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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	
Mike ter Maat for				
ADDRESS (number and street)	700 Skipjack Road			
(Check if address is changed)				
	Kinsale └───── CITY ▲		VA 22 STATE ▲	2488 ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	mike@miketermaat.co			
	Optional Second E-Mail Add matermaat@outlook	dress .com		
2. DATE 11 / 02	2 / Y Y Y Y 2022			
3. FEC IDENTIFICATION NU	JMBER ► C co	00812966		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined th	nis Statement and to the best	of my knowledge and belief it	is true, correct ar	id complete.
Type or Print Name of Treasure	r ter Maat, Michael, , ,			
Signature of Treasurer	aat, Michael, , ,	[Electronically Filed]	Date 11	/ D D / Y Y Y Y 02 2022
NOTE: Submission of false, errone		may subject the person signing t TION SHOULD BE REPORTED		e penalties of 52 U.S.C. §3010
Office Use Only		For further information ca Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	ontact:	FEC FORM 1 (Revised 06/2012)

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. 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 information below.)	he candidate
Name of Candidate	
Candidate Office President	State
Party Affiliation LIB Sought: House Senate President	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 (National, State (Democration or subordinate) committee of the Republicar	ic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:
Corporation Corporation w/o Capital Stock Labor C	Organization
Membership Organization Trade Association Cooper	rative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid F	YAC).
In addition, this committee is a Lobbyist/Registrant PAC.	

Joint Fundraising Representative:

(i) 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.
 (j) 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
 2.

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Write or Type Committee Name	
Mike ter Maat for President	

6.	Name of Any NONE	Con	neo	cted	0	rga	niz	ati	on,	Af	filia	atec	I C	om	nmi	ttee	e, J	loiı	nt F	u	ndr	ais	ing	Re	epre	ese	enta	ativ	e, c	or∣	Lea	de	rshij	ρI	PAC	Sp	pon	ISO	r
	Mailing Addres	s														1																							
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	Relationship:		Con	nec	ted	Orę	gan	izat	ion	C	/	Affili	ate	d C	Drga	aniz	atio	n	C]	Joir	nt F	unc	Irais	sing	Re	epre	ese	ntat	ive			Lea	ade	ershi	рР	PAC	Sp	onso

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

ter Maat, N	ichael, , ,
Full Name	
Mailing Address	700 Skipjack Road
	Kinsale VA 22488
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 954 - 547 - 8996

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	ter Maat, Michael, , ,
of Treasurer	
Mailing Address	700 Skipjack Road
	Kinsale VA 22488
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Treasurer	Telephone number

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Full Name of Designated Agent	ter Maat, Michael, , ,	
Mailing Address	700 Skipjack Road	
	Kinsale VA 22488	
	CITY A STATE A ZI	P CODE 🔺
Title or Position	▼	
Agent	Telephone number	7 8996

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.

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Mailing Address			66	00 .	Taf	t Str	reet	t I																											
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Name of Bank, [ory, e	etc.		1		1	1	1			[
Mailing Address																																			
		CITY 🔺													STATE A							ZIP CODE													