Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Linda O'Dell for Congress 201 W Mitchell St ADDRESS (number and street) # 130 (Check if address is changed) Petoskey 49770 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS sue@bluewavepolitics.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 05 2019 C00714683 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. Hollis, Joe, , , Type or Print Name of Treasurer Hollis, Joe, , , [Electronically Filed] 80 05 2019 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

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		COMMITTEE	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Nam	e of	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.) O'Dell, Linda, , ,	olete the candidate
	didate		
	didate / Affiliati	on DEM Office Sought: X House Senate President	State MI District 01
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	Damaaanatia
(d)		· · · · · ·	Democratic, Republican, 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 on line 6.)	nected 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 secommittee. (i.e., nonconnected committee)	gregated 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 tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number C	
	1		

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Write or Type Committee Nar	пе	
Linda O'Dell fo	or Congress	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
NONE	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Id books and records.	lentify by name, address (phone number optional) and position of the person in	n possession of committee
	n, Sue, , ,	1
Full Name	201 W Mitchell St	
Mailing Address		
	Petoskey MI 497	/70
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	592 9826
B. Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and th , assistant treasurer).	ue name and address of
Full Name Hollis, Jo	De, , ,	
Mailing Address	201 W Mitchell St	
	# 130	
	Petoskey MI 497	70
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 919	- [592

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Full Name of Designated Agent	Jackson, Sue, , ,		
Mailing Address	201 W Mitchell St		
ag / laar eee	# 130		
	Petoskey	MI 497	70
	CITY	STATE	ZIP CODE
Title or Position Assistant Treas	surer Teleph	one number 919 -	592 - 9826
safety deposit b	r Depositories: List all banks or other depositories in which the oxes or maintains funds. Depository, etc.	committee deposits funds, I	nolds accounts, rents
Banks or Other safety deposit b Name of Bank,	Depository, etc. Bank of America	committee deposits funds, I	nolds accounts, rents
safety deposit b	Depository, etc. Bank of America ,250 Monroe Ave NW	committee deposits funds, I	nolds accounts, rents
safety deposit b Name of Bank,	Depository, etc. Bank of America ,250 Monroe Ave NW	committee deposits funds, I	nolds accounts, rents
safety deposit b Name of Bank,	Depository, etc. Bank of America ,250 Monroe Ave NW	committee deposits funds, I	
safety deposit b Name of Bank,	Depository, etc. Bank of America 250 Monroe Ave NW		
safety deposit b Name of Bank,	Depository, etc. Bank of America 250 Monroe Ave NW Grand Rapids CITY	MI 495(03
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America 250 Monroe Ave NW Grand Rapids CITY Depository, etc.	MI 4950 STATE	03 ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America 250 Monroe Ave NW Grand Rapids CITY Depository, etc.	MI 4950 STATE	03 ZIP CODE
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America 250 Monroe Ave NW Grand Rapids CITY Depository, etc.	MI 4950 STATE	D3 ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America 250 Monroe Ave NW Grand Rapids CITY Depository, etc.	MI 4950 STATE	D3 ZIP CODE