

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
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2009 MAR -4 A 11:17

Office Use Only

1. NAME OF COMMITTEE (in full)



(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

17th Congressional District Democratic Party
Committee

ADDRESS (number and street)



(Check if address is changed)

5485 E. PACKARD HWY.

CHARLOTTE MI 48813

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

Zachary.dillingerg@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

03 02 2009

3. FEC IDENTIFICATION NUMBER

000348003

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

ZACHARY J. DILLINGER

Signature of Treasurer

Zachary J. Dillinger

Date

03 02 2009

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 Use Only

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

FEC FORM 1
(Revised 12/2007)

29030043627

5. TYPE OF COMMITTEE

Candidate Committee:

- (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 _____

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.) Its connected organization is a:
 - Corporation
 - Corporation w/o Capital Stock
 - Labor Organization
 - Membership Organization
 - Trade Association
 - Cooperative
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - 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 proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal 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.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	C
2.	_____	FEC ID number	C
3.	_____	FEC ID number	C
4.	_____	FEC ID number	C
5.	_____	FEC ID number	C

29030043628

Write or Type Committee Name

7th Congressional District Democratic Party Committee

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

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

ZACHARY DILLINGER

Mailing Address

5485 E. PACKARD HWY.

CHARLOTTE

MI

48813

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

517-231-3374

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

ZACHARY DILLINGER

Mailing Address

5485 E. PACKARD HWY.

CHARLOTTE

MI

48813

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

517-231-3374

29030043629

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for 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.

Comerica Bank

Mailing Address

149 MICHIGAN AVE W

[Empty grid for Mailing Address line 2]

BATTLE CREEK MI 49017

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

29030043630

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jms
PREPARER
(3/2005)

3/4/09
DATE PREPARED

25030043531