

For help completing Form 1, please double-click the

icon next to each line number.

**FEC  
FORM 1**

**STATEMENT OF  
ORGANIZATION**

RECEIVED  
FEC MAIL CENTER  
2015 OCT 22 AM 11:40

Office Use Only

1. NAME OF  
COMMITTEE (in full)

☐

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

Brian Topping for President

ADDRESS (number and street)

1818 Leland Rd

☐

(Check if address  
is changed)

Kimball

MI

48074

2713

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐

(Check if address  
is changed)

briantoppingforpresident@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address  
is changed)

2. DATE

10<sup>th</sup> 20<sup>th</sup> 2015

3. FEC IDENTIFICATION NUMBER

C

4. 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.

Type or Print Name of Treasurer

Brian Keith Topping

Signature of Treasurer



Date

10<sup>th</sup> 20<sup>th</sup> 2015

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  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

**FEC FORM 1**  
(Revised 02/2009)

## 5. 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 candidate information below.)

Name of Candidate

Brian Keith Topping

Candidate  
Party Affiliation

W

Office  
Sought:☐

House

☐

Senate

☒

President

State

☐

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 or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party 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.)

**Joint Fundraising Representative:**

- (g) ☐ 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.
- (h) 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**

1.	<input type="checkbox"/>	FEC ID number	C <input type="checkbox"/>
2.	<input type="checkbox"/>	FEC ID number	C <input type="checkbox"/>
3.	<input type="checkbox"/>	FEC ID number	C <input type="checkbox"/>
4.	<input type="checkbox"/>	FEC ID number	C <input type="checkbox"/>

2015-10-10 10:00:00 AM

Write or Type Committee Name

Brian Topping for President

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

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

Full Name

Brian Keith Topping

Mailing Address

1818 Leland Rd

Kimball

MI

48074

- 2713

Title or Position

CITY

STATE

ZIP CODE

Candidate

Telephone number

810

- 882

- 9612

## 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  
of Treasurer

Brian Keith Topping

Mailing Address

1818 Leland Rd

Kimball

MI

48074

- 2713

Title or Position

CITY

STATE

ZIP CODE

Candidate

Telephone number

810

- 882

- 9612

Full Name of  
Designated  
Agent

Kathleen Topping

Mailing Address

3759 Salemwalk

Northbrook

CITY

IL

STATE

60062

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

224 - 639 - 5060

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.

Flagstar Bank

Mailing Address

34680 23 Mile Rd

Chesterfield

CITY

MI

STATE

48047

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE


ZIP CODE

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
 PREPARER  
 (3/2015)

10/22/15  
 DATE PREPARED

2015-10-22 03:00:48