

STATEMENT OF
ORGANIZATION

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FEC MAIL CENTER

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Office Use Only

12FE4M5

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

MARYLAND GREEN PARTY

ADDRESS (number and street)

P. O. BOX 23018

(Check if address
is changed)

BALTIMORE

CITY ▲

MD

21203-1

STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

GREENPARTYTREASURER@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

MDGREENS.ORG

2. DATE

06 13 2019

3. FEC IDENTIFICATION NUMBER ►

C00358994

4. IS THIS STATEMENT

NEW (N)

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

Brian Bittner

Signature of Treasurer

Brian Bittner

Date

06 13 2019

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 06/2012)

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

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Candidate Party Affiliation

--	--	--

Office Sought:

House

Senate

President

State

--	--

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 **STA** (National, State or subordinate) committee of the **GRE** (Democratic, 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 a:

<input type="checkbox"/> Corporation	<input type="checkbox"/> Corporation w/o Capital Stock	<input type="checkbox"/> Labor Organization
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<input type="checkbox"/> Membership Organization	<input type="checkbox"/> Trade Association	<input type="checkbox"/> Cooperative
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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. <input type="checkbox"/>	FEC ID number C <input type="checkbox"/>
2. <input type="checkbox"/>	FEC ID number C <input type="checkbox"/>
3. <input type="checkbox"/>	FEC ID number C <input type="checkbox"/>
4. <input type="checkbox"/>	FEC ID number C <input type="checkbox"/>

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.

M&T BANK

11 LIGHT STREET

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

SECU CREDIT UNION

Mailing Address

8603 LASALLE RD

CITY

STATE

ZIP CODE

5(g) or (h). **Joint Fundraising Participant:**

1. _____
2. _____
3. _____
4. _____

FEC ID number

C _____
 C _____
 C _____
 C _____

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

Mailing Address

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent: Identify by name, address (phone number – optional)**

Full Name: _____

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. _____

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

U.S. MAIL CENTER
019 JUL 24 AM 10:21

Federal Election Commission
1050 First Street, NE
Washington, DC 20463

RECORDED AND INDEXED
MILDRED
10 JUL 24
FEDERAL ELECTION COMMISSION

P.O. Box 23018
Baltimore, 21203

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	Postmarked 7/19/19	Date of Receipt 7/24/19
<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	
		Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/>	Received from House Records & Registration Office	Date of Receipt	
<input type="checkbox"/>	Received from Senate Public Records Office	Date of Receipt	
<input type="checkbox"/>	Received from Electronic Filing Office	Date of Receipt	
<input type="checkbox"/>	Other (Specify):	Date of Receipt or Postmarked	
<i>ES</i>		<i>7/24/19</i>	
PREPARER (3/2015)		DATE PREPARED	