07/10/2003 12 : 19

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

DOMINO'S PIZZA LLC POLITICAL ACTION CMTE

ADDRESS (Number and street) 30 FRANK LLOYD WRIGHT DRIVE

(Check if address is changed)

ANN ARBOR | MI | 48106 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

SLMing@Comerica.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE M 07 D 01 Y 2003

3. **FEC IDENTIFICATION NUMBER** ▶ C00366088

4. IS THIS STATEMENT X 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 JEFFREY D. LAWRENCE

Signature of Treasurer Electronically Filed by JEFFREY D. LAWRENCE Date M 07 D 10 Y 2003

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 202-694-110

5. TYPE OF COMMITTEE (Check One)

(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

(d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican,etc.) Party.

(e) X This committee is a separate segregated fund

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

DOMINO'S PIZZA LLC

Mailing Address 30 FRANK LLOYD WRIGHT DRIVE

ANN ARBOR MI 48106

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship CONNECTED

Type of Connected Organization:

X Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

Write or Type Committee Name

DOMINO'S PIZZA LLC POLITICAL ACTION CMTE

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, C/O MARTHA DENBAAS

Mailing Address: P.O. BOX 75000

MC 2250

DETROIT MI 48275 - 2250

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

RECORDKEEPER

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: JEFFREY D. LAWRENCE

Mailing Address: 30 FRANK LLOYD WRIGHT DRIVE

ANN ARBOR MI 48106 -

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

TREASURER

Telephone number 734 - 930 - 3205

Full Name of Designated Agent: STEVEN J. GODA

Mailing Address: 30 FRANK LLOYD WRIGHT DRIVE

ANN ARBOR MI 48106 -

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

ASST. TREASURER

Telephone number 734 - 930 - 3583

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

Mailing Address

P.O. BOX 75000

MC 2250

DETROIT MI 48275 - 2250

CITY △ STATE △ ZIP CODE △