FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instruction		N									
1. NAME OF		·		nla. If tomorio		누	_	_	Office	use only	′		
NAME OF COMMITTEE (ir	full)	(Check if name is changed)	over t	ple: If typyin he lines	ıg, type	12	2FE4	M5					
I MIDLAND CO	ŲŅTY REPUBLICA	AN COMMITTEE											. 1
													Щ,
	- PO	BOX100								Ш			
ADDRESS (number and	street)		ш							Ш		Ш	ш.
(Check if add			ш				11			Ш		Ш	Ш
is changed)	MIDI	AND	ш		ш		ΜI		Ш	4864	0 [ш	
			CITY			STA	ATE.			ZIP	CODE	•	
COMMITTEE'S E-MA													1
1													
	DAGE ADDRESS (U	DL)										Ш	
www.midland	PAGE ADDRESS (U daop.ora	HL)											1
	<u> </u>		Ш				ш			Ш		—	Щ.
							11			Ш			
COMMITTEE'S FAX	NUMBER 												
با لبنا													
2. DATE M_M / D_D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y													
3. FEC IDENTIFICATION NUMBER C C00109116													
4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)													
		-			()								
I certify that I have exan	nined this Statement and	to the best of my know	wledge and	belief it is tru	ue, correct	and cor	nplete						
		ria I Friadraan											
Type or Print Name of	Treasurer	ric J. Friedman											
Signature of Treasure	r Electronically File	d by Eric J. Frie	edman			Date		0 1	/	D 08	/ Y	ž (°0 9
NOTE: Submission of fa	alse, erroneous, or incon	nplete information may								2 U.S.C	S437	g.	
Office				For further i			ct:		F	ECI	FOR	—— М 1	_
Use Only				Federal Elect Foll Free 800 ocal 202-69	-424-9530					(Revise			

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5.			OMMITTEE (Check One) 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 information below.)	e candidate							
	Name Candi										
	Candi Party	idate Affiliatio	Office Sought: House Senate President	State District							
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.								
	Name Candi										
	Party	Comm									
	(d)	X		(Democratic, Republican,etc.) Party.							
	Politi	cal Act	ion 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 Lab	or Organization							
			Membership Organization Trade Association Cod	pperative							
	(f)	fund or party									
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)								
	Joint	Fundra	ising Representative:								
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political							
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political							
		Comi	mittees Participating in Joint Fundraiser								
			1 FEC ID number C								
			2 FEC ID number C								
			3. FEC ID number								
			4. FEC ID number C								
			FEC ID number C								

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W	rite or Type Committee Name								
	MIDLAND COUNTY REP	UBLICAN COMMITTEE							
6.	Name of Any Connected Orc	panization, Affiliated Committee, Leader	ship PAC Sponsor or Joi	nt Fundra	ising Representative				
	NONE								
1		<u> </u>	<u> </u>						
	Mailing Address		1 1 1 1 1 1 1 1 1	1 1 1					
	· ·			1 1 1					
		CITY	STA	 .TE. ≜	ZIP CODE 🛦				
	Relationship:	CITTA	SIA	IIE 🚜	ZIP CODE				
	Connected Organization	Affiliated Committee	Leadership PAC Sponsor	Jo	int Fundraising Representative				
7.	Custodian of Records: Ide possession of Committee	ntify by name, address, (phone num books and records.	ber optional), and po	sition of	the person in				
	Full Name Eric J.	Friedman 							
Mailing Address		1219 Holyrood St.							
		Midland		<u> 11 </u>	48640				
	Title or Position ♥	CITY A	STA	ATE&	ZIP CODE A				
	Treasurer		Telephone number	989	<u>832</u> - <u>2633</u>				
8.	name and address of any	and address (phone number optio designated agent (e.g., assistant tre		he comn	nittee; and the				
	of Treasurer Eric J.	Friedman							
	Mailing Address	1219 Holyrood St.							
		Midland		ЛІ _	48640				
	Title or Position ♥	CITY A	STA	ATE.	ZIP CODE A				
	Treasurer		Telephone number	989	832 2633				

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Full Name of Designated Agent			
Mailing Address	-		
Title or Position ▼	CITY A	STATE A	ZIP CODE A
	Telep	hone number	
9. Banks or Other Deposito safety deposit boxes or ma	ories: List all banks or other depositories in which the calintains funds.	ommittee deposits funds, ho	ds accounts, rents
Name of Bank, Depository	, etc.		
Che	emical Bank & Trust		
Mailing Address	PO Box 529		
	Midland	MI	48640 _
	CITY 🗖	STATE △	ZIP CODE 🛕
Name of Bank, Depository	, etc.		
Mailing Address			
	CITY 🙇	STATE △	

Image# 29990026666	
Form/Schedule: F1A Transaction ID:	This filing is an amendment to the 'Statement of Organization,' disclosing the change in treasurer and custodi an of records. Actual change occured 4/1/08.
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