RECEIVED FEC MAIL CENTER

2010 SEP 17 AM 8: 53 McDowell-Miles-Schauer 2010

180 W. Michigan Avenue Suite 403 Jackson, MI 49201

September 7, 2010

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

To Whom It May Concern:

Enclosed, please find the Statement of Organization for **McDowell-Miles-Schauer 2010**. This committee is formed for the purpose of conducting joint fundraising activities.

If you have any questions, please do not hesitate to contact me at the address above.

Sincerely,

Ryan Lomonaco

Treasurer, McDowell-Miles-Schauer 2010

2010 SEP 17 AM_8: 53

10050423274

STATEMENT OF

FEC FORM 1		ORGANIZ	ATION		Office Use Only
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M	
M.C.D.O.W.E.L	- <u> L - M</u> I L	.,E,S,~,S,C,H,A,	J.E.R. 2.0.1.0.	 	
ADDRESS (number a (Check if are is changed)	ddress 5	180 N MIC BUITE 40:	_	MI	[4,9,2,0,1]-
COMMITTEE'S E-MA (Check if is change	address	Please provide only one	CITY e-mail address) N _I L _I O _I M _I O _I N _I A _I C _I O _{I • I} C	STATE	ZIP CODE
COMMITTEE'S WEB (Check if is change	address	ss (url) V _I O _I N _I E, , , , ,			
 DATE Ö FEC IDENTIFIC IS THIS STATE 	ise/h	2.0 1.0 BER C NEW (N) OR	AMENDED (A)		
Type or Print Name Signature of Treasure	of Treasurer er false, erroneous	Ryan Andre au Jourous , or incomplete information	Wo	Date O	9 / 07 / 2010 to the penalties of 2 U.S.C. §437g.
Office Use Only			For further information of Federal Election Commissis Toll Free 800-424-9530 Local 202-694-1100	ontact:	FEC FORM 1 (Revised 02/2009)

	FEC Fo	rm 1 (Revised 02/2009)	Page 2					
		OMMITTEE • Committee:						
(a)		This committee is a principal campaign committee. (Complete the candidate information below	ow.)					
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Nam Can	e of didate	<u> </u>	<u> </u>					
	didate y Affiliat	Office Sought: House Senate President	State					
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Nam Cand	e of didate							
Par	ty Cor	nmittee:						
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party					
Poli	itical A	ction Committee (PAC):						
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	connected organization is					
		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 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.)						
Join	t Fund	raising Representative:						
(g)	X	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 fo committees/organizations, none of which is an authorized committee of a federal candidate.	r two or more political					
	Com	mittees Participating in Joint Fundraiser						
	1.	MCDOWELL FOR COMGRESS FEC ID number CO	0483784					
	2.	PIAITI MILLEISI FIOIRI COMGRESISI FEC ID number CO	0479733					
	3.	SCHAUER FOR COWGRESS FEC ID number	0438341					
	4.							

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MCDOWELL-MILES-SCHAUER 2010						
6.		Organization, Affiliated Committee, Joint Fundraising Represe	entative, or Leadership PAC Sponsor			
i						
L						
	Mailing Address					
			<u></u>			
		CITY S	TATE ZIP CODE			
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Rep	presentative Leadership PAC Sponsor			
	Custodian of Records: Iden	ntify by name, address (phone number optional) and position of	of the person in possession of committee			
	books and records.		·			
	Full Name R.Y.A.I	N, A,N,D,R,E,W,LO,M,O,N,A,C,O,				
	Mailing Address	11.7.0.0, S. WEST, A.VE				
		A.P.T. M4				
		$J_{i}A_{i}C_{i}K_{i}S_{i}O_{i}N_{i}$	MI 4.9.2.0.3-1			
	Title or Position	CITY ST	ATE ZIP CODE			
	$[T_iR_iE_iA_iS_iU_iR_iE_iR_i]$	Telephone number	لـــا-لـــا			
3.	Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the corassistant treasurer).	nmittee; and the name and address of			
	Full Name of Treasurer	N. A.N.D.R.E.W. LOMONACO				
	Mailing Address	1.7.0.0 S WEST AVE				
		(A, P, T, M, -, 4, , , , , , , , , , , , , , , , ,				
		CITY STA	4.9.2.0.3]- TE ZIP CODE			
	Title or Position $[T, R, E, A, S, U, R, E, R]$	Telephone number				
			i i			

9.

FEC Form 1 (Revised 02/2009)	· · · · · · · · · · · · · · · · · · ·	Page 4			
Full Name of					
Designated Agent					
Mailing Address					
CITY	STATE	ZIP CODE			
Title or Position					
Telephone nu	mber				
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.					
$[\mathbf{I}_{N}D_{i}\mathbf{E}_{i}P_{i}\mathbf{E}_{i}N_{i}D_{i}\mathbf{E}_{i}N_{i}T_{i}]\mathbf{B}\mathbf{A}_{i}N_{i}\mathbf{K}_{i}$					
Mailing Address B.4.8, E.A.S.T. M.A.I.N. S.T.R.E.E	T				
IRITVIES JUNCTION	MI [4,9;	2,7,7]-			
CITY	STATE	ZIP CODE			
Name of Bank, Depository, etc.					
	111111				
Mailing Address					
	11 1 1 1 1 1				
	نبا لبا				
CITY	STATE	ZIP CODE			

(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER DATE PREPARED