

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

FEC MAIL CENTER

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

12FE4M5

Friends of Daniel Marcin

ADDRESS (number and street)

1038 S MAIN ST APT F2

(Check if address is changed)

ANN ARBOR

MI

48104

3755

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

Campaign@No30thTerm.com

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.No30thTerm.com

(Check if address is changed)

2. DATE

01

30

2012

3. FEC IDENTIFICATION NUMBER

C

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

Christina DePasquale

Signature of Treasurer

Date

01

30

2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

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 02/2009)

12030740112

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 Daniel Marcin

Candidate Party Affiliation DEM Office Sought:  House  Senate  President State MI District 12

- (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 \_\_\_\_\_ (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:
  - 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	<u>C</u> _____
2.	_____	FEC ID number	<u>C</u> _____
3.	_____	FEC ID number	<u>C</u> _____
4.	_____	FEC ID number	<u>C</u> _____

12030740113



Full Name of Designated Agent

Daniel Marcin

Mailing Address

1038 S MAIN ST APT F2

ANN ARBOR

CITY

MI

STATE

48104

ZIP CODE

Title or Position

Candidate

Telephone number

443

834

3735

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.

TCF National Bank

Mailing Address

PO Box 537980

LIVONIA

CITY

MI

STATE

48153

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12030740115

**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.

12030740116

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<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

PREPARER *Chl P* 2/8/12  
DATE PREPARED  
 (3/2005)