FEC MAIL CENTER

FEC FORM 1

11030642528

STATEMENT OF ORGANIZATION

2011 AUG - 1 AM 8: 5

TOMW 1				Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4N	15
WESTERN A	LASINTENAW DO	MOCRATS, FÉ	EDIERIA	4 ACCOUNT
ADDRESS (number and stre	et) 17381 N	(, -, 5, 2, , , , , , ,		
(Check if address is changed)	C.H.E.L.S.E.A		MT	148 ₁₁₁₈ 1-
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL AD	DRESS (Please provide only one	e-mail address)		
(Check if addre	ss Kentibrown	J2114 RGMAIL	. 1 C101 M	
is changed)				
COMMITTEE'S WEB PAGE	E ADDRESS (URL)		٠.	
(Check if addres	WWV. WWOE1	450,26	 <u>I 1 1 </u>	
is changed)			<u> </u>	
2. DATE 0 7	26 2011			
3. FEC IDENTIFICATIO	N NUMBER C O	0461491		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examin	ned this Statement and to the bes	t of my knowledge and belief	it is true, corr	ect and complete.
Type or Print Name of Trea	asurer R. KENT	BROWN		
Signature of Treasurer	Regent Bro	wr	Date 0	7 26 2011
NOTE: Submission of false, o	•	may subject the person signing		to the penalties of 2 U.S.C. §437g.
Office Use		For further information Federal Election Commiss		FEC FORM 1

	COMMITTEE e Committee:				
(a)	This committee is a principal ca	mpaign committee. (Com	plete the candidate inf	ormation below	<i>i</i> .)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name of Candidate	<u> </u>				لبيبيي
Candidate Party Affilia	Office Soug		Senate	President	State District
(c)	This committee supports/oppose	s only one candidate, an	d is NOT an authorize	ed committee.	
Name of Candidate					
Party Co	mmittee:				
(d) X	This committee is a S U	(National, State or subordinate)	committee of the	DEM	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):				
(e)	This committee is a separate se	gregated fund. (Identify o	onnected organization	on line 6.) Its co	onnected organization is a:
	Corporation	Corpo	ration w/o Capital Stoo	*	Labor Organization
	Membership Organization	on Trade	Association		Cooperative
	In addition, this c	ommittee is a Lobbyist/Re	gistrant PAC.		
(f)	This committee supports/oppose committee. (i.e., nonconnected of		I candidate, and is NC	OT a separate :	segregated fund or party
	In addition, this committee	e is a Lobbyist/Registrant	PAC.		
	In addition, this committe	a is a Leadership PAC. (Id	entify sponsor on line (3.)	
Joint Fun	draising Representative:				
(g)	This committee collects contribute committees/organizations, at least				
(h)	committees/organizations, at least one of which is an authorized committee of a forteral 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.				
	•		Jimmilee of a legeral c	andidate.	
Cor	nmittees Participating in Joint F	undraiser		_	
1.			FEC ID nun	uper C	
2.			FEC ID nun	nber C	
3.			FEC ID nun	nber C	
4.			FEC ID num	nber C	

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_	FEC Form 1 (Revised	02/2009)			Page 3
٧	Vrite or Type Committee Nam	е	_	•	
	WESTERN 1	NASHTENAW DEMOCR	ATS FÉDE	RAL AC	COUNT
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Represent	ative, or Leaders	hip PAC Sponsor
<u>I</u>	1 KHI GAN DI	EMOICHATING ISTATE	ICI GUITIRAI	U COMA	บพบสุสุ
L	JED HACTOMY	<u> </u>		1111	
	Mailing Address	606 MOWNSIEND I			
		LIAINSI I WGI	STA		33-[] ZIP CODE
	Relationship: Connecte	d Organization Affiliated Committee Joi	nt Fundraising Repre	sentative Lea	adership PAC Sponsor
7.	Custodian of Records: Ide books and records.	ntify by name, address (phone number - option	nal) and position of	the person in pos	session of committee
	Full Name	ENT BROWN			
	Mailing Address	4.7.381 N.M-52			
			<u> </u>		
		CHELSEA	LLL M	11 1481	18
	Title or Position	CITY	STATI	E	ZIP CODE
	TREASURER	· 	elephone number	17341-14	75-5873
8.	Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the transistant treasurer).	easurer of the comm	nittee; and the na	me and address of
	Full Name of Treasurer	ENT BROWN			
	Mailing Address	413811 N.M-52			
		CHELSEA CITY	M. STATE		ZIP CODE
	Title or Position		alanhona number	17.3.41-14	115-158731

Name of Bank, Depository, etc.

CITY

MI

STATE

ZIP CODE

Federal Election Co ENVELOPE REPLACEMENT PAGE FO The FEC added this page to the end of this for	OR INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked 7/27/11
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or S	ignature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registration	Date of Receipt on Office
Received from Senate Public Records Office	Date of Receipt ce
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
PREPARER (3/2005)	8/1/11 DATE PREPARED