FEC FORM 1		ATEMEN RGANIZA			2013 FE	RECEIVE OCT 17 AM C MALIUS OFFICE	7:45
		heck if name	Example over the	If typing, type lines.		<u> </u>	
MVP Fund	,2014		<u>1. 1. 1</u>				
ADDRESS (number a	nd street)	ox 226					<b>_</b>
(Check if an is changed)	idress	nfield Hills	<u> </u>		<u>MI</u>	48303	- <u> </u> ]
		CI	TY		STATE	ZIP CC	DE
COMMITTEE'S E-MA	IL ADDRESS (Please p	-					
(Check if is change			npilan	<u>cę.com                                     </u>			
COMMITTEE'S WEB	PAGE ADDRESS (UR	È)					
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2. DATE	) ( 2 ( 20	13					
3. FEC IDENTIFIC	CATION NUMBER	C 00	5488	75			,
4. IS THIS STATE		N) OR	$\boxtimes$	AMENDED (A)			<b>1</b>
I certify that I have	examined this Statemer	nt and to the best o	of my knov	ledge and belief it	t is true, corre	ect and complete.	
Type or Print Name	of Treasurer	ven Mele	0	<u></u>			· · · · · · · · · · · · · · · · · · ·
Signature of Treasur	er ()	hh	X		Date	0°) ′ 01°) ′	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			Fed Toll	further information of eral Election Commiss Free 800-424-9530 al 202-694-1100		FEC FO (Revised 0)	£

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## 5. TYPE OF COMMITTEE Candidate Committe

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Cendidat	e 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 Affilia	tion Office Sought: House Senate President District				
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Co	mmittee:				
(d)	This committee is a (National, State or subordinate) committee of the Committee of the 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)	(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 Fur	draising 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.					
Co	mmittees Participating in Joint Fundraiser				
	Botors for Michigan Links Links I have been a local 27000				

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1.	Peters for Michigan             FEC ID number C 00437889
2.	Michigan Democratic State Central Committee FEC ID number C 00031054
3.	
4.	

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Write or Type Committee Name

## MVP Fund 2014

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6. Mailing Address CITY STATE **ZIP CODE** Relationship: 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.

	η <b>Μ</b> ęlę		
Mailing Address	600 Pennsylvania Ave, SE		
-	Suite 210		
	Washington	DC	20003
Title or Position	CITY	STATE	ZIP CODE
	Telephone n	umber [202	24658308

Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of 8. any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Steven Mele		
Mailing Address	600 Pennsylvania Ave, SE		
	Suite 210		
	Washington	DC 20003	
	CITY	STATE ZIP CODE	
Title or Position	Telephone n	umber [202] - [465] - [83	302 <u> </u>

FEC Form	1 (	(Revised	02/2009)
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Designated Ch Agent	aim I. Safran
Mailing Address	[PO_Box_226]
	Bloomfield Hills
	CITY STATE ZIP CODE
Title or Position	
	sitories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents

Page 4

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	Sank, IIIIIIIIIIIIIIIIIIIIIII	
Mailing Address	617 Capitol Ave	
	[Lansing	M    48933    -
	CITY	STATE ZIP CODE
Name of Bank, Depositor	y, etc.	
	<u></u>	
Mailing Address		
	CITY	STATE ZIP CODE

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Received from Electronic Filing Office	Date of Receipt			
Date of Other (Specify):	Receipt or Postmarked			
JB	10/18/293			
(8/2013)	DATE PREPARED			