

# 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. 12FE4M5

Mind The Gap

ADDRESS (number and street) 743 Cooksey Lane

(Check if address is changed)

Stanford CITY ▲ CA STATE ▲ 94305 ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) mtg@mbacg.com

Optional Second E-Mail Address beth@mtg.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 01 / 31 / 2022

3. FEC IDENTIFICATION NUMBER C C00683649

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 Gottlieb, Graham, D., ,

Signature of Treasurer Gottlieb, Graham, D., , [Electronically Filed] Date 01 / 31 / 2022

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.