Only

PAGE 1 / 4

STATEMENT OF **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. LIVONIA DEMOCRATIC CLUB 14219 Woodside St. ADDRESS (number and street) (Check if address is changed) LIVONIA 48154 MI CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS ekeith3355@gmail.com (Check if address is changed) Optional Second E-Mail Address clee4654@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.livoniademocraticclub.com/ (Check if address is changed) DATE 08 2023 C00568154 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. Keith, Emily, , , Type or Print Name of Treasurer Keith, Emily, , , [Electronically Filed] Date 07 09 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 (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2		
. TYPE OF COMMITTEE:			
Candidate Committee:			
(a) This committee is a principal campaign committee. (Complete the	ne candidate information below.)		
(b) This committee is an authorized committee, and is NOT a princinformation below.)	ipal 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, and is No	OT an authorized committee.		
Name of Candidate			
Party Committee:			
(d) This committee is a SUB (National, State or subordinate) committee	DEM (Democratic, Republican, etc.) Party		
or substantato, committee	Tropusinouri, etc., Furty		
Political Action Committee (PAC):			
(e) This committee is a separate segregated fund. (Identify connect	ed organization on line 6.) Its connected organization is a:		
Corporation Corporation w/o	Capital Stock Labor Organization		
Membership Organization Trade Associatio	=		
In addition, this committee is a Lobbyist/Registrant PA			
(f) This committee supports/opposes more than one Federal candid committee. (i.e., nonconnected committee)			
In addition, this committee is a Lobbyist/Registrant PA	ıC.		
In addition, this committee is a Leadership PAC. (Iden			
_			
(g) This committee is an independent expenditure-only political committee (Super PAC).			
In addition, this committee is a Lobbyist/Hegistrant PA	In addition, this committee is a Lobbyist/Registrant PAC.		
(h) This committee is a political committee with both contribution ar	nd non-contribution accounts (Hybrid PAC).		
In addition, this committee is a Lobbyist/Registrant PA	.C.		
Joint Fundraising Representative:			
(i) This committee collects contributions, pays fundraising expenses committees/organizations, at least one of which is an authorized	·		
(j) This committee collects contributions, pays fundraising expenses committees/organizations, none of which is an authorized committee.	·		
Committees Participating in Joint Fundraiser			
1. [, , , , , , , , , , , , , , , , , ,	C		

		1 (Revised 02/2009)	Page 3
W	rite or Type Comn		
	LIVONIA	A DEMOCRATIC CLUB	
6.		onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
	NONE		
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponsor
7.	Custodian of Red books and record	cords: Identify by name, address (phone number optional) and position of the person in possess ds.	ion of committee
		Keith, Emily, , ,	
	Full Name		
	Mailing Address	14219 Woodside St.	
		Livonia MI 48154	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position	▼	
	Treasurer	Telephone number 734	748 9973
3.		he name and address (phone number optional) of the treasurer of the committee; and the nagent (e.g., assistant treasurer).	ame and address of
	Full Name	Keith, Emily, , ,	
	of Treasurer		
	Mailing Address	14219 Woodside St.	
		Livonia MI 48154	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position		
	Treasurer	Telephone number 734 - L	748 9973

Full Name of Designated Agent Mailing Address	Page 4			
Designated Agent Mailing Address				
CITY A STATE A ZID				
CITY A STATE A ZIB				
CITY A STATE A ZID (-			
OHT A SIAIE A ZIF	CODE A			
Title or Position ▼				
. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds according safety deposit boxes or maintains funds.	ounts, rents			
Name of Bank, Depository, etc.				
Community Choice Credit Union				
Mailing Address 15420 Farmington Rd.				
Livonia MI 48154				
CITY ▲ STATE ▲ ZIP C	CODE A			
Name of Bank, Depository, etc.				
Mailing Address				
CITY ▲ STATE ▲ ZIP (CODE A			