Only

PAGE 1/5 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) Automobile Club of Michigan Political Action Committee 1 Auto Club Drive ADDRESS (number and street) (Check if address is changed) Dearborn 48126 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS ktgawronski@autoclubgroup.aaa.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00197103 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. Gawronski, Kevin, , Mr., Type or Print Name of Treasurer Gawronski, Kevin, , Mr., [Electronically Filed] 04 2020 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 Use

Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

(Revised 06/2012)

EEC	Form 1 (Revised 02/2000)	Page 2			
	Form 1 (Revised 02/2009) COMMITTEE	raye Z			
Candid	ndidate 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. (Cominformation below.)	plete the candidate			
Name of Candidate					
Candidate Party Affi	55	State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party C	ommittee:				
(d)		(Democratic, Republican, etc.) Party			
Politica	I Action Committee (PAC):				
(e) x		nected organization is			
_	Corporation Corporation w/o Capital Stock	Labor Organization			
	Membership Organization Trade Association	Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	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.)				
Joint Fu	ndraising Representative:				
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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			
C	ommittees Participating in Joint Fundraiser				
1.	FEC ID number				
2.	FEC ID number C				
3.	FEC ID number				
4.					

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l	FEC Form 1 (Revised	02/2009)	Page 3
W	rite or Type Committee Name		
A	Automobile Clu	b of Michigan Political Action Committee	
6.		Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
Αļ	utomobile Club of Mi	chigan , , , , , , , , , , , , , , , , , , ,	
Ш			
		1 Auto Club Dr.	
	Mailing Address		
		Dearborn MI 48126	
		Dearborn MI 48126	
		CITY STATE Z	IP CODE
	Relationship: x Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
	_		
		ntify by name, address (phone number optional) and position of the person in posse	ession of committee
	books and records.		
	Gawronsk Full Name	i, Kevin, , ,	
	Mailing Address	120 N. Washington Sq.	.
		Suite 802	
		Lansing MI 48933	
	Title or Position	CITY STATE Z	IP CODE
	Grassroots Coordinat		25
3.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the namessistant treasurer).	e and address of
	Full Name Gawronski	i, Kevin, , Mr.,	
	of Treasurer		
	Mailing Address	1 Auto Club Drive	
		Dearborn	
	Title or Position	CITY STATE ZI	P CODE
	Coordinator	Telephone number 517 48	37 ₋ 5901

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Full Name of Designated Agent				
Mailing Address				
-				
	CITY STATE Z	ZIP CODE		
Title or Position				
safety deposit bo	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. AAA Banking PO Box 2379			
Mailing Address	. 5 55. 25. 5			
	Omaha NE 68103			
	CITY STATE 2	ZIP CODE		
Name of Bank, I	Name of Bank, Depository, etc.			
Mailing Address				
Mailing Address				
Mailing Address				

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

New Treasurer. Reclassified committee per FEC instructions.

Form/Schedule: Transaction ID: