FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instruction										
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		: If typying, typ	pe	12FF	4M5	1 1	ce use only	/		_
COMMITTEE (III	iuli)	is changed)	over the	iiies		1411	TIVIC					
Right to Life of	of Michigan Politi	cal Action Comm	ittee			1 1			ш			
						ш	ш		ш			Ш
ADDRESS (number and	street)	Box 901				11	ш	ш			ш	
(Check if add	ress						ш		ш		ш	Ш
is changed)	Gran	d Rapids				MI		Ш	4950	9	090	
COMMITTEE'S E-MA	JI ADDRESS		CITY▲			STATE	•		ZIP	CODE	•	
acct@rtl.org												. 1
COMMITTEE'S WEB	PAGE ADDRESS (U	RL)				1 1	! !	1 1				
1			. 1 1 1 '	1111	1 1	1 1		1 1	1 1 1	11	1 1	ı 1
						1 1	1 1					
COMMITTEE'S FAX	NUMBER											
با لبنا	سيا لي											
2. DATE 0.1	M / D D / Y	[°] 2007										
3. FEC IDENTIFICATION NUMBER C C00101212												
4. IS THIS STATE	MENT X NEV	/ (N) OR		AMENDED ((A)							
I certify that I have exam	ined this Statement and	to the best of my know	vledge and be	lief it is true, co	rrect and	comple	te					
Type or Print Name of	Treasurer	Mrs. Judith Lach	niet									
,												
Signature of Treasure	r Electronically File	d by Mrs. Juditl	ı Lachniet		_ [Date	0	1 /	^D 2 6	/ Y	ž 0	0 7
NOTE: Submission of fa		nplete information may							of 2 U.S.C). S437	g.	
Office				further inform							A	
Use Only			Fed Toll	eral Election C Free 800-424- al 202-694-110	ommissio				FEC (Revise	FORI ed 02/20		

	FECForm 1 (Revised 02/2003)	Page 2
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 candinformation below.)	didate
	Name of Candidate	
	Party Affiliation Sought: House Senate President	State District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
		ocratic, blican,etc.) Party.
	(e) This committee is a separate segregated fund	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund committee.	or party
6.	Name of Any Connected Organization or Affiliated Committee	
	Right to Life of Michigan	
L		
	Mailing Address 2340 Porter, SW	
	Grand Rapids MI 4950	9
	CITY▲ STATE▲ ZIF	P CODE A
	Relationship connected	
	Type of Connected Organization:	
	X Corporation Corporation w/o Capital Stock Labor Organization	
	Membership Organization Trade Association Cooperative	

	FEC Form 1	(Revised 02/	2003)			Pa	ge 3		
٧	rite or Type Comm	ittee Name							
	Right to Life of	of Michigan	Political Action Committee						
7.			ntify by name, address, (phone num pooks and records.	nber optional), and pos	ition of th	ne person in			
	Full Name								
	Mailing Address								
	Title or Position ▼	,	CITY A	STA	 ΓE ≜	ZIP COD	E 🛦		
				Telephone number					
3.	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	Mrs. Jud	dith Lachniet						
	Mailing Address		9690 Downes, NE						
			Lowell		 <u> </u> _	49331 _			
	Title or Position 🖣	•	CITY A	STA	ГЕ▲	ZIP COD	PE ▲		
		Board Mem	ber	Telephone number	616	532	2300		
	Full Name of Designated Agent	Mrs. Su	san Colligan						
	Mailing Address		2323 Sharon, SW						
			Wyoming		<u> </u>	49509			
	Title or Position	•	CITY A	STAT	ſE▲	ZIP COD	E A		
	ı	Finance Dir	rector	-	616	532	2300		

Telephone number

	FEC Form 1 (Revised 02	/2003)	Page 4			
 Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, re safety deposit boxes or maintains funds. 						
	Name of Bank, Depository, etc.					
	Fifth Th	nird Bank				
	Mailing Address	Madisonville OPS Center				
		Cincinnati OH 4526	3 _ [

STATE ∠

 $\textbf{ZIP CODE} \quad \triangle$

CITY 🗷

Membership Organization

FEC Form 1 (Revised	l 1/2001)		Page 5 / 6
Banks or Other Depositori safety deposit boxes or main	tains funds.		accounts, rents
Name of Bank, Depository, e	etc.		
Mailing Address			
	CITY △	STATE △	ZIP CODE 🛆
Name of Any Connected (Organization or Affiliated Committee	[-	ADDITIONAL]
Right to Life of Michig	an Political Action Committee		
Mailing Address	P O Box 901		
	Grand Rapids	MI L	49509 _ 0901
	CITY	STATE A	ZIP CODE
Relationship			
oiationionip			
Type of Connected Organiz	ation:		

Trade Association

Cooperative

Designated Agent		[ADDITIONAL]			
Full Name					
Title or Position ▼	CITY A				
		elephone number			