STATEMENT OF

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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. Maya R. Cummings for Congress PO Box 12857 ADDRESS (number and street) (Check if address is changed) **Baltimore** 21217-9998 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS smele@mbacg.com (Check if address is changed) Optional Second E-Mail Address llee@mbacg.com COMMITTEE'S WEB PAGE ADDRESS (URL) MayaForCongress.com (Check if address is changed) DATE 2019 C00726661 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. Owens, Deborah, , , Type or Print Name of Treasurer Owens, Deborah, , , [Electronically Filed] 12 2019 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

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TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign cor	mmittee. (Complete the candidate information below.)
(b) This committee is an authorized committee information below.)	, and is NOT a principal campaign committee. (Complete the candidate
Name of Candidate Rockeymoore Cummings,	Maya, , ,
Candidate Party Affiliation DEM Office Sought:	House Senate President District MD Of
(c) This committee supports/opposes only one	candidate, and is NOT an authorized committee.
Name of Candidate	
Party Committee:	
	ational, State (Democratic, subordinate) committee of the Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fu	und. (Identify connected organization on line 6.) Its connected organization is a:
Corporation	Corporation w/o Capital Stock Labor Organization
Membership Organization	Trade Association Cooperative
In addition, this committee is	a Lobbyist/Registrant PAC.
(f) This committee supports/opposes more that committee. (i.e., nonconnected committee)	an one Federal candidate, and is NOT a separate segregated fund or party
In addition, this committee is a Lobby	vist/Registrant PAC.
In addition, this committee is a Leade	ership PAC. (Identify sponsor on line 6.)
Joint Fundraising Representative:	
	undraising expenses and disburses net proceeds for two or more political ich is an authorized committee of a federal candidate.
	undraising expenses and disburses net proceeds for two or more political n authorized committee of a federal candidate.
Committees Participating in Joint Fundraiser	
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number C

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Write or Type Committee	Name	·
Maya R. Cun	nmings for Congress	
	ted Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
NONE		
	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conr	nected Organization Affiliated Committee Joint Fundraising Represen	tative Leadership PAC Sponsor
books and records.	: Identify by name, address (phone number optional) and position of the	person in possession of committee
Mele Full Name	, Steven, , ,	
Mailing Address	PO Box 15845	
Mailing Address		
	Washington	20003
Title or Position	CITY STATE	ZIP CODE
Asst Treasurer	Telephone number	
. Treasurer : List the nam any designated agent (e	ne and address (phone number optional) of the treasurer of the committe e.g., assistant treasurer).	e; and the name and address of
	ns, Deborah, , ,	
of Treasurer	PO Box 12857	
Mailing Address		
	Baltimore MD	21217-9998 _
	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	202 - 552 - 0221

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Full Name of Designated Agent	flele, Steven, , ,				
Mailing Address	PO Box 15845				
	Washington	DC 2 STATE	20003 ZIP CODE		
Title or Position Asst Treasurer		STATE phone number]-		
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.					
	Amalgamated Bank				
Mailing Address	1825 K St NW				
	Washington	DC 2	20006		
	CITY	STATE	ZIP CODE		
Name of Bank, De	pository, etc.				
L					
Mailing Address					
	CITY	STATE			