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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. Tom Norton for Congress 11281 Myers Lake Ave NE ADDRESS (number and street) (Check if address is changed) Rockford 49341 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jefffuss@reagan.com (Check if address is changed) Optional Second E-Mail Address liz@lizcurtisassociates.com COMMITTEE'S WEB PAGE ADDRESS (URL) tom.gop (Check if address is changed) DATE 03 2022 C00704270 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. Fuss, Jeff, , , Type or Print Name of Treasurer Fuss, Jeff,,, [Electronically Filed] 01 03 2022 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

FFC F	orm 1 (Revised 02/2009)	Page 2
TYPE OF (COMMITTEE	1 ago 2
	e Committee:	
(a) x	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. (Con information below.)	nplete the candidate
Name of Candidate	Norton, Thomas, John, ,	
Candidate Party Affiliat	ion REP Office Sought: House Senate President	State MI District 02
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	nmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action 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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated 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 Fun	draising 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee	Name	
Tom Norton	for Congress	
Name of Any Connec	ted Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
Custodian of Records books and records.	: Identify by name, address (phone number optional) and position of the person	ı in possession of committe
	s, Jeff, , ,	
Full Name	1071 Chippewa St.	
	Jenison MI 2	19428
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
Treasurer: List the nar any designated agent (ne and address (phone number optional) of the treasurer of the committee; and e.g., assistant treasurer).	the name and address of
Full Name Fuss of Treasurer	, Jeff, , ,	
Mailing Address	1071 Chippewa St.	
		9428
Title or Position	CITY STATE	ZIP CODE 1 813 1 1198
	Telephone number]-[

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Full Name of Designated Curting Agent	s, Elizabeth, , , 08053-2820		
Mailing Address	5 HALIFAX CT		
	MARLTON	NJ 0805 STATE	3 ZIP CODE
Title or Position Deputy Treasurer		ne number	
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc.	ommittee deposits funds, h	
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. ntington Bank		
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc.		
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. ntington Bank 6174 28th St. SE		
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. ntington Bank	MI 4954	6
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. ntington Bank 6174 28th St. SE		6 JIP CODE
safety deposit boxes or Name of Bank, Deposit Hur Mailing Address	maintains funds. tory, etc. ntington Bank 6174 28th St. SE Grand Rapids CITY	MI 4954	
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