Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Owens Corning Better Government Fund One Owens Corning Parkway ADDRESS (number and street) 2G (Check if address is changed) Toledo 43659 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kaduncan@comerica.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 02 2018 C00200089 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. Fortunak, Matthew, , , Type or Print Name of Treasurer Fortunak, Matthew, , , [Electronically Filed] 03 02 2018 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	n below.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee information below.)	e. (Complete the candidate
Name of Candidate	<u></u>
Candidate Office Party Affiliation Sought: House Senate Pres	Statesident
(c) This committee supports/opposes only one candidate, and is NOT an authorized comm	nittee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6	S.) 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) This committee supports/opposes more than one Federal candidate, and is NOT a sep committee. (i.e., nonconnected committee)	parate 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.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceed	
committees/organizations, at least one of which is an authorized committee of a federal ca (h) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.	eds for two or more political
Committees Participating in Joint Fundraiser	
1.	
2.	
3.	
4.	

FEC Form 1 (Revised 0	2/2009)		Page 3
Write or Type Committee Name			
Owens Corning	Better Government	Fund	
	rganization, Affiliated Committee, Jo		ive, or Leadership PAC Sponsor
Owens Corning			
	One Owens Corning Parkway 2G		
Mailing Address			
	Toledo	OH	43659
	CITY	STATE	ZIP CODE
Relationship: X Connected	Organization Affiliated Committee	Joint Fundraising Represe	entative Leadership PAC Sponsor
 Custodian of Records: Identification books and records. 	tify by name, address (phone number	optional) and position of the	e person in possession of committee
Ming - Com	nerica Bank, Stephanie, , ,		
	MC 2250		
Mailing Address	PO Box 75000		
	Detroit	MI	48275
Title or Position	CITY	STATE	ZIP CODE
Record Keeper		Telephone number	248
Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) o ssistant treasurer).	f the treasurer of the committ	tee; and the name and address of
Full Name Fortunak, Nortunak, Nortunak, Nortunak	1atthew, , ,		
Mailing Address	One Owens Corning Parkway 2G		
	Toledo	OH	43659
Title or Position Treasurer	CITY	STATE	ZIP CODE 419 248 7380
		Telephone number	

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Full Name of Designated Agent Harter, A	Ava, , ,		
Mailing Address	One Owens Corning Parkway 2G		
	Toledo	OH 4 STATE	ZIP CODE
Title or Position Chairman		Telephone number 419	_ 248 6350
safety deposit boxes or management of Bank, Depository	P.O. Box 75000 MC 2250 Detroit	MI 4	8275-2250
Name of Book Booksitson	CITY	STATE	ZIP CODE
Name of Bank, Depository	, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

: 97 'A = G7 9 @ G B9 CI 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:

Amending to Update the following: 1. Lobbyist/Registrant PAC 2. Connected Organization Name 3. Update Custodian of Records

Form/Schedule: **Transaction ID:**

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

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h). Joint Fundraisi	ig Participant:			
1.		FEC	ID number	C
2.		FEC	ID number	С
3.		FEC	ID number	С
4		FEC	ID number	C
ame of Any Connected	Organization, Affiliated Committe	e, Joint Fundraising I	Representativ	re, or Leadership PAC Spon
Mailing Address				
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	d Organization Affiliated Commit		sing Represen	tative Leadership PAC S
esignated Agent: Identif DeFilipp Full Name	_		sing Represen	tative Leadership PAC S
esignated Agent: Identif	y by name, address (phone numbers, Victor, , ,		sing Represen	tative Leadership PAC S
esignated Agent: Identif DeFilipp Full Name	y by name, address (phone numbers, Victor, , ,			43659
esignated Agent: Identif DeFilipp Full Name	y by name, address (phone number s, Victor, , , One Owens Corning Parkway Toledo		OH	43659
esignated Agent: Identif DeFilipp Full Name	y by name, address (phone number s, Victor, , , One Owens Corning Parkway Toledo	- optional)	OH STATE A	43659
esignated Agent: Identification DeFilipp Full Name Mailing Address TITLE OR POSITION Assistant Treasurer anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (phone number s, Victor, , , One Owens Corning Parkway Toledo CITY ries: List all banks or other deposit	- optional) Telephone	OH STATE A	43659 ZIP CODE A
esignated Agent: Identif DeFilipp Full Name Mailing Address TITLE OR POSITION Assistant Treasurer anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (phone number s, Victor, , , One Owens Corning Parkway Toledo CITY ries: List all banks or other deposit	- optional) Telephone	OH STATE A	43659 ZIP CODE A
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