(Revised 06/2012)

Only

STATEMENT OF

PAGE 1 / 4 =

FEC FORM 1		ORGA			_					Office	Use Or	alv			
1. NAME OF COMMITTEE (ir	n full)	(Check if r		Example over the	e:If typing, e lines.	type	12	FE4		Office	Ose Oi	ПУ			
Lanine Wils	son														
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COMMITTEE'S E-MA	All ADDRES	SS													
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2. DATE 0	8 / 21	D / Y Y Y Y Y Y Y Y Y Y													
3. FEC IDENTIFIC	CATION NU	IMBER ▶	C C00	584326											
4. IS THIS STATEM	MENT X	NEW (N)	OR		AMENDE	ED (A)									
I certify that I have e	examined th	is Statement and to	the best of	my kno	wledge and	l belief it	t is true	e, corr	ect a	nd coi	mplete).			
Type or Print Name	of Treasurer	Mrs Wanda J Jorda	an												
Signature of Treasure	er <i>Mrs W</i>	'anda J Jordan		[El	ectronically i	Filed]	Date	TV	08	/	21	′	20′	15	Y
NOTE: Submission of		ous, or incomplete in								ne pen	alties	of 2 I	U.S.C.	§437	7g.
Office Use					r further info						C F				_

Toll Free 800-424-9530

Local 202-694-1100

Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is 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 than one Federal candidate, and is NOT a separate segregated fund or party 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.) Joint Fundraising Representative: (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate. (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. FEC ID number C 2. FEC ID number C 3. FEC ID number C		FEC Fo	rm 1 (Revised 02/2009)	Page 2
(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 Party Affiliation DEM Office Sought: House Senate President District (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (d) This committee is a (National, State or subordinate) committee of the Republican, etc.) Party Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is Corporation C				<u> </u>
(b)				
Name of Candidate Party Affiliation Party Committee: (d) This committee is a leadership PAC. (e) This committee is a separate segregated fund. (Identify sponsor on line 6.) Its committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (f) This committee is a leadership PAC. (Identify sponsor on line 6.) (g) This committee is a leadership PAC. (Identify sponsor on line 6.) (g) This committee is a leadership PAC. (Identify sponsor on line 6.) (g) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (g) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (g) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (g) This committee supports/opposes more than one Federal candidate. (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees of a federal candidate. Committees Participating in Joint Fundraiser 1. FEC ID number C 2. FEC ID number C 3. FEC ID number C	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
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Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commodoks and records. Mrs Wanda J Jordan Full Name 149 Onondaga Drive Mailing Address Forest Heights Title or Position CITY STATE ZIP CODE	FEC Form 1 (Revise	ed 02/2009)	Page 3
NONE Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative, or Leadership PAC Sponsor CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor books and records: Identify by name, address (phone number optional) and position of the person in possession of commodoks and records. Mrs Wanda J Jordan Full Name Mailing Address Forest Heights Forest Heights Forest Heights Title or Position CITY STATE ZIP CODE Treasurer Telephone number 301 - 567 - 283 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Mrs Wanda J Jordan of Treasurer Mrs Wanda J Jordan	Write or Type Committee N	ame	
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Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Mrs Wanda J Jordan of Treasurer 1149 Onondaga Drive		Forest Heights MD 20745	;
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name	Title or Position	CITY STATE	ZIP CODE
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of Treasurer 1149 Onondaga Drive			name and address of
Mailing Address		anda J Jordan	
	Mailing Address	149 Onondaga Drive	
Forest Heights MD 20745			
CITY STATE ZIP CODE Title or Position Treasurer Telephone number Telephone number		. 301	

FEC For n	n 1 (Revised 02/2009)	Page 4						
Full Name of Designated Agent								
Mailing Address								
	CITY STATE	ZIP CODE						
Title or Position	Telephone 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. Capital One								
Mailing Address	New York							
	New York NY 10022							
	CITY STATE	ZIP CODE						
Name of Bank, I	Depository, etc.							
Mailing Address								
	CITY STATE							