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) is changed) over the lines. R. Vance Patrick Elect 30545 Longcrest ADDRESS (number and street) (Check if address is changed) Southfield 48076 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mj45hourani@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2020 C00738120 FEC IDENTIFICATION NUMBER > 3. 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. Hourani, Mary Jane, , , Type or Print Name of Treasurer Hourani, Mary Jane, , , [Electronically Filed] 02 08 2020 Signature of Treasurer Date 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

F	EC Fo	orm 1 (Revised 02/2009)	age 2	
		COMMITTEE		
	alaate	This committee:		
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)		
(b) Name	e of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.) Patrick Pohort Vanco	candidate	
Cand		Patrick, Robert, Vance, ,		
Cand Party	lidate Affiliati	tion REP Office Sought: X House Senate President	MI 14	
		Distr	ict	
(c)	Ш	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name Cand				
Part	y Con	mmittee: (National, State (Democra	atic	
(d)		· · · ·	an, etc.) Party.	
Poli	tical A	Action Committee (PAC):		
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization			
		Corporation Corporation w/o Capital Stock Labor C	Organization	
		Membership Organization Trade Association Cooper	ative	
		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.)		
Join	t Func	draising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mor committees/organizations, at least one of which is an authorized committee of a federal candidate.	e political	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	political	
	Com	nmittees Participating in Joint Fundraiser		
	1.	FEC ID number		
	2.	FEC ID number		
	3.	FEC ID number		
	4.			

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Write or Type Committee Na		9
R. Vance Patr	ick Elect	
	d Organization, Affiliated Committee, Joint Fundraising Representati	ive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
. Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of the	e person in possession of committee
Houran	i, Mary Jane, , ,	
Mailing Address	10524 Grand River	
Ü	Ste 106	
	Brighton MI	48116
Title or Position	CITY STATE	ZIP CODE
Treasurer		313 - 804 - 2500
. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committed., assistant treasurer).	tee; and the name and address of
Full Name Hourani	, Mary Jane, , ,	
Mailing Address	10524 Grand River	
	Ste 106	
	Brighton	48116
Title or Position Treasurer	CITY STATE Telephone number	ZIP CODE 313 - 804 - 2500

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
safety deposit boxes or r Name of Bank, Depositor		funds, holds accounts, rents
safety deposit boxes or r Name of Bank, Deposito	naintains funds. ry, etc. star Bank	funds, holds accounts, rents
safety deposit boxes or r Name of Bank, Deposito	maintains funds. ry, etc. Star Bank 9332 Lee Rd	
safety deposit boxes or r Name of Bank, Deposito	maintains funds. ry, etc. Star Bank 9332 Lee Rd Brighton CITY STATE	48116
safety deposit boxes or r Name of Bank, Depositor Flag Mailing Address	maintains funds. ry, etc. Star Bank 9332 Lee Rd Brighton CITY STATE	48116
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safety deposit boxes or r Name of Bank, Depositor Flag Mailing Address Name of Bank, Depositor	maintains funds. ry, etc. Star Bank 9332 Lee Rd Brighton CITY STATE	48116