Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) ARK HILL FEDERAL POLITICAL ACTION COMMITTEE, THE 1001 Pennsylvania Ave. NW ADDRESS (number and street) Suite 1300S (Check if address is changed) Washington 20004 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS amiller@clarkhill.com (Check if address is changed) Optional Second E-Mail Address |dtarnacki@clarkhill.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2019 C00413484 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. Miller, Andrew, R.,, Type or Print Name of Treasurer Miller, Andrew, R.,, [Electronically Filed] 01 2022 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

FFC <b>F</b>	orm 1 (Revised 02/2009)	Page <b>2</b>			
TYPE OF	COMMITTEE  ce Committee:	. 494 -			
(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 Affilia	Office Sought: House Senate President	State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Co		(Domografia			
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Political A	Action Committee (PAC):				
(e)					
	Corporation Corporation w/o Capital Stock	Labor Organization			
	Membership Organization Trade Association	Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.				
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	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.)				
Joint Fun	draising Representative:				
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 t committees/organizations, none of which is an authorized committee of a federal candidate.				
Cor	nmittees Participating in Joint Fundraiser				
1.	FEC ID number				
2.	FEC ID number				
3.					
4.					

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Write or Type Committee Nar				TUE
	FEDERAL POLITICA  Organization, Affiliated Committee, Jo			•
NONE	organization, Anniated Committee, 30	and rundraising Represente	ave, or Leadership i	Ao Sponsor
Mailing Address				
	CITY	STAT	E ZIP	CODE
Relationship: Connect	ted Organization Affiliated Committee	Joint Fundraising Repres	sentative Leaders	ship PAC Sponsor
books and records.	lentify by name, address (phone number	optional) and position of t	he person in possess	sion of committee
Full Name				
Mailing Address	1001 Pennsylvania Ave. NW			
	Suite 1300S			
	Washington	DC	20004	
Title or Position	CITY	STATE	ZIP	CODE
Treasurer		Telephone number	202 552	
Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) o , assistant treasurer).	of the treasurer of the comm	ittee; and the name a	and address of
Full Name Miller, Ar	ndrew, R., ,			
Mailing Address	1001 Pennsylvania Ave. NW			
	Suite 1300S			
	Washington	DC	20004	
Title or Position	CITY	STATE	ZIP	CODE
Treasurer		Telephone number	202   552	-  2367

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Full Name of Designated Agent Tarnac	cki, Duane, L., ,						
Mailing Address	500 Woodward Ave., Suite 3500						
	Detroit CITY	MI 44 STATE	8226 				
Title or Position Assistant Treasurer		elephone number 313	_ 965 _ 8264				
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.							
Com	nerica						
Mailing Address	201 West Fort Street						
	MC 8042						
	Detroit	MI 48	8226				
	CITY	STATE	ZIP CODE				
Name of Bank, Depositor	ry, etc.						
Mailing Address							