

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Eleventh Congressional District of Michigan Democratic Party

ADDRESS (number and street) 16941 Shrewsbury Ct

(Check if address is changed)

Livonia

CITY ▲

MI

STATE ▲

48154

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

kate.shishkovsky@gmail.com

Optional Second E-Mail Address

kjdougla@umich.edu

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

11thDems.com

2. DATE

06 / 29 / 2019

3. FEC IDENTIFICATION NUMBER ►

C C00544833

4. 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 Shishkovsky, Kate, , ,

Signature of Treasurer

Shishkovsky, Kate, , ,

[Electronically Filed]

Date

06 / 29 / 2019

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 Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

5. 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 Party Affiliation Office Sought: House Senate President State
 District

- (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 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 party 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.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C _____
2. _____ FEC ID number C _____
3. _____ FEC ID number C _____
4. _____ FEC ID number C _____

Write or Type Committee Name

Eleventh Congressional District of Michigan Democratic Party

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

michigan democratic state central committee

Mailing Address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Shishkovsky, Kate, , ,

Mailing Address 16941 Shrewsbury Ct

Livonia

MI

48154

Title or Position

CITY

STATE

ZIP CODE

Telephone number 734 - 748 - 6073

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Shishkovsky, Kate, , ,

Mailing Address 16941 Shrewsbury Ct

Livonia

MI

48154

Title or Position

CITY

STATE

ZIP CODE

Telephone number 734 - 748 - 6073

Full Name of Designated Agent

Strong, Regina, , ,

Mailing Address

28106 Chesapeake Circle

Commerce Twp

MI

48390

CITY

STATE

ZIP CODE

Title or Position

Vice Chair

Telephone number

248

991

5701

9. 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.

Comerica Bank

Mailing Address

PO Box 75000

Detroit

MI

48275

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Comerica Bank

Mailing Address

31 East Long Lake Rd.

Troy

MI

48085

CITY

STATE

ZIP CODE

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`#H9A-N5HCB

Form/Schedule: F1A

Transaction ID :

Our Treasurer Has Changed as of Last Meeting, we are updating the Statement of Organization to bring the legal documentation in line with that reality.

Form/Schedule:

Transaction ID:

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

FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundraising Participant:

1.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
2.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
3.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Douglas, Kent, James, ,
Full Name

2191 Kohler St.
Mailing Address

Waterford MI 48329
 CITY ▲ STATE ▲ ZIP CODE ▲

TITLE OR POSITION ▼ Chair
 Telephone Number - -

9. 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.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