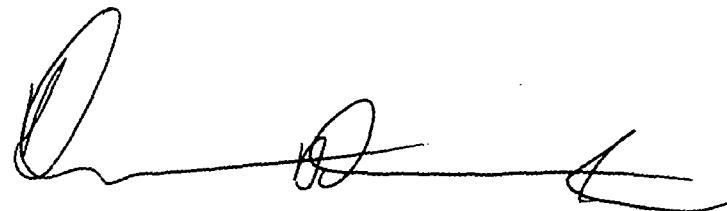


NAME OF COMMITTEE

FROM CITIZENS FOR CLINT SPEILMAN JR

TO CITIZENS FOR CLINT SPEILMAN JR

RECEIVED
FEC MAIL CENTER
2018-01-01 PM 12:01
JAN 01 2018
FEC MAIL CENTER JR



12/31/2028

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEC MAIL CENTER

2026-01-09 12:01
Office Use Only

1. NAME OF
COMMITTEE (in full) (Check if name
is changed) Example: If typing, type
over the lines.

12FE4M5

Citizens for Clint Spellman Jr

ADDRESS (number and street) (Check if address
is changed) (Check if address
is changed)

641 saint Georges Station road

Reisterstown
CITY ▲

MD
STATE ▲

21136
ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed) (Check if address
is changed)

liberty@citizensforclintspellmanjr.com

Optional Second E-Mail Address

COMMITTEE'S WEB-PAGE ADDRESS (URL)

(Check if address
is changed) (Check if address
is changed)

www.citizensforclintspellmanjr.com

2. DATE

12 / 31 / 2025

3. FEC IDENTIFICATION NUMBER ►

C 00931592

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 Clinton B SpellmanJr

Signature of Treasurer



Date

12 / 31 / 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.
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 202-694-1100

FEC FORM 1
(Revised 03/2022)

5. TYPE OF COMMITTEE:

Candidate 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 the candidate information below.)

Name of Candidate

Clint Spellman Jr.

Candidate Party Affiliation

Democra

Office Sought:

 House Senate President

State

MD

District

02

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

Name of Candidate

(National, State

or subordinate) committee of the

(Democratic,

Republican, etc.) Party

Party Committee:

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

Corporation Corporation w/o Capital Stock Labor Organization
 Membership Organization Trade Association Cooperative
 In addition, this committee is a Lobbyist/Registrant PAC.

(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

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

(g) This committee is an independent expenditure-only political committee (Super PAC).

(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

Joint Fundraising Representative:

(i) 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.

(j) 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. C 2. C

Write or Type Committee Name

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

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Sponsor

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

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

 Telephone number

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 Clinton B Spellman JrMailing Address 641 saint georges Station road Reisterstown MD 21136

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

 Candidate Telephone number

Full Name of
Designated
Agent

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

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.

Woodforest National Bank

Mailing Address

1 Frankel Way

Cockeysville

MD

21030

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

CLINTON B SPELMAN JR
641 SAINT GEORGE STATION RD
REISTERSTOWN MD 21136

BALTIMORE MD 21222
2 JAN 2026 PM 2:00
250 YEARS OF SERVICE
SINCE 1775
FOREVER USA
MARINE CORPS



FEDERAL ELECTIONS COMMISSION

1050 FIRST STREET NE
WASHINGTON, DC 20463

RECEIVED
MAIL CENTER
JAN-9 PM 12:00
20463

250 YEARS OF SERVICE
SINCE 1775
FOREVER USA
MARINE CORPS

250 YEARS OF SERVICE
SINCE 1775
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MARINE CORPS

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt	
<input checked="" type="checkbox"/> USPS First Class Mail	Date of Receipt 1/9/26	
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)	
<input type="checkbox"/> USPS Priority Mail	Postmarked	
<input type="checkbox"/> USPS Priority Mail Express	Postmarked	
<input type="checkbox"/> Postmark Illegible		
<input type="checkbox"/> No Postmark		
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date	Date of Receipt
	Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received via FAX	Date of Receipt	
<input type="checkbox"/> Received via Email	Date of Receipt	
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt	
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked	
	1/12/26	
PREPARER (4/2023)	DATE PREPARED	