FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1 (See instructions)			Office use only		
1. NAME OF COMMITTEE (in	(Check if nam is changed)	ne Example: If typying, type over the lines	Office use only 12FE4M5		
p Dykema Goss	ett Federal PAC				
ADDRESS (number and s	201 Townsend S	Street			
X (Check if address is changed)	Suite,900		MI 48933 _		
		CITY▲	STATE▲ ZIP CODE ▲		
COMMITTEE'S E-MAI wsiegel@dyke			1		
Wsiegel@dyke					
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
COMMITTEE'S FAX N 5173749191	UMBER				
2. DATE 0.6	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
3. FEC IDENTIFICA	TION NUMBER	C C00342113			
4. IS THIS STATEM	ENT NEW (N)	AMENDED (A)			
I certify that I have exami	ned this Statement and to the best of m	ny knowledge and belief it is true, correct	and complete		
Type or Print Name of	Treasurer Ms. Wendy S	Siegel			
Signature of Treasurer	Electronically Filed by Ms. W	/endy Siegel	Date 06 / D06 / YYYYY		
NOTE: Submission of fall	·	on may subject the person signing this St	atement to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS		
Office Use Only		For further information Federal Election Commit Toll Free 800-424-9530			

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5.	TYPE OF COMMITTEE (Check One)				
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)				
	andidate				
	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 Rep	emocratic, publican,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 fur committee.	nd or party			
6.	Name of Any Connected Organization or Affiliated Committee				
l		.			
	NASTE AND THE RESERVE TO THE PARTY OF THE PA				
	Mailing Address				
CITY STATE ZIP CODE					
	Relationship				
Type of Connected Organization:					
	Corporation Corporation w/o Capital Stock Labor Organization	on			
	Membership Organization Trade Association Cooperative				

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Write or Type Com	ımittee Name							
Dykema Go	ssett Federal PAC							
	custodian of Records: Identify by name, address, (phone number optional), and position of the person in ossession of Committee books and records.							
Full Name	Full Name Ms. Wendy Siegel							
Mailing Address		124 W. Allegan, Suite	800					
		Lansing	MI	48933				
Title or Position	v	CITY A	STATE	ZIP CODE A				
	Assistant Treasurer		5° Telephone number	17 374 9134 				
Full Name of Treasurer Mailing Address	Ms. Wendy Siegel	124 W. Allegan, Suite	800					
		Lansing		48933				
Title or Position	v	CITY A	STATE	ZIP CODE ▲				
	Assistant Treasurer		Telephone number5	17 374 9134				
Full Name of Designated Agent	Ms. Wendy Siegel							
Mailing Address		124 W. Allegan, Suite	800					
		Lansing		48933				
Title or Position	•	CITY A	STATE A	ZIP CODE A				
	Assistant Treasurer		Telephone number5	17 _ 374 _ 9134				

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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	201 Townsend Street						
		Suite 900						
		Lansing MI 48933	3					

STATE ∠

ZIP CODE △

CITY 🗷