

FEC FORM 1

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

Michigan Bankers Association - MIBANKPAC - FEDERAL

ADDRESS (number and street) 507 S Grand Ave Suite 320 Lansing MI 48933-2405 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Check if address is changed) outsourcing@aristotle.com Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed)

2. DATE 12 / 16 / 2021

3. FEC IDENTIFICATION NUMBER C C00080648

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 Herndon, Patricia, , ,

Signature of Treasurer Herndon, Patricia, , , [Electronically Filed] Date 12 / 16 / 2021

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.

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 _____

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 _____

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. _____ FEC ID number C _____
2. _____ FEC ID number C _____
3. _____ FEC ID number C _____
4. _____ FEC ID number C _____

Write or Type Committee Name

Michigan Bankers Association - MIBANKPAC - FEDERAL

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

ABA-BankPAC

Mailing Address

1120 Connecticut Ave., NW

Washington

DC

20036-

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 Phillips, Justin, , ,

Mailing Address 205 Pennsylvania Ave SE

Washington

DC

20003-1164

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number 202 - 543 - 8345

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 Herndon, Patricia, , ,

Mailing Address 507 S Grand Ave

Lansing

MI

48933-2405

CITY

STATE

ZIP CODE

Title or Position Treasurer

Telephone number 517 - 342 - 9067

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3 - City]

[Grid for Mailing Address Line 3 - State]

[Grid for Mailing Address Line 3 - ZIP Code]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

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.

Comerica Bank

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1: PO Box 75000]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3 - City: Detroit]

[Grid for Mailing Address Line 3 - State: MI]

[Grid for Mailing Address Line 3 - ZIP Code: 48275]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3 - City]

[Grid for Mailing Address Line 3 - State]

[Grid for Mailing Address Line 3 - ZIP Code]

CITY

STATE

ZIP CODE

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1N
Transaction ID :

Updating committee contact information

Form/Schedule:
Transaction ID:

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h). Joint Fundraising Participant:

1. [] FEC ID number C []
2. [] FEC ID number C []
3. [] FEC ID number C []
4. [] FEC ID number C []

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

Michigan Banker's Association

Mailing Address 507 S Grand Ave
Lansing MI 48933-2405
Relationship: CITY STATE ZIP CODE

[x] Connected Organization [] Affiliated Committee [] Joint Fundraising Representative [] Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name []
Mailing Address []
TITLE OR POSITION CITY STATE ZIP CODE
Telephone Number []

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. []
Mailing Address []
CITY STATE ZIP CODE