1100

ı	FFC: For	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE	E OF C	OMMITTEE	1 49 <del>0</del> 2
Can	didate	Committee:	
(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. (Compleinformation below.)	ete the candidate
Name Cand	e of lidate		
	lidate Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Parl	y Con	nmittee:	
(d)	×	CTA ' '	emocratic, publican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a
			abor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising 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 federal candidate.	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.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC <b>Form 1</b> (Revised 0	02/2009)	Page <b>3</b>
Write or Type Committee Name		
Libertarian Party	y of Maryland	
	rganization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
Gary Johnson Victory I  Mailing Address	Fund  107 S West St  Ste 922	22314 ZIP CODE
books and records.	tify by name, address (phone number optional) and position of the personance	on in possession of committee
Full Name	107 S West St Ste 922 Alexandria	22314
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	
B. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; an issistant treasurer).	nd the name and address of
Full Name Michael Lin of Treasurer Mailing Address	107 S West St Ste 922	22314
Title or Position Treasurer	Telephone number	

Full Name of Designated Agent	Christina Sirois	
Mailing Address	107 S West St	
	Ste 922	
	Alexandria VA 22314  CITY STATE ZIF	CODE
Title or Position Assistant Treasure		
Banks or Other D safety deposit boxe	<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, holds are sor maintains funds.	ccounts, rents
Name of Bank, De	epository, etc.	
	Access National Bank	
	epository, etc.	
Ľ	Access National Bank  4221 Walney Road	
Ľ	Access National Bank  4221 Walney Road  Suite 120  Chantilly  VA 20151	P CODE
Ľ	Access National Bank  4221 Walney Road  Suite 120  Chantilly  CITY  STATE  ZIF	P CODE
Mailing Address	Access National Bank  4221 Walney Road  Suite 120  Chantilly  CITY  STATE  ZIF	P CODE
Mailing Address	Access National Bank  4221 Walney Road  Suite 120  Chantilly  CITY  STATE  ZIF	P CODE
Mailing Address  Name of Bank, De	Access National Bank  4221 Walney Road  Suite 120  Chantilly  CITY  STATE  ZIF	P CODE
Mailing Address  Name of Bank, De	Access National Bank  4221 Walney Road  Suite 120  Chantilly  CITY  STATE  ZIF	P CODE