FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Eleventh Congressional District of Michigan Democratic Party 2629 Caterham Dr ADDRESS (number and street) (Check if address is changed) Waterford Township 48329 MI CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS rlm2629@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00544833 FEC IDENTIFICATION NUMBER 3. X 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 McGregor, Robin, Lynn, 09 25 2023 Signature of Treasurer McGregor, Robin, Lynn,, Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

E	C Form 1 (Revised 03/2022) Page	2
	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 Office State Party Affiliation Sought: House Senate President	L:
	(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	on 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 pacommittee. (i.e., nonconnected committee)	arty
	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).	
	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 polit committees/organizations, at least one of which is an authorized committee of a federal candidate.	ical
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, none of which is an authorized committee of a federal candidate.	ical
	Committees Participating in Joint Fundraiser	
	1	

Title or Position ▼

Treasurer

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٧	Vrite or Type Comm			
_		Congressional District of Michigan I		
6.		nnected Organization, Affiliated Committee, Joint Fundra	ising Representative, or Le	adership PAC Sponsor
	michigan de	nocratic state central committee		
	Mailing Address			
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship:	Connected Organization X Affiliated Organization Join	nt Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Rec	ords: Identify by name, address (phone number optional) as.	nd position of the person in pos	ssession of committee
		McGregor, Robin, Lynn, ,		
	Full Name			
	Mailing Address	2629 Caterham Dr.		
		Waterford Township	MI 48	3329
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼		G##12 =	Z.i. 0052 —
	Treasurer		ephone number 248	_ 802 _ 8319
8.		e name and address (phone number optional) of the treatent (e.g., assistant treasurer).	surer of the committee; and t	he name and address of
	Full Name	McGregor, Robin, Lynn, ,		
	of Treasurer			
	Mailing Address	2629 Caterham Dr.		
		Waterford Township	MI 48	3329
		CITY ▲	STATE ▲	ZIP CODE ▲

248

Telephone number

802

8319

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Full Name of Designated Agent	McGregor, Robin, Lynn, ,	
Mailing Address	2629 Caterham Dr.	
	Waterford Township	48329
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
Treasurer	Telephone number	48
	Depositories: List all banks or other depositories in which the committee deposits fixes or maintains funds.	runds, holds accounts, rents
Name of Bank, D	Depository, etc.	
	Comerica Bank	
Mailing Address	PO Box 75000	
	Detroit MI	48275
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.	
	Comerica Bank	
Mailing Address	31 East Long Lake Rd.	
	Troy MI	48085
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID numbe	r C
2.		FEC ID numbe	r C
3.		FEC ID numbe	r C
4.		FEC ID numbe	r C
ame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representati	tive, or Leadership PAC Spon
Mailing Address			
Relationship:	CITY A	STATE	▲ ZIP CODE ▲
	d Organization Affiliated Committee by by name, address (phone number – option	Joint Fundraising Represental	entative Leadership PAC S
esignated Agent: Identi			entative Leadership PAC S
esignated Agent: Identi	y by name, address (phone number – option		Leadership PAC S
esignated Agent: Identii Derderia Full Name	y by name, address (phone number – optionan, Vaughn, , ,		Leadership PAC S
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