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FEC

STATEMENT OF **ORGANIZATION**

SECRETARY OF THE SENATE

15 NOV -3 PM 3: 06

FORM 1 Office Use Only NAME OF (Check if name Example:If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Bring Back Sense to the Senate 2016 Maryland ADDRESS (number and street) (Check if address is changed) 'ashington CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) compliance@dscc.org (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE FEC IDENTIFICATION NUMBER 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. Yates Baroody Type or Print Name of Treasurer Date Signature of Treasurer NOTE: Submission of false, erronedus, 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 02/2009) Toll Free 800-424-9530 Only

Local 202-694-1100

		FEC F	Form 1 (Revised 02/2009) Page 2	2				
5.			СОММІТТЕЕ					
		idida	ate 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. (Complete information below.)							
	Nam Can	e of didate		<u> </u>				
		didate / Affilia	Senate President					
	(c)		District This committee supports/opposes only one candidate, and is NOT an authorized committee.	l				
	Nam Cand	e of lidate 						
	Part	ty Co	mmittee:					
	(d)		This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.	c.) Party.				
	Poli	tical /	Action Committee (PAC):					
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	ation ic a:				
			Corporation					
			Labor Organi:	zation				
			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 segregated fund committee. (i.e., nonconnected committee)	or party				
			In addition, this committee is a Lobbyist/Registrant PAC.					
_			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
J	oint	Fund	draising Representative:					
(9	3)	\times	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, at least one of which is an authorized committee of a federal candidate.	al				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, none of which is an authorized committee of a federal candidate.	al				
	Committees Participating in Joint Fundraiser							
		1,	Please see attached					
		2.	FEC ID number					
		3.	FEC ID number C					
		4.	FEC ID number					

			<u> </u>
Mailing Address			
		·	1 . 1.1
	CITY	STATE	ZIP CODE
Relationship: Cont	nected Organization Affiliated Committee	Joint Fundraising Representa	ative Leadership PA(
. Custodian of Records books and records.	: Identify by name, address (phone number o	optional) and position of the po	erson in possession of c
Full Name Ya	tes Baroody	1 1 1 1 1 1 1 1	
Mailing Address	120 Maryland Avenue NI	E	
	Washington	DC ₁	20002 1_1
Title or Position	CITY	STATE	71D 00D5
, Table 2000	5 ,	SIAIE	ZIP CODE
	1 1 1 1 1 1 1 1 1 1 1 1 1	Telephone number 20	2 224 24
Treasurer			
Treasurer: List the namany designated agent (e	e and address (phone number optional) of the e.g., assistant treasurer).		and the name and addr
Treasurer: List the name any designated agent (e	sy., assistant treasurer).	e treasurer of the committee;	and the name and addr
Treasurer: List the name any designated agent (experience) Full Name of Treasurer Yat	es Baroody	e treasurer of the committee;	and the name and addr
Treasurer: List the name any designated agent (experience) Full Name of Treasurer Yat	tes Baroody 120 Maryland Avenue NE	te treasurer of the committee;	

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

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FEC Form 1 (Revised 02/2009)

Bring Back Sense to the Senate 2016

Write or Type Committee Name

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Committees Participating in Joint Fundraiser

DSCC	C00042366
Bennet for Colorado	C00458398
Catherine Cortez Masto for Senate	C00575548
Tammy for Illinois	C00574889
Missourians for Kander	C00572925
Strickland for Senate	C00573212
Maggie for NH	C00588772

Hand Delivered

K. MACCALLUM
ERINTENDENT
ATE OFFICE BUILDING
WITE 732
VASHIR ON, DC 70510-711
PHF 102/224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT VAS:	
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Date of Receipt	Postmark
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USPS PRIORITY MAIL	
Postmark	
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Date of Rece	eipt
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FAX	
Date of Receipt	
OTHER	
PREPARER DATE PREDADED	11/3/15
PREPARER DATE PREPARED	11/ <i>3</i> //3



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