

SECRETARY OF THE SENATE

05 APR -5 AM 9:38

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Exempt: If typing, type over the lines.

12PE4MS

Office for U.S. Senate

ADDRESS (number and street)

PO. BOX 1567

(Check if address is changed)

BALTIMORE

MD

21203-1567

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

Office for Senate.com

COMMITTEE'S FAX NUMBER

410-788-0077

2. DATE

3. FEC IDENTIFICATION NUMBER

C

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

Kia E. Heath

Signature of Treasurer

Kia E. Heath

Date

03 30 2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §497g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-894-1100

FEC FORM 1 (Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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. (Complete the candidate information below.)

Name of Candidate KWESI MAFUME

Candidate Party Affiliation Dem Office Sought House Senate President State MD District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

(d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

(e) This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

Write or Type Committee Name

Mfume for U.S. Senate

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name KIA HEATH

Mailing Address 3522 Hillton Road

BALTIMORE MD 21215

Title or Position CITY STATE ZIP CODE

CUSTODIAN OF RECORDS Telephone number 410-664-9103

8. 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 KIA HEATH

Mailing Address 3522 Hillton Road

BALTIMORE MD 21215

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 410-664-9103

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

9. 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.

The Harbor Bank of Maryland

Mailing Address

5000 Park Heights Avenue

Baltimore MD 21215

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

PO Box 1557
Baltimore, MD 21203-1557



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Office of Public Records
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Alexandria, VA 22304

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