Image# 26940308407 08/24/2006 17:27

FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1			Office use only		
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
MICHIGAN MA	JORITY COMMIT	TEE; THE		<u> </u>	
	11111	1 1 1 1 1 1		1 1 1 1 1 1	
ADDRESS (number and	street)	OX 75103			
(Check if addr is changed)		HINGTON		DC L	20013
COMMITTEE'S E MAI	LADDDECC		CITY▲	STATE▲	ZIP CODE 📥
committee's e-mai					1
COMMITTEE'S WEB	PAGE ADDRESS (III	<u>                                     </u>			
					1
2. DATE 0 8		Ž 0 0 6 °			
3. FEC IDENTIFICA	TION NUMBER	C	C C00425884		
4. IS THIS STATEM	ENT X NEW	(N) OR	AMENDED (A)		
I certify that I have exami	_	to the best of my know	vledge and belief it is true, corre	ct and complete	
Signature of Treasurer	Electronically Filed	d by <b>Douglas W</b>	7. Robinson	Date 08	23 Y 2006
NOTE: Submission of fa			subject the person signing this		s of 2 U.S.C. S437g.
Office Use Only			For further informat Federal Election Com Toll Free 800-424-95 Local 202-694-1100	ımission	FEC FORM 1 (Revised 02/2003)

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5.	TYPE OF COMMITTEE (Check One)	
	(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 cal information below.)	ndidate
	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	
		mocratic, ublican,etc.) Party.
	(e) This committee is a separate segregated fund	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated function committee.	d or party
6.	Name of Any Connected Organization or Affiliated Committee	
1	MICHIGAN REPUBLICAN PARTY	1
L		
	500 0 201	
	Mailing Address 520 Seymour St.	
	L Lansing Lansing MI L 489	33
	CITY▲ STATE ▲ Z	IP CODE A
	Relationship JF Participant	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock Labor Organization	n
	X Membership Organization Trade Association Cooperative	

FEC <b>For</b>	<b>m 1</b> (Revised 02/2003)				Pa	age <b>3</b>
Write or Type Cor	mmittee Name					
MICHIGAN	MAJORITY COMM	IITTEE; THE				
	Records: Identify books	y name, address, (phone num and records.	nber optional), and p	osition of th	e person in	
Full Name	Douglas W. F	Robinson				
Mailing Addres	ss	P.O. Box 75103				
		Washington		DC _	20013	
Title or Position	n ♥	CITY A	ST	ATE.	ZIP CO	DE A
	Treasurer		Telephone number	202	675	6000
of Treasurer  Mailing Addres	Douglas W. F	P.O. Box 75103				
		Washington		DC _	20013_	
Title or Position	n ♥	CITY A	ST	ATE A	ZIP CO	DE 🛦
	Treasurer		Telephone number	202	675	6000
Full Name of Designated Agent	Timothy C. B	Beall				
Mailing Addres	ss	P.O. Box 75103				
		Washington		DC_	20013 _	
Title or Position	n <b>∀</b>	CITY A	ST	ATE 🛦	ZIP COI	DE A
	Assistant Treas	urer	Telephone number	202	675	6000

	FEC Form 1	(Revised 02/200	3)																						Pa	age	4	
9.	Banks or Other De safety deposit boxes Name of Bank, Depo	or maintains fur	List all ba nds.	nks o	r othe	er dep	osit	ories	s in	whi	ch t	he d	comr	nitte	e d	еро	sits	fur	nds	, ho	lds	aco	iuoc	nts,	, rei	nts		
		Wachovia E	Bank	ı							1	L					L	L		L		L						 
	Mailing Address	1	763 Pin	nacl	e Dr	ive																						 
							Ш																					 
		N	lcLean				Ш					_	Ш				V	1					221	02	<u>:</u>	- [		

STATE ∠

 $\textbf{ZIP CODE} \quad \triangle$ 

CITY 🗷

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Banks or Other Depositorie safety deposit boxes or mainta Name of Bank, Depository, etc	ains funds.	ther depositories in which the commit		accounts, rents  ADDITIONAL ]
ramo or Barn, Bopoonory, on	·.		_	_
Mailing Address				
		CITY 🛆	STATE △	ZIP CODE 🛆
Name of Any Connected O	rganization or Affiliate	d Committee	[	ADDITIONAL ]
			-	-
NATIONAL REPUBLICA	IN SENATORIAL CO	DMMITTEE		
Mailing Address	425 SECOND S	TREET NE		
Mailing Address				
	WASHINGTON		l DC	20002
	WASHINGTON		DC L	20002
		CITY	STATE A	ZIP CODE
IF Pa	rticipant			ı
Relationship JF Pa				
Type of Connected Organiza	tion:			
Corporation		Corporation w/o Capital Stock	Labor Orga	anization
X Membership Organi	zation	Trade Association	Cooperativ	e

Designated Agent			[ ADDITIONAL ]
Full Name			
Mailing Address			_
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
		elephone number	

FEC Form 1 (Revise	ed 1/2001)			Page <b>7</b> / <b>9</b>
Banks or Other Deposito safety deposit boxes or mai		ther depositories in which the comm		
Name of Bank, Depository,	etc.			[ ADDITIONAL ]
1				ı
Mailing Address				
				-
		CITY 🛆	STATE <b>△</b>	ZIP CODE 🛆
Name of Any Connected	Organization or Affiliate	ed Committee		[ ADDITIONAL ]
			•	
FRIENDS OF MIKE BO	DUCHARD			
Mailing Address	P.O. Box 75103	3		
ŭ	1			
	Washington		<b>DC</b>	20013  _
	, vasinington			
		CITY	STATE ▲	ZIP CODE
S JFI	Participant			
Relationship				
Type of Connected Organi	zation:			
Corporation		Corporation w/o Capital Stock	Labor Org	ganization
χ Membership Orga	anization	Trade Association	Cooperat	ive

Designated Agent		[ ADDITIONAL ]	
Full Name			
-			_
Title or Position ▼	<b>CITY A</b> Te	STATE A ZIP CODE A elephone number = =	

## Image# 26940308415

Form/Schedule:**F1N**Transaction ID:

This Form 1 (8/23/06) is the first electronic submission of the committee's Statement of Organization. The 'Amended' box on page 1 should be checked to indicate this filing amends the original paper filing. The software does not allow for this indication. In addition, no boxes should be checked in Section 6, Type of Committee. The filing software contains an error that requires a box to be checked in order to show the name of the affiliated organization.