Image# 202111109468474494				PAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ		04	ce Use Only
1. NAME OF	(Check if name	Example:If typing, type		
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
Huwaida for Cor	ngress			
ADDRESS (number and street)	555 Horace Brown Dr			
(Check if address	Suite 1			
is changed)	Madison Heights	· · · · · · · · · · · · · · · · · · ·	MI 4807	1
			L⊥⊥ L⊥ STATE ▲	
	ESS			
	arraf@nextlevelpartne	rs net		
(Check if address is changed)				
	Optional Second E-Mail Ad	dress		
 (Check if address is changed) 	https://www.huwaidaforcongr			
	10 ⁷ Y Y Y Y 2021			
3. FEC IDENTIFICATION 1	NUMBER ► C C	00793943		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
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 Treasu	rer May, Jennifer, , ,			
Signature of Treasurer	y, Jennifer, , ,	[Electronically Filed]	Date 11	10 / Y Y Y Y 2021
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED W		penalties of 2 U.S.C. §437g
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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		OMMITTEE	
Car	ndidate	e 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. (Comp information below.)	lete the candidate
	ne of didate	Arraf, Huwaida, , ,	
	didate y Affiliati	on DEM Office Sought: X House Senate President	State MI District 10
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Par	ty Con	nmittee:	
(d)			Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	nected 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 seg committee. (i.e., nonconnected committee)	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.)	
Join	nt Func	Iraising 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.	o 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
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.		
	4.		

FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

Huwaida for Congress

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 J	oint Fundraising Representat	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.

May, Jenn	ifer, , ,
Full Name	
Mailing Address	555 Horace Brown Dr
	Suite 1
	Madison Heights MI 48071
Title or Position	CITY STATE ZIP CODE
Treasurer	202 505 1657 Telephone number 1 1

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	May, Jennifer, , ,
Mailing Address	555 Horace Brown Dr
	Suite 1
	Madison Heights
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 202 505 1657

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent								ĺ																	1		
Mailing Address																											
						1											L			L			1			1	
								CIT	Y								ST	ATE				ZI	р С	COD	θE		
Title or Position																											
												Tele	eph	ione	e ni	uml	ber										

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.

	Bank of America	
Mailing Address	55 W 12 Mile Rd	
	Madison Heights	MI 48071
	CITY	STATE ZIP CODE
Name of Bank, D	Jepository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE