Image# 12951355326 PAGE 1 / 4

FEC FORM 1		STATE							Office	e Use O	nly		-	
NAME OF COMMITTEE (in	n full)	(Check if na is changed)		Example over the	e:If typing e lines.	, type	12F	E4M5						
Continuing	, A Ma	jority Party	Action	on Co	ommi	ttee (	CAM	1PA	C)					
ADDRESS (number a	nd street)	5915 Eastman Aver	nue											
(Check if acis changed)		Suite 100  Midland					<sub>I</sub> MI		48640	)-6824				_
				CITY			STATE			710		)E		_
COMMITTEE'S E-MA	UI ADDRES	S (Please provide on			ee)		OIAIL	•		Zii	001	<i>'</i> '_		
(Check if is change	address	jackie.medema@al												
COMMITTEE'S WEB	PAGE ADD	RESS (URL)												
(Check if is change														
2. DATE 04	M / D 1	2012												
3. FEC IDENTIFIC	CATION NU	MBER	C cod	0350462										
4. IS THIS STATE!	MENT	NEW (N)	OR	×	AMEND	ED (A)								
I certify that I have e	examined thi	s Statement and to t	he best o	of my kno	wledge an	d belief it	is true,	correct	t and c	omplet	e.			
Type or Print Name	of Treasurer	Jacqueline M. Med	ema											
Signature of Treasure	Jacqueli er	ne M. Medema		[E	lectronicall	y Filed]	Date	04	M /	06	1	Y Y 20	012	Y
NOTE: Submission of		ous, or incomplete info								enalties	of 2	U.S.C	. §437	g.

Office		For further information contact:	FEC FORM 1
Use		Federal Election Commission	
 Only		Toll Free 800-424-9530	(Revised 02/2009)

F	EC <b>Fo</b>	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • 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. (Compinformation below.)	plete the candidate
Name Candi			
Candi Party	date Affiliatio	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Party	y Con	nmittee:	
(d)			Democratic, Republican, etc.) Party.
Polit	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nected 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)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two	o or more political
(3)	ш	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 committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number C	
	3.	FEC ID number	
	1		

Title or Position Treasurer

FEC Form 1 (Revised	12/2009)	Page <b>3</b>
Write or Type Committee Nam	·	rage 3
3.	ajority Party Action Commi	ittee (CAMPAC)
	Organization, Affiliated Committee, Joint Fundraisi	,
David Lee Camp		
Mailing Address	5905 Wimbledon Court	
ý		
	Midland	MI 48642-7004
	CITY	STATE ZIP CODE
books and records.	tify by name, address (phone number optional) ar	nd position of the person in possession of committee
Full Name	.5915 Eastman Avenue	
Mailing Address	Suite 100	
	Midland	MI 48640-6824
Title or Position	CITY	STATE ZIP CODE
Treasurer	Telepho	one number 989 - 835 - 7721
8. <b>Treasurer:</b> List the name an any designated agent (e.g.,	d address (phone number optional) of the treasure assistant treasurer).	er of the committee; and the name and address of
Full Name Jacqueline of Treasurer	M. Medema	
Mailing Address	5915 Eastman Avenue	
	Suite 100	<u> </u>
	Midland	M     48640-6824

CITY

STATE

Telephone number

989

ZIP CODE

7721

835

	m 1 (Revised 02/2009)	Page 4
Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other safety deposit be Name of Bank,	r <b>Depositories</b> : List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.  Depository, etc.	olus accounts, Tents
safety deposit b Name of Bank,	oxes or maintains funds.  Depository, etc.  CHEMICAL BANK & TRUST	
safety deposit be	oxes or maintains funds.  Depository, etc.  CHEMICAL BANK & TRUST	July accounts, rents
safety deposit b Name of Bank,	Depository, etc.  CHEMICAL BANK & TRUST  333 E Main Street	0-6511
safety deposit b Name of Bank,	Depository, etc.  CHEMICAL BANK & TRUST  333 E Main Street	
safety deposit b Name of Bank,	Depository, etc.  CHEMICAL BANK & TRUST  333 E Main Street  Midland  MI 4864  CITY  STATE	0-6511
safety deposit be Name of Bank, Mailing Address	Depository, etc.  CHEMICAL BANK & TRUST  333 E Main Street  Midland  CITY  STATE  Depository, etc.	0-6511
safety deposit be Name of Bank, Mailing Address	Depository, etc.  CHEMICAL BANK & TRUST  333 E Main Street  Midland  MI 4864  CITY  STATE	0-6511
safety deposit be Name of Bank, Mailing Address	Depository, etc.  CHEMICAL BANK & TRUST  333 E Main Street  Midland  CITY  STATE  Depository, etc.	0-6511
safety deposit be Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  CHEMICAL BANK & TRUST  333 E Main Street  Midland  CITY  STATE  Depository, etc.	0-6511
safety deposit be Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  CHEMICAL BANK & TRUST  333 E Main Street  Midland  CITY  STATE  Depository, etc.	0-6511