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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Libertarian Party of Michigan Executive Committee, Inc. P.O. Box 614 ADDRESS (number and street) (Check if address is changed) Royal Oak 48068 MΙ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS angelat0763@gmail.com (Check if address is changed) Optional Second E-Mail Address swmi4liberty@be-innovative.net COMMITTEE'S WEB PAGE ADDRESS (URL) www.michiganlp.net (Check if address is changed) DATE 2023 C00403907 FEC IDENTIFICATION NUMBER 3. X 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. Thornton, Angela, , , Type or Print Name of Treasurer Thornton, Angela, , , [Electronically Filed] Date 03 19 2023 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use

Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

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. 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 information below.)	a principal campaign committee. (Complete the candidate				
Name of Candidate					
Candidate Office Party Affiliation Sought: House	Senate President District				
(c) This committee supports/opposes only one candidate, ar	d is NOT an authorized committee.				
Name of Candidate					
Party Committee:					
(d) This committee is a STA (National, State or subordinate) col	(Democratic, Republican, etc.) Party				
or substantally son	Tiopublicati, ctc.) Farty				
Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify of	connected organization on line 6.) Its connected organization is a:				
Corporation Corporat	on w/o Capital Stock Labor Organization				
Membership Organization Trade As	E E				
In addition, this committee is a Lobbyist/Regist					
	I candidate, and is NOT a separate segregated 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.)	
(g) This committee is an independent expenditure-only politic					
In addition, this committee is a Lobbyist/Registrant PAC.					
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC). In addition, this committee is a Lobbyist/Registrant PAC.					
Joint Fundraising Representative:	venness and dishuress not proceeds for two or more political				
(i) Committee collects contributions, pays furidraising e. committees/organizations, at least one of which is an au	kpenses and disburses net proceeds for two or more political thorized committee of a federal candidate.				
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.

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V	Vrite or Type Committee Nam			
		rty of Michigan Executive Com	·	
6.	Name of Any Connected (NONE	Organization, Affiliated Committee, Joint Fundraising R	Representative, or L	eadership PAC Sponsor
	Mailing Address			
		CITY A	STATE ▲	ZIP CODE ▲
	Relationship: Connected	d Organization Affiliated Organization Joint Fundra	aising Representative	Leadership PAC Spons
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession books and records. 				
	Thornton,	Angela, , ,		
	Full Name			
	Mailing Address	15223 Ripple Dr.		
		1		
		Linden	MI 4	18451
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼	5117 =	01/112 =	211 0002 -
	Treasurer	Telephone	number 810	_ 458 4698
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 Thornton, of Treasurer	, Angela, , ,		
	oi ileasulei	.45222 Bipple Dr		
	Mailing Address	15223 Ripple Dr.		
		Linden	J MI L⁴	48451
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephone	number 810	458 4698

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Full Name of Designated Agent	Brandenburg, Jason, F, ,						
Mailing Address	2763 Chestnut Ridge Ave.						
	Portage	MI	49024				
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲				
		Telephone number 586	491 8853				
	Depositories: List all banks or other depositories in whites or maintains funds.	ch the committee deposits fun	ds, holds accounts, rents				
Name of Bank, D	Name of Bank, Depository, etc.						
Comerica Bank							
Mailing Address	411 W Lafayette Blvd						
	Detroit	MI MI	48226				
	CITY ▲	STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY ▲	STATE ▲	ZIP CODE ▲				

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This amendment is to correct the spelling of the Treasurer and correct the bank address.

Form/Schedule: Transaction ID: