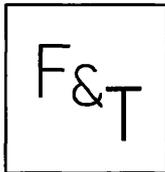


CHARLES A. FIEDLER (1) (2) (3)
ELIZABETH S. TENNEY (4)



FIEDLER & TENNEY, P.C.

(1) Certified Public Accountant
(2) Member of Michigan Bar
(3) Member of Washington State Bar
(4) Member of Illinois Bar

120 NORTH WASHINGTON SQUARE, SUITE 805
LANSING, MICHIGAN 48933
PHONE: 517.488.8281
FACSIMILE: 517.482.9006

201 WEST LAKE STREET, SUITE 95
CHICAGO, ILLINOIS 60606
PHONE: 312.607.7346
FACSIMILE: 312.821.9969

November 15, 2013

VIA USPS OVERNIGHT MAIL

Federal Election Commission
999 E. Street, N.W.
Washington, DC 20463

RE: Henry Ford Health System Political Action Committee
Statement of Organization, FEC Form 1

Dear Sir or Madam:

Enclosed for filing, please find one original Statement of Organization, FEC Form 1 for Henry Ford Health System Political Action Committee. .

Should you have any questions, please contact me directly at 517.488.8281.

Best regards,

A handwritten signature in cursive script that reads "Charles A. Fiedler".

Charles A. Fiedler

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51741155

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

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Office Use Only

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

Henry Ford Health System Political Action Committee

ADDRESS (number and street) Comerica Bank - PAC Services MC 2250 FBO: HFHS PAC

(Check if address is changed) 3551 Hamlin Road

Auburn Hills MI 48326 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 11 05 2013 00 2013

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

X

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 James M. Connelly

Signature of Treasurer

James M. Connelly

Date

11 14 2013

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 06/2012)

13031141156

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 _____

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 _____ (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 C

2. _____ FEC ID number C

3. _____ FEC ID number C

4. _____ FEC ID number C

13031141157

Write or Type Committee Name

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

Henry Ford Health System Government Affairs Services

Mailing Address One Ford Place
Detroit MI 48202
CITY STATE ZIP CODE

Relationship: X Connected Organization Affiliated Committee 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 Comerica Bank
Mailing Address P.O. Box 75000
c/o PAC Services
Detroit Detroit MI 48275-2250
CITY STATE ZIP CODE
Title or Position Record keeper
Telephone number 248-371-7268

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 James M. Connelly
Mailing Address c/o Comerica Bank - PAC Services, MC2250
FBO: HFHS PAC 3551 Hamlin Road
Auburn Hills MI 48326
CITY STATE ZIP CODE
Title or Position Treasurer
Telephone number 248-371-7268

13031141158

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for 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.

Comerica Bank - PAC Services MC 2250

Mailing Address

FBO: HEHS PAC

P.O. Box 75000 MC 2250

Detroit MI 48275 - 2250

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

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 FIEDLER & TENNEY, P.C.
 120 NORTH WASHINGTON SQ #805
 LANSING, MI 48933

TO:

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 WASHINGTON, DC 20463

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11/20/13
 PREPARER DATE PREPARED
 (8/2013)

1303114161