

committees that file with the County Clerk's office.

*2. Type of Filing:

Committee ID #:

ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION FORM FOR INDEPENDENT, POLITICAL AND INDEPENDENT EXPENDITURE COMMITTEES (PACS)

Fff. Date:

Original:

		Amendment to items:		E	Eff. Date:		
Committee Type (Check one): For more i	nformation regardir	ng comm	ittee types, please see Appe	endix H of the comr	nittee manual.		
*3a Independent: I/We acknowledge that the committee must meet certain requirements before being legally qualified to make contributions at a							
limit that is 10 times greater than the applicable contribution limit for an individual.							
*3b Political: I/We acknowledge tha	t the committee can	never b	e legally qualified to make c	ontributions at a li	mit that is greater than the	applicable	
contribution limit for an individual.							
Is this a Separate Segregated Fund (SSF)? YES	NO	If Yes, the sponsor is a	Corporation	Labor Organization	D.D.S	
			The sponsor's name is:				
*3c. Independent Expenditure PACs	: This committee is o	organize	d exclusively for the purpose	e of making indepe	ndent expenditures that ar	e not in any	
way directly or indirectly "coordinated" w							
case law, including but not limited to Micl	nigan Chamber of Co	mmerce	e et al v Terri Lynn Land,	FSupp2d(W	D MI, 2010). This committe	ee also	
intends to raise funds in unlimited amoun	ts. These committe	es are co	ommonly referred to as Sup-	er PACS.			
*4a. Full Name of Committee (Must inclu	ude affiliate or spon	sor):					
4b. Acronym or Abbreviation (if any):							
*5a. Complete Committee Mailing Addre	ss (May be PO Box)	:					
*5b. Complete Committee Street Address	s (May not be PO Bo	ox):					
*6. Date Committee was Formed in MI:							
*7a. Committee Phone:	7c. Commi	ttee E-m	ail Address:				
7b. Committee Fax:	7d. Commi	ttee We	bsite Address:				
*8. Treasurer Name and Complete Addre	ss:						
Phone #:	Er	nail Add	ress:				
OUT OF STATE COMMITTEE TREASURER IRREVOCABLE WRITTEN STIPULATION: I/We stipulate and agree that any legal process affecting this committee							
served on the Secretary of State or an agent designated by the Secretary of State shall have the same effect as if personally served on me and all other							
principals of this committee. I/We further agree that this appointment shall remain in force as long as any liability of this committee remains outstanding							
within the State of Michigan.	0			0 , , .			
9. Designated Record Keeper Name and (Complete Address:						
	•						
Phone #:	Er	nail Add	ress:				
10. REPORTING WAIVER REQUEST:							
YES, I/WE WANT TO APPLY FOR TH	E REPORTING WAIV	ER. The	committee does not expect	to spend or receive	e in excess of \$1.000 in a c	alendar	
year. I/We understand that if the committee does not spend or received in excess of \$1,000 in a calendar year, the committee does not owe							
Quarterly, Pre, Post and Annual Campaign Statements. I/We further understand that the Reporting Waiver will be automatically lost if the							
committee exceeds the \$1,000 threshold and all required campaign statements must be filed. A Reporting Waiver does not exempt a committee							
from filing Late Contribution Report	is.	·					
NO, I/WE DO NOT WANT TO APPLY		NG WAIN	/ER. The committee expects	to spend or receiv	e in excess of \$1,000 in a c	alendar	
year. I/We understand that the committee owes Quarterly, Pre, Post and Annual Campaign Statements even if the committee does not spend or							
receive in excess of \$1,000 in a calendar year. I/We further understand that the Reporting Waiver cannot be requested retroactively to avoid							
filing requirements and to avoid pa							
*11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association)							
*Official Depository (name and address	s):						
Secondary Depository (name and add							
12. ELECTRONIC FILING: This item applies							

the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date below) *Current Treasurer Designated Record Keeper (Required only if filing electronically)

Committee did not spend or receive or does not expect to spend or receive in excess of \$5,000 and would like to file electronically voluntarily. *13. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing electronically, I/we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in

Date: Date:

Committee spent or received or expects to spend or receive in excess of \$5,000 and is required to file electronically.

