

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

QUICKEN LOANS INC PAC

ADDRESS (number and street)

Midwest Strategy Group of Michigan

101 S. Washington Square Ste 620

(Check if address is changed)

LANSING

MI

48933

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

kordenbrock@midweststrategy.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

5178530556

2. DATE

04 / 10 / 2006

3. FEC IDENTIFICATION NUMBER

C C00388827

4. 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

Type or Print Name of Treasurer

David Carroll

Signature of Treasurer

Electronically Filed by David Carroll

Date

04 / 10 / 2006

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Quicken Loans Inc. _____

Mailing Address **20555 Victor Parkway** _____

Livonia **MI** **48152** - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship **Corporation** _____

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or Type Committee Name

QUICKEN LOANS INC PAC

- 7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Jean E. Kordenbrock**

Mailing Address **Midwest Strategy Group of Michigan**
101 S. Washington Sq., Suite 620
Lansing MI 48933

Title or Position ▼ **Assistant Treasurer** CITY ▲ STATE ▲ ZIP CODE ▲
517 853 0537
 Telephone number

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

Full Name of Treasurer **David Carroll**

Mailing Address **20555 Victor Parkway**
Livonia MI 48152

Title or Position ▼ **Treasurer** CITY ▲ STATE ▲ ZIP CODE ▲
517 853 0537
 Telephone number

Full Name of Designated Agent **Jean E. Kordenbrock**

Mailing Address **Midwest Strategy Group of Michigan**
101 S. Washington Sq., Suite 620
Lansing MI 48933

Title or Position ▼ **Assistant Treasurer** CITY ▲ STATE ▲ ZIP CODE ▲
517 853 0537
 Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

LaSalle Bank

Mailing Address

2699 W. Big Beaver Rd.

Troy

MI

48084

CITY ▲

STATE ▲

ZIP CODE ▲