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FEC FORM 1		STATEMI ORGANI	-		PAGE 1 / 4
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Saad for Co	ongres	S			
ADDRESS (number a	nd street)	PO Box 90			
(Check if a	address				
is changed	(b)	Northville CITY ▲		MI STATE ▲	48168 
COMMITTEE'S E-MA	AIL ADDRES	S			
(Check if a is changed		jon@fayrouzsaad.co	<b>om</b>		
	~)	Optional Second E-Mail	Address		
COMMITTEE'S WEB	address	RESS (URL)			
2. DATE 0	7 <sup>/</sup> 18	2017			
3. FEC IDENTIFIC	CATION NU	MBER ► C	C00650804		
4. IS THIS STATEM	MENT X	NEW (N) OR	AMENDED (A)		
I certify that I have e	examined thi	s Statement and to the b	est of my knowledge and belief it	t is true, correct	and complete.
Type or Print Name	of Treasurer	McCall, Jessica, , ,			
Signature of Treasure	er <i>McCall</i>	l, Jessica, , ,	[Electronically Filed]	Date 07	/ D D / Y Y Y Y 18 2017
NOTE: Submission of			ion may subject the person signing ATION SHOULD BE REPORTED V		the penalties of 2 U.S.C. §437g.
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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	FE	EC For	m 1 (Revised 02/2009)	Page <b>2</b>
T	YPE	OF CO	DMMITTEE	
С	and	idate	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. (Complinformation below.)	ete the candidate
	ame andid		Saad, Fayrouz, , ,	
	andid arty A	late Affiliatic	n DEM Office Sought: X House Senate President	State MI District 11
(c	)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ame andid			
Ρ	arty	Com	mittee:	
(d	)			Democratic, epublican, etc.) Party.
Ρ	oliti	cal A	ction Committee (PAC):	
(e	)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected 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)	regated 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.)	
Jo	oint	Fund	raising 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.	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.	or more political
		Comr	nittees Participating in Joint Fundraiser	
		1.	FEC ID number	
		2.	FEC ID number	
		3.	FEC ID number	
		4.		

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Write or Type Committee Name

Saad for Congre	ess					
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fu	Indraising Representative, or Lead	ership 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.						
McCall, Jes						
Mailing Address	28590 Green Willow Rd					
	Farmington Hills	MI4833				
Title or Position	CITY	STATE	ZIP CODE			
		Telephone number				

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	McCall, Jessica, , ,
Mailing Address	28590 Green Willow Rd
	Farmington Hills      MI      48331      –
	CITY STATE ZIP CODE
Title or Position	
	Telephone number

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Full Name of Designated Agent	Murray, Jonathan, , ,
-	1701 16th St NW
Mailing Address	
	apt 707
	Washington      DC      20009
	CITY STATE ZIP CODE
Title or Position	
	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.

Flagsta	ar Bank					
Mailing Address	50 Woodward					
	Suite 100					
			MI 48220	6		
	CIT	ΤY	STATE	ZIP CODE		
Name of Bank, Depository,	Name of Bank, Depository, etc.					
Mailing Address						
	CIT	ТҮ	STATE	ZIP CODE		