INSTRUCTIONS FOR COMPLETING THE STATEMENT OF ORGANIZATION FOR INDEPENDENT, POLITICAL AND INDEPENDENT EXPENDITURE COMMITTEES

Michigan's Campaign Finance Act (MCFA), P.A. 388 of 1976, covers a "person" operating within Michigan or out-of-state as soon as it receives or spends \$500.00 or more in a calendar year to influence voters for or against the nomination or election of one or more candidates in Michigan, the qualification, passage or defeat of one or more ballot questions in Michigan or assists a political party to obtain ballot access in Michigan. The term "person" is used to mean "a business, proprietorship, firm, partnership, joint venture, syndicate, business trust, company, association or two or more individuals who act jointly". As soon as a person reaches the \$500.00 threshold, they have 10 calendar days to form and register a "committee" under the MCFA. A person that is covered by the MCFA, registers a committee by filing this form with the appropriate filing official. A corporation, labor organization or domestic dependent sovereign (recognized Indian tribe) must register a committee in order to receive or spend any money to influence voters for or against the nomination or election of a candidate in Michigan.

COMMITTEE TYPES

Before registering an Independent Committee, Political Committee, or Super Pac, the differences between the three committee types must be given careful consideration. Be sure you are filing as the appropriate committee type. For further information regarding committee types please see Appendix H of the committee manual.

Political Committees: Formed to support or oppose one or more candidates; may support or oppose ballot questions. A Political Committee must observe the same contribution limits that apply to individuals.

Independent Committees: Formed to support or oppose three or more candidates; may support or oppose ballot questions. An Independent Committee that meets the following three criteria may give a candidate ten times the amount a Political Committee is permitted to give the candidate: (1) registers as an Independent Committee at least six months before the election (2) received contributions from a at least 25 persons and (3) in the same calendar year that the 25 contributions are received, expends funds to support or oppose three candidates for elective office. An Independent Committee must adhere to contribution limits applicable to Political Committee until the committee meets the criteria detailed above.

Independent Expenditure PACs (Super PACs) - This committee is organized exclusively for the purpose of making independent expenditures that are not in any way directly or indirectly "coordinated" with any candidate, candidate committee, political party, or political party committee, consistent with applicable case law, including but not limited to Michigan Chamber of Commerce et al v Terri Lynn Land, ____ FSupp2d ____ (WD MI, 2010). This committee also intends to raise funds in unlimited amounts and can accept funds from a DDS, corporations and unions.

WHERE TO FILE THIS FORM

Two copies of this form must be filed when registering a committee. If the districts of all of the candidates supported or opposed are located wholly within the same county, the committee files with the clerk of that county. If the districts of any of the candidates supported or opposed are not located wholly within the same county, the committee files with the Michigan Department of State, Bureau of Elections, Post Office Box 20126, Lansing, Michigan 48901. Exceptions apply for Recall Elections (See Appendix M). Office location: Richard H. Austin Building, 1st Floor, 430 West Allegan Street, Lansing, Michigan 48918-1700. Phone: (517)373-2540. NOTE: The information contained on the Statement of Organization must be kept up-to-date. If a change in the information takes place, an amendment to the form must be filed no later than the due date of the first Campaign Statement required of the committee after the change. The treasurer serving at the time of the change must sign the amendment.

INSTRUCTIONS

- Type or clearly print in ink all information requested on the Statement of Organization form. Each entry on the form is discussed below.
- **1:** On the original Statement of Organization, leave this item blank. An identification number will be assigned to the committee by the filing official. If an identification number has been assigned to the committee, enter it in Item 1.
- *ITEM 2: Indicate whether this is an original Statement of Organization filing or an amendment to a Statement of Organization already on file. If an amendment, list the number of the Item(s) affected and the date the change took place. If filing an amendment, complete Item 2, the item(s) affected and Items 1, 4 and 13.
- *ITEM 3: Check one box (3a, 3b, or 3c) to indicate the type of committee being registered. See committee types above. Independent and Political Committee types (3a & 3b) also need to designate whether or not they are a Separate Segregated Fund (SSF). If they are an SSF, they need to indicate whether the sponsor forming the committee is a corporation, labor organization or a domestic dependent sovereign (DDS). They also need to enter the sponsor's name. Independent Expenditure PACs (Super PACs) should check 3c.
- *ITEM 4: Enter the committee's official name. Do not use initials or abbreviations. An Independent Committee, Political Committee or Independent Expenditure Committee is required to include in the name of the committee the name of the person or persons that sponsor the committee, if any, or with whom the committee is affiliated. A person, other than an individual or a committee, sponsors or is affiliated with an Independent Committee or Political Committee if that person establishes, directs, controls, or financially supports the administration of the committee. A person does not financially support the administration of a committee by merely making a contribution to the committee. If the committee plans to use an abbreviated name or an acronym, enter it in Item 4b.
- *ITEM 5: Enter the committee's mailing address if different from the committee's street address. A post office box is acceptable as a mailing address. All mail from the filing official will be directed to the committee's mailing address shown in Item 5a. Enter the committee's street address in Item 5b. A post office box is not acceptable. (List the treasurer's home address if no other address is available.)
- *ITEM 6: Enter the date the committee was formed in Michigan. The original Statement of Organization form must be received by the filing official within 10 calendar days after the committee's formation date. Late filing fees are assessed at a rate of \$10.00 per business day if the form is filed late.
- *ITEM 7: Enter the committee's area code, phone number and e-mail address.

- *ITEM 8: Enter the full name and mailing address of the committee's treasurer. Include a phone number where the treasurer can be reached during business hours. The committee's treasurer must be registered to vote in Michigan if the committee conducts business through an office or facility located in Michigan. The committee treasurer does not have to be a Michigan resident if the committee does not conduct business through an office or facility located in Michigan. A committee that wishes to have a treasurer who is not a Michigan resident is required to file an "irrevocable written stipulation". The committee does this by checking the box titled OUT-OF-STATE COMMITTEE TREASURER IRREVOCABLE WRITTEN STIPULATION.
- ITEM 9: List the name, mailing address, area code and phone number of the person who will be responsible for the committee's records and Campaign Statement filings. If the committee treasurer will personally handle these responsibilities, leave this item blank. A person designated in this item may sign Campaign Statements but does not have the authority to sign the Statement of Organization forms in place of the treasurer.

ITEM 10: Reporting Waiver Request

- Select "YES, I/WE WANT TO APPLY FOR THE REPORTING WAIVER" on Item 10 if the committee does not expect to receive or spend more than \$1,000 for a calendar year. The committee does not owe the Pre, Post, Annual and Quarterly Campaign Statements as long as the committee does not receive or spend more than \$1000 in a calendar year.
- Select "NO, I/WE DO NOT WANT TO APPLY FOR THE REPORTING WAIVER" on Item 10 if the committee expects to receive or expend in excess of \$1,000 in a calendar year. This means that the committee owes Pre, Post, Annual and Quarterly Campaign Statements even if the committee does not spend or receive in excess of \$1,000 in a calendar year.
- *ITEM 11: In Item 11a, enter the name and address of the Michigan bank, savings and loan association or credit union that the committee now uses or intends to use as its "official depository." The committee's official depository must be located in Michigan if the committee conducts business through an office or facility located in Michigan. The committee depository does not have to be located in Michigan if the committee does not conduct business through an office or facility located in Michigan. In Item 11b, list the names and addresses of any "secondary depositories" the committee currently uses or intends to use. A secondary depository may be used only for the deposit of contributions (for example, as a temporary holding place for receipts from a joint fund raiser); it may not be used for committee expenditures.
- **17.1** 12: Read this section carefully and check the appropriate box. Committees filing with the county clerk's office, skip to Item 13. NOTE: Once a committee has reached the \$5,000 threshold in a calendar year, they are required to file all campaign statements and reports electronically regardless of receipts or expenditures total in the future years.
- *ITEM 13: Enter the treasurer's name where indicated. The form **must** be signed and dated by the active committee treasurer. Electronic Filers: The forms must be signed by the Treasurer and the Designated Record-keeper (if applicable) and serves as an electronic signature for electronically filing Campaign Statements and reports. NOTE: Once a committee has reached the \$5,000 threshold they are required to file all campaign statements and reports electronically regardless of receipts or expenditures total in the future years. The Record Keeper needs to sign and date this form if campaign statements are to be filed electronically.