(C)

SECRETARY OF THE SENATE

09 APR 29 PM 12: 17 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Mikulski Majority PAC ADDRESS (number and street) (Check it address is changed) CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) mikulskimajority@comcast.net : (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check it address is changed) U 2009 DATE 04 듀 0 C FEC IDENTIFICATION NUMBER IS THIS STATEMENT OR 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. Michael Morrill Type or Print Name of Treasurer 2009 Date Signature of Treasurer NOTE: Submission of lates, 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

Toll Free 800-424-9530

Local 202-694-1100

Only

(Ravised 02/2009)

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	TYPE OF COMMITTEE Candidate Committee:							
(a)		This committee is a principal campai	gn committee. (Compl	ete the candidate i	nformation belov	v.)		
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	Name of Candidate							
	ndidate ty Alliliat	Office Sought:	House	Senate	President	State District		
(c)		This committee supports/opposes on	ly one candidate, and	is NOT an authoriz	red committee.	District		
	ne ol Ididate							
Pai	rty Cor	nmittee:						
(d)		This committee is a	(National, State or subordinate) co	mmittee of the		(Democratic, Republican, etc.) Party.		
Pol	litical A	Action Committee (PAC):						
(e)		This committee is a separate segrega	ated fund. (Identify con	nected organization	on line 6.) Its co	onnected organization is a:		
		Corporation	Согрога	tion w/o Capital Sto	ock	Labor Organization		
		Membership Organization	Trade A	ssociation		Cooperative		
		In addition, this commi	ttee is a Lobbyist/Regi	strant PAC.				
(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or part 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.)								
Joir	nt Fund	draising Representative:						
(g)	x	This committee collects contributions, p committees/organizations, at least one						
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.							
	Committees Participating in Joint Fundraiser							
	1.	Mikulski for Sehate Committee		FEC ID nu	inper C C00	199273		
	2.	Building A Majority PAC (BAMP	AC)	FEC ID nu	mper C C00	0412221		
	3.			FEC ID nu	mber C			
	4.		111!!!	FEC ID nur	uper C			
						,		

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Write or Type Committee Name	8						
	Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadorship PAC	Sponsor					
		<u> </u>					
Mailing Address							
	CITY STATE ZIP CO	- <u> </u>					
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Leadership	PAC Sponsor					
. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.							
Ingeb Full Namo	Ingeborg Knight Full Namo Label Delta Lab						
Malling Address	2902 West Strathmore Ave						
	<u> </u>	<u> </u>					
	Baltimore MD 21209	لـــــا					
Title or Position	CITY STATE ZIP CO	DE					
Administrator , , , ,	!	8178					
	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 Michael N	Morrill	11:1					
Mailing Address	6413 River Ruin + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 +	للللل					
		لنسلل					
	CITY STATE ZIP COL	· Luul DE					
Title or Position	Telephone number 443 - 472 -	. 2374					

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Full Name of Designated Agent	Sandra Brantley					
Mailing Address	808 S. Clinton Street					
		1111111				
	(Baltimore, , , , , , , , , , , , , , , , , , ,	MD STATE	21224 1 - ; ; . ZIP CODE			
Title or Position Assistant Treas	Surer Tok	ephone number 41	0 - 558 - 2043			
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.						
Mailing Address	511,9 Roland Ave					
	Baltimore	MD]	21210 -			
	CITY	STATE	ZIP CODE			
Name of Bank, De	spository, etc.					
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Mailing Address			لتستنينا			
	1:11111111111	ليا لي				
	CITY					

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING D The FEC added this page to the end of this filing to indicate he	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C) 4/25/09
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation	ation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
EV .	4/30/09
(3/2005)	DATE PREPARED