FEC FORM 1	STATEMEN ORGANIZA		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Libertarian Part	y of Michigan Exe	cutive Committee	e, Inc.
ADDRESS (number and street)	P.O. Box 614		
(Check if address is changed)			
	Royal Oak └────────────────────────────────────		MI 48858   STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADD	RESS		
(Check if address is changed)	Gblack76@me.com		
	Optional Second E-Mail Add		
COMMITTEE'S WEB PAGE A	ADDRESS (URL)		
2. DATE 05	31 / Y Y Y Y 2023		
3. FEC IDENTIFICATION	NUMBER ► C Co	0403907	
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)	
I certify that I have examined	I this Statement and to the best	of my knowledge and belief it i	s true, correct and complete.
Type or Print Name of Treasu	ırer Black, Gregory, , ,		
Signature of Treasurer	ack, Gregory, , ,	[Electronically Filed]	Date 05 / 05 / 2023
NOTE: Submission of false, err		may subject the person signing th ION SHOULD BE REPORTED V	is Statement to the penalties of 52 U.S.C. §30109 VITHIN 10 DAYS.
Office Use Only		For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	

Image# 202305319581693769

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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 information below.)	candidate
Name of Candidate '''''''''''''''''''''''''''''	
Candidate 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:   (National, State or subordinate) committee of the   (Democratic, Republican, or subordinate)	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	ganization
Membership Organization Trade Association Cooperation	ve
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC	C).
In addition, this committee is a Lobbyist/Registrant PAC.	

## Joint Fundraising Representative:

(i) 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.
(j) 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
2.

Write or Type Committee Name

## Libertarian Party of Michigan Executive Committee, Inc.

Mailing Ad	ddress																										
																									- [		
								С	ITY	′▲								ST	٩ΤΕ			Z	ΊP	со	DE		

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

Black, Gre	gory, , ,		
Full Name			
Mailing Address	3135 N. Concourse Dr		
	Mt Pleasant		48858
	CITY 🔺	STATE 🔺	ZIP CODE
Title or Position <b>v</b>			
Treasurer		Telephone number	89 944 3284

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	Black, Gregory, , ,									
of Treasurer										
Mailing Address	3135 N. Concourse Dr									
	Mt Pleasant MI48858									
	CITY ▲ STATE ▲ ZIP CODE ▲									
Title or Position ▼										
Treasurer	Image:									

Full Name of Designated	Chadderon,	Andrew, , ,																											
Agent																													
Mailing Address		30005 Malv	vern S	st							1																		
		Westland																	NI I		Ĺ	481	85			 L			
						CI											:	STA	٩ΤΕ					ZII	PC	ЭE			
Title or Position	Title or Position ▼																												
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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.

Come	rica Bank		
Mailing Address	411 W Lafayette Blvd		
	Detroit	MI 48226	6
	CITY A	STATE A	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY 🔺	STATE A	ZIP CODE