PAGE 1 / 4 •

STATEMENT OF **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. Michigan For Elizabeth Warren 652 Forest St ADDRESS (number and street) (Check if address is changed) Westland 48186 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS michiganforwarren@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.michiganforwarren.com (Check if address is changed) DATE 2018 C00691808 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. McDermott, Michael, Ryan,, Type or Print Name of Treasurer McDermott, Michael, Ryan, , [Electronically Filed] 18 2018 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 Only Local 202-694-1100

	FEC <b>Fo</b> i	rm 1 (Revised 02/2009)	Page <b>2</b>				
TYP	E OF C	OMMITTEE Committee:	<u>-</u>				
(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							
	didate y Affiliatio	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	Warren, Elizabeth, , ,					
Par	ty Con	y Committee:					
(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 co	nnected 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)	f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segr 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	ıt Fund	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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.					
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.						
	3.						
	4.						

FEC <b>Form 1</b> (Revised 0	02/2009)	Page <b>3</b>
Write or Type Committee Name		. ago o
Michigan For El	lizabeth Warren	
	Organization, Affiliated Committee, Joint Fundraising Representat	ive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	E ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Repres	entative Leadership PAC Sponsor
<ol> <li>Custodian of Records: Iden books and records.</li> </ol>	ntify by name, address (phone number optional) and position of th	ne person in possession of committee
	t, Michael, Ryan, ,	1
Full Name	652 Forest St	
Mailing Address		
	, Westland	, ,48186
	Westeria	
Title or Position	CITY STATE	ZIP CODE
	Telephone number	734 - 890 - 2146
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the commit assistant treasurer).	ttee; and the name and address of
Full Name McDermott	t, Michael, Ryan, ,	
	652 Forest St	
Mailing Address		
	Westland   MI	48186
	CITY STATE	ZIP CODE
Title or Position		734   890   2146
	Telephone number	

FEC <b>Forr</b>	n 1 (Revised 02/2009)	Page <b>4</b>					
Full Name of Designated Agent		_ 					
Mailing Address							
	CITY STATE	ZIP CODE					
Title or Position							
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.  Vibe Credit Union							
Mailing Address	44575 Twelve Mile Rd						
	Novi MI 48377						
	CITY STATE	ZIP CODE					
Name of Bank,	Depository, etc.						
Mailing Address							