2012 NOV 15 AM II: 31 FEC MAIL CENTER

Committee Name:

MICHIGAN REPUBLICAN CLUB

If registered, FEC ID:

Today's Date:

11/10/2012

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization-Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

PETERSON TRUMP

, Treasurer

12030961669

FEC FORM

STATEMENT OF ORGANIZATION

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2012 NOV 15 AM 11: 31

FORM 1	UNGANIZA	AIICH		Coletto
TONINT				FEIC MALL CENTER
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4	45
MICHIGAN RE	PUBLICAN CLU	B	_1 1 1	
ADDRESS (number and street)	P. O. BOX 66	7313		
(Check if address is changed)	POMPANO BI	EACH	FL	33066
	ı	CITY	STATE	ZIP CODE
	RESS (Please provide only one e- UnitedStatesF	-mail address) RepublicanClubs	@gm	ail.com
(Check if address is changed)				
COMMITTEE'S WEB PAGE	ADDRESS (URL)			
(Check if address is changed)				
2. DATE 11 1 ' '	10° ′ 20′12			
3. FEC IDENTIFICATION	NUMBER C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined Type or Print Name of Treas	this Statement and to the best urer	-	is true, con	rect and complete.
Signature of Treasurer	Leterson True	p	Date 1	1 10 2012
NOTE: Submission of false, en		may subject the person signing the		t to the penalties of 2 U.S.C. §437g. YS.
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

	FEC I	orm 1 (Revised 02/2009)	Page 2
• •		COMMITTEE	
		te Committee:	
(a) <u> </u>	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b	» <u>L</u>	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
	ame of andidate		
_	andidate arty Affili	Office Sought: House Senate President	State
	_		District
(c) [This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ame of andidate		
P	arty Co	mmittee:	
(d) [(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
P	olitical	Action Committee (PAC):	·- · · · · · ·
(ө	<i>,</i>	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	Cooporative
18	\ E		annested fixed or next.
(f) <u>×</u>	This committee supports/opposes more than one Federal candidate, and is NOT a separate so committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Jo	oint Fu	draising Representative:	···-
(g)	_	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the	wo or more political
	<u>ا</u> ــا	committees/organizations, at least one of which is an authorized committee of a foderal candidate.	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more рониса
	Co	mmittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number C	
	3.	FEC ID number C	
	4.		
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FEC Form 1 (Revi	ised 02/2009)	Page 3
Write or Type Committee I		
	EPUBLICAN CLUB	
6. Name of Any Connect	ted Organization, Affiliated Committee, Joint Fundraising Representative, or I	Leadership PAC Sponsor
NONE		
Mailing Address		
		
	CITY STATE	ZIP CODE
Relationship: Conn	nected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
 Custodian of Records: books and records. 	: Identify by name, address (phone number optional) and position of the perso	n in possession of committee
Full Name PE	TERSON TRUMP	
Mailing Address	P. O. BOX 667313	
	POMPANO BEACH FL	33066
Title or Position	CITY STATE	ZIP CODE
FINANCE DIR	RECTOR Telephone number 954	[268,
	ne and address (phone number optional) of the treasurer of the committee; and e.g., assistant treasurer).	d the name and address of
Full Name PE	TERSON TRUMP	
Mailing Address	P. O. BOX 667313	
•		
	POMPANO BEACH	33066 -
Title or Position	CITY STATE	ZIP CODE
TREASURER	Telephone number 954	_ 268, _ 8672

EEC Form 1 /D	Revised 02/2009)		Page 4
PEC FORM 1 (R	levised 02/2009)		rage •
Full Name of Designated Agent			
Mailing Address		411111	
		1 1 1 1 1 1	
	CITY	STATE	ZIP CODE
Title or Position	1	1	. - -
	Telephone Telephone	number <u>i i</u>	
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(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked 11/13/2012 **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify):** Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER DATE PREPARED