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FEC STATEMENT OF ORGANIZATION

FORM 1	ONGANIZATION				Office Hea Only		
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)		nple:If typing, type the lines.	12FE4M5	Office Use Only	
Branch Co	untry l	Republican (Commit	tee	1 1 1 1 1		1111
					1 1 1 1		
ADDRESS (number a	and street)	PO Box 12	7				
(Check if address is changed)		Coldwater			MI	49036	
			CITY		STATE	ZIP CO	DE
COMMITTEE'S E-MA (Check if is change	address	S (Please provide only o		<u>.</u>			
COMMITTEE'S WEB	PAGE ADD	RESS (URL)					
(Check if is changed							
2. DATE 03	3 ′ 14	°′ 2011 ′					
3. FEC IDENTIFIC	CATION NU	MBER C	00000	992			
4. IS THIS STATE	MENT	NEW (N) O	R 🔀	AMENDED (A)			
-		s Statement and to the Michael P.	_	•	is true, correct	and complete.	
Type or Print Name	of Treasurer	^	2	n			
Signature of Treasure	er	Michael	P. Gra	resals.	Date 03	' 14° ′	2011
NOTE: Submission of		ous, or incomplete inform					U.S.C. §437g.
Office Use Only				For further Information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FOI (Revised 02	•

FEC Form 1 (R	Revised 02/2009)	Page 2					
. TYPE OF COMMIT							
	committee is a principal campaign committee. (Complete the candidate information below.)						
· · · · · · · · · · · · · · · · · · ·	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 c	committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate		<u> </u>					
Party Committee		loma cratic					
(d) X This o	CIID ' ' DED '	democratic, epublican, etc.) Party.					
Political Action	Committee (PAC):						
(e) This o	committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected organization is a:					
	Corporation w/o Capital Stock	Labor Organization					
	Membership Organization Trade Association	Cooperutive					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	committee supports/opposes more than one Federal candidate, and is NOT a separate segnittee. (i.e., nonconnected committee)	egated fund or party					
П	In addition, this committee is a Lobbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fundraisin	g Representative:						
	committee collects contributions, pays fundraising expenses and disburses net proceeds for two nittees/organizations, at least orw of which is an authorized committee of a foderal candidate.	or more political					
	committee collects contributions, pays fundraising expenses and disburses net proceeds for two ittees/organizations, none of which is an authorized committee of a federal candidate.	or more political					
Committees	s Participating in Joint Fundraiser	٠					
1.	FEC ID number C						
2.	FEC ID number C	:					
3.	FEC ID number C						
4 1 1		:					

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FEC Form	1 (Revised 02/2009)	Page 3
Write or Type Corr	nmittee Name	
Branch Co	ountry Republican Committee	
6. Name of Any	Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
	111111111111	
Mailing Address		
-		
		. -
	CITY STATE ZII	P CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leade	ership PAC Sponsor
7. Custodian of R books and reco	lecords: Identify by name, address (phone number - optional) and position of the person in posses rds.	ssion of committee
C. II Nama	¡Michael P. Fronczak	
Full Name	₁ 564 Şchaeffer Dr.	
Mailing Address		
	Coldwater	
	Conwater 1 141 1-5000	
Title or Position	CITY STATE ZIF	PCODE
Treasure	r Telephone riumber [517] – [817	[6317
	the name and address (phone number optional) of the treasurer of the committee; and the name agent (e.g., assistant treasurer).	and address of
Full Name of Treasurer	Michael P. Fronczak	
Mailing Address	564 Schaeffer Dr	
	Coldwater 149036	
	CITY STATE ZIF	CODE
Title or Position Treasurer	Telephone number [517] - [817	[6317

Southern Michigan Bank and Trust

CITY

1PO Box 309

Coldwater

FEC Form 1 (Revised 02/2009)

Donald Shemel

Full Name of Designated

Mailing Address

Agent

ZIP CODE

ZIP CODE

ZIP CODE

10309

iMI i

STATE

49036

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMIN The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Conf	firmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	•
Overnight Delivery Service (Specify):	Shipping Date
Next Busine	ess Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
ans	3/21/11
(3/2005)	DATE PREPARED