Image# 202209289532001622				PAGE 1 / 5
FEC FORM 1	STATEMEN ORGANIZA	_		
			0	ffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Michigan Pipe Trades As	ssociation Independent E	Expenditure Committee ((MPAC) Indeper	ndent Expenditure Co _l
	17920 Jackson Rd. Ste. B			
ADDRESS (number and street)				
 (Check if address is changed) 				
	Ann Arbor		MI 481	103-
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address is changed)	outsourcing@aristotle.	com		
	Optional Second E-Mail Add	dress		
(Check if address is changed)				
	10 / Y Y Y Y 2022			
3. FEC IDENTIFICATION N	UMBER ► C co	00555094		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	is true, correct and	l complete.
Type or Print Name of Treasure	er Whitaker , Randall, , ,			
Signature of Treasurer	aker , Randall, , ,	[Electronically Filed]	Date 09	28 / Y Y Y Y Y 28 2022
NOTE: Submission of false, erron		may subject the person signing t		penalties of 52 U.S.C. §30109
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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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. (Complet information below.)	e the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee: (National, State (Democratic committee is a or subordinate) committee of the (d) This committee is a Image: Committee of the or subordinate) committee of the or subordinate) committee of the or subordinate)	cratic, ican, etc.) Party
Political Action Committee (PAC):	
(e) x This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a:
Corporation Corporation w/o Capital Stock Lab	or Organization
	perative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segrement committee. (i.e., nonconnected committee)	gated 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 (Hybri	d PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	

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.

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

(i)

(j)

1.	L															С				
2.	L															С				

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V	Irite or Type Committee Nam			
	Michigan Pipe Trades	Association Independent Expenditure Committee ((MPAC) Independent Ex	kpenditure Co
6.	Name of Any Connected Michigan Pipe Trad	rganization, Affiliated Committee, Joint Fundraising Re	presentative, or Leadership	o PAC Sponsor
	Mailing Address	7920 Jackson Rd B		
		Ann Arbor	MI 48103-959	4
			STATE 🔺 ZI	P CODE 🔺

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

Phillips, Ju	stin, , ,
Full Name	
Mailing Address	205 Pennsylvania Ave SE
	<u> </u>
	Washington DC 20003-1164
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
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	Whitaker, Randall, , ,
of Treasurer	
Mailing Address	7920 Jackson Rd b
	Ann Arbor MI 48103-9594 –
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image:

FEC Form 1 (Revised 02)2/2(009)																			F	Pag	e 4	۱ ــــــــــــــــــــــــــــــــــــ		
Full Name of Designated Agent										ĺ									ĺ							1	
Mailing Address																											
																								L			
						Cľ	ΤY								:	ST/	ΛTE				ZI	РC		ЭЕ			
Title or Position ▼																											
											Tele	eph	ione	e n	umł	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.

C	helsea State Bank		1
Mailing Address	1010 S Main St.		
	Chelsea	MI 48118	3
	CITY A	STATE A	ZIP CODE
Name of Bank, Dep	ository, etc.		
Mailing Address			
	CITY A	STATE A	ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

updating treasurer, address, and bank account information.

Form/Schedule: Transaction ID: