Image# 13963173039				06/24/2013 15 : 58
FEC FORM 1	STATEMEN ORGANIZ			PAGE 1 / 4
				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Middle Ground P				
1				
ADDRESS (number and street)	2908 S Myra Ridge Drive			
(Check if address is changed)				
	Urbana			1802-7032
			STATE ▲	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS			
X (Check if address	middlegroundpac@gma			
is changed)	Optional Second E Mail Add			
	Optional Second E-Mail Add			
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 06 / 1				
3. FEC IDENTIFICATION N		00350421		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	his Statement and to the best	of my knowledge and belief	it is true, correct ar	id complete.
Type or Print Name of Treasure	r Mark Shelden			
Signature of Treasurer	. Shelden	[Electronically Filed]	Date 06	/ D D / Y Y Y Y 24 2013
NOTE: Submission of false, erron	eous, or incomplete information ANY CHANGE IN INFORMATION			e penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FE	C Form 1 (F	Revised 02/2009)	Page 2
TYPE (DF COMMIT	ITEE	
Candi	date Com	mittee:	
(a)	This	committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		committee is an authorized committee, and is NOT a principal campaign committee. (Comp nation below.)	plete the candidate
Name o Candida			
Candida Party A		Office Sought: House Senate President	State
(C)	This	committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida	1		
Party	Committe	;e:	
(d)	This		Democratic, Republican, etc.) Party.
Politic	al Action	Committee (PAC):	
(e)	This	committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	nected organization is a
		Corporation V/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		committee supports/opposes more than one Federal candidate, and is NOT a separate segnittee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
	X	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	undraisin	ng Representative:	
(g)		committee collects contributions, pays fundraising expenses and disburses net proceeds for tw nittees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		committee collects contributions, pays fundraising expenses and disburses net proceeds for two nittees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Committee	s Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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Write or Type Committee Name

Middle Ground PAC

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

Timothy V. Johnso	on 		
Mailing Address	413 Berringer Circle		
	Urbana		1802
	CITY	STATE	ZIP CODE
Relationship: Con	nected Organization	Joint Fundraising Representative	X Leadership PAC Sponsor
Custodian of Records	s: Identify by name, address (phone number	optional) and position of the person	1 in possession of committee

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

M	lark Shelden
Full Name	
Mailing Address	2908 S Myra Ridge Drive
3	
	Urbana IL 61802-7032
Title or Position	CITY STATE ZIP CODE
Treasurer	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	Mark Shelden
Mailing Address	2908 S Myra Ridge Drive
	Urbana
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent																		I										
Mailing Address																												
																					L							
								CI	ΓY								ST/	λΤΕ					ZI	ΡC	DE			
Title or Position																												
												Tel	eph	ione	e ni	umt	ber											

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.

Buse	y Bank		
Mailing Address	201 W Main Street		
	Urbana	IL 61801-2621	-
	CITY	STATE ZIP CO	DE
Name of Bank, Depositor	y, etc.		
Mailing Address			
			-
	CITY	STATE ZIP CO	DE