## **STATEMENT OF**

FORM 1	ORGANIZ (See instruc			Office use only
NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	Office use only
ALTICOR PO	LITICAL ACTION COMMITTEE	ALTIPAC		
ADDRESS (number and	7575 E FULTON R	OAD		
(Check if address	Attn: Scott Smoes	s 56-3S	11111	11111111
X is changed)	ADA		LMI L	49355   _
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MA	AIL ADDRESS (Please provide only one			
(Check if addres	scott_smoes@alti	cor.com		
is onunged)				
COMMITTEE'S WEE	PAGE ADDRESS (URL)			
(Check if addres	ss		11111	11111111
is changed)				
2. DATE <b>0</b> .3	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFIC	ATION NUMBER	C C00034884		
4. IS THIS STATE	MENT X NEW (N) OF	AMENDED (A)		
I certify that I have exam	nined this Statement and to the best of my	knowledge and belief it is true, correc	et and complete	
Type or Print Name of	Treasurer Scott E Smoe	S		
Signature of Treasure	r Electronically Filed by Scott E	Smoes	Date 03	7 31 7 2009
NOTE: Submission of fa	alse, erroneous, or incomplete information  ANY CHANGE IN INFORT	may subject the person signing this S	·	-
Office Use Only		For further informati Federal Election Com Toll Free 800-424-955	mission	FEC FORM 1 (Revised 02/2009)

	F	EC F	orm 1 (Revised 02/2009)	Page 2
5.			OMMITTEE (Check One) ommittee:	
	(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 information below.)	e. (Complete the candidate
	Name Candi			
	Candi Party	date Affiliatio	Office Sought: House Senate	President State  District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee	tee.
	Name Candi			
	Party	Comm		
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
_	Politic	cal Act	ion Committee (PAC):	
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.	) Its connected organization is a:
			X Corporation Corporation w/o Capital Stock	Labor Organization
			H H	
			Membership Organization Trade Association	Cooperative
	(f)		X In addition, this committee is a Lobbyist/Registrant PAC.	
	(1)	Ш	This committee supports/opposes more than one Federal candidate, and is NOT a separa committee. (i.e., nonconnected committee)	ate segregated 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.)	
_			In addition, this committee is a Leadership i Ao. (identity sponsor on line o.)	
	Joint F	undra	ising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, at least one of which is an authorized committee of a federal care	
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, none of which is an authorized committee of a federal candidate	
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number	С
			2. FEC ID number	С
			3. FEC ID number	
			4 FEC ID number	>

Write or Type Committee Name

Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraisi	ng Representative, or Lead	ership PAC Sponsor		
Alticor, Inc					
<u> </u>		1 1 1 1 1 1 1 1 1			
Mailing Address	7575 Fulton St E	7575 Fulton St E Attn: Scott Smoes 56-3S			
•	Attn: Scott Smoes 56-3S				
	Ada		49355		
	CITY▲	STATE A	ZIP CODE		
Relationship:					
X Connected Organ	nization Affiliated Committee Joint Fun	draising Representative	Leadership PAC Sponsor		
	Is: Identify by name, address, (phone number o	ptional), and position of t	he person in		
possession of Com	Is: Identify by name, address, (phone number on mittee books and records.  Scott E Smoes  7575 E Fulton	ptional), and position of t	·		
possession of Com	nmittee books and records.  Scott E Smoes		·		
possession of Com	nmittee books and records.  Scott E Smoes  7575 E Fulton		·		
possession of Com	mittee books and records.  Scott E Smoes  7575 E Fulton  56 - 3S				
possession of Com Full Name Mailing Address	7575 E Fulton  56 - 3S  Ada  CITY		49355		
possession of Com Full Name Mailing Address  Title or Position   Treasurer: List the	7575 E Fulton  56 - 3S  Ada  CITY	MI STATE A elephone number  ne treasurer of the comm	49355 ZIP CODE &		
possession of Com Full Name  Mailing Address  Title or Position   Treasurer: List the name and address  Full Name	7575 E Fulton  56 - 3S  Ada  CITY A  name and address (phone number optional) of the second secon	MI STATE A elephone number  ne treasurer of the comm	49355 ZIP CODE A		
possession of Com Full Name  Mailing Address  Title or Position   Treasurer: List the name and address  Full Name	To a name and address (phone number optional) of the soft any designated agent (e.g., assistant treasurer)	MI STATE A elephone number  ne treasurer of the comm	49355 ZIP CODE A		
possession of Com Full Name Mailing Address  Title or Position  Treasurer: List the name and address  Full Name of Treasurer	To a name and address (phone number optional) of the soft any designated agent (e.g., assistant treasurer).	MI STATE A elephone number  ne treasurer of the comm	49355 ZIP CODE A		
possession of Com Full Name Mailing Address  Title or Position  Treasurer: List the name and address  Full Name of Treasurer	Total control of the state of t	MI STATE A elephone number  ne treasurer of the comm	49355 ZIP CODE A		

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Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A
	Tel	lephone number	
9. Banks or Other Deposis safety deposit boxes or m Name of Bank, Depositor  Depositor  Deposits or Other Deposit Safety deposit Safety deposit Safety deposit Safety Saf	naintains funds. ry, etc.	e committee deposits funds, ho	lds accounts, rents
Ba	ank of America		
Mailing Address	7575 Fulton Street East		
	Ada	MI	49355
	CITY 🗖	STATE <b>△</b>	ZIP CODE 🛕
Name of Bank, Depositor	ry, etc.		
L			
Mailing Address			
			1 1