

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

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FEC Office Use Only CENTER

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

LIVONIA DEMOCRATIC CLUB

ADDRESS (number and street)

32720 NORFOLK ST.

(Check if address  
is changed)

LIVONIA

CITY ▲

MI.

STATE ▲

48152-1312

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address  
is changed)

president@livoniademocraticclub.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

livoniademocraticclub.com

livoniademocraticclub.org

livoniademocraticclub.net

2. DATE

08

24

2014

3. FEC IDENTIFICATION NUMBER ▶

C203939835

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

MARIANNE Peltier

Signature of Treasurer

Marianne Peltier

Date

08

24

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

LIVONIA DEMOCRATIC CLUB

5. 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 candidate information below.)

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 \_\_\_\_\_

Party Committee:

- (d)  This committee is a **SUB** (National, State or subordinate) committee of the **DEM** (Democratic, Republican, 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  Labor Organization
  - Membership Organization  Trade Association  Cooperative
  - 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 fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  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.
- (h)  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

1. \_\_\_\_\_ FEC ID number **C** \_\_\_\_\_

2. \_\_\_\_\_ FEC ID number **C** \_\_\_\_\_

3. \_\_\_\_\_ FEC ID number **C** \_\_\_\_\_

4. \_\_\_\_\_ FEC ID number **C** \_\_\_\_\_

Write or Type Committee Name

LIVONIA DEMOCRATIC CLUB

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

MICHIGAN DEMOCRATIC PARTY STATE CENTRAL COMMITTEE

Mailing Address

606 TOWNSEND AVENUE

LANSING

CITY

MI

STATE

48933

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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

Full Name

DANIELLE LEWON

Mailing Address

19169 INKSTER ROAD

LIVONIA

CITY

MI

STATE

48152

ZIP CODE

Title or Position

RECORDING SECRETARY

Telephone number

248-943-7293

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 of Treasurer

MARIANNE PELTIER

Mailing Address

29242 BARKLEY ST.

LIVONIA

CITY

MI

STATE

48154

ZIP CODE

Title or Position

TREASURER

Telephone number

734-355-1739

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

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.

Community Choice Credit Union

Mailing Address

31155 Northwestern Hwy.

[Grid for Mailing Address Line 2]

FARMINGTON HILLS MI 48334

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

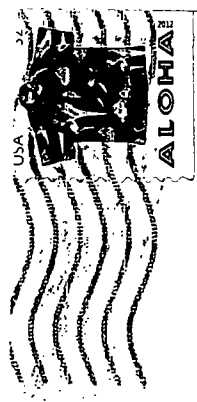
CITY

STATE

ZIP CODE

POSTNET

Livonia Democratic Club  
32720 Norfolk St.  
Livonia, Michigan 48152



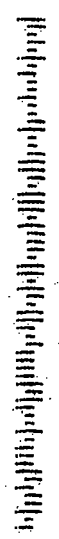
METROPLEX MI 480

04 SEP 2014 PM 2 L

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

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20463

Federal Election Commission  
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 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
 PREPARER  
 (8/2013)

9/9/14  
 DATE PREPARED

110304-1001-1001