Only

PAGE 1 / 11 =

FEC FORM 1			RGANI					Office Use	Only		•
1. NAME OF COMMITTEE (ir	n full)		(Check if name s changed)		nple:If typing, type the lines.) 12F	E4M5		1		
Michigan R										1 1 1	₁ 1
							1 1 1		1 1		
ADDRESS (number a	nd street)	520 Seyı	mour Avenue								
(Check if a is changed											
io difaligot	-,	Lansing				MI	4	8933-			
		С	ITY ▲			STAT	E▲		ZIP C	DDE▲	
COMMITTEE'S E-MA	AIL ADDRI										
		htow@	migop.org								
		Optional	Second E-Mail	Address							
COMMITTEE'S WEB (Check if a is changed	address	www.mig	•								
2. DATE 0		9 / Y	y y y 2021								
3. FEC IDENTIFIC	CATION N	UMBER	C	C00041160							
4. IS THIS STATEM	MENT	NEW	(N) OR	×	AMENDED (A	A)					
certify that I have e	examined	his Stateme	ent and to the b	est of my k	nowledge and beli	ef it is true,	correct a	nd comp	ete.		
Type or Print Name	of Treasure	er Meyers,	Carl, , Mr.,								
Signature of Treasure	er <i>Mey</i>	ers, Carl, , Mi	-,		[Electronically Filed]	Date	M M 01	26	D /	2021	YYY
NOTE: Submission of	false, error			-	ect the person sign	_		ne penalti	es of 2	U.S.C. §	437g.
Office Use					For further informati Federal Election Com Toll Free 800-424-953	mission			FOR		

Toll Free 800-424-9530

Local 202-694-1100

ı	FEC Fo i	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE 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. (Cominformation below.)	plete the candidate
Name Cand	e of didate		
	didate / Affiliation	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Part	ty Con	nmittee: (National, State	(Democratic,
(d)	×	CTA CTA	Republican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected organization is
		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 secommittee. (i.e., nonconnected committee)	egregated 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	t Fund	raising Representative:	
(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to	vo or more political
(h)		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 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.		
	3.	FEC ID number C	
	4.	FEC ID number C	

Write or Type Committee Name Michigan Republican Party 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Protect the House PO Box 30844 Mailing Address PO Box 30844 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. Tow, Henrietta, L, Mrs., Full Name 520 Seymour Ave Mailing Address
Michigan Republican Party 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Protect the House PO Box 30844 Mailing Address PO Box 30844 CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of common books and records. Tow, Henrietta, L, Mrs., Full Name Tow, Henrietta, L, Mrs., 520 Seymour Ave
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Protect the House MD 20824-0844 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. Tow, Henrietta, L, Mrs., Full Name 520 Seymour Ave
Protect the House Mailing Address PO Box 30844 Milling Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commobooks and records. Tow, Henrietta, L, Mrs., Full Name Tow, Henrietta, L, Mrs., 520 Seymour Ave
PO Box 30844 Mailing Address Bethesda CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp Tow, Henrietta, L, Mrs., Full Name 1520 Seymour Ave
Mailing Address Bethesda CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commbooks and records. Tow, Henrietta, L, Mrs., Full Name 520 Seymour Ave
Mailing Address Bethesda CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commbooks and records. Tow, Henrietta, L, Mrs., Full Name 520 Seymour Ave
Mailing Address Bethesda CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commbooks and records. Tow, Henrietta, L, Mrs., Full Name 520 Seymour Ave
CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commbooks and records. Tow, Henrietta, L, Mrs., Full Name
CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sp. 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commbooks and records. Tow, Henrietta, L, Mrs., Full Name
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Specific Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of common books and records. Tow, Henrietta, L, Mrs., Full Name 1520 Seymour Ave
7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commodoks and records. Tow, Henrietta, L, Mrs., Full Name 1520 Seymour Ave
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books and records. Tow, Henrietta, L, Mrs., Full Name
books and records. Tow, Henrietta, L, Mrs., Full Name
Full Name
520 Seymour Ave
Lansing MI 48933-1118
Title or Position CITY STATE ZIP CODE
Custodian of Records
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer).
Full Name Meyers, Carl, , Mr.,
of Treasurer
Mailing Address 520 Seymour Ave
Lansing
CITY STATE ZIP CODE Title or Position

FEC Form	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	<u> </u>	·
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number =	
Banks or Other safety deposit boo Name of Bank, D		accounts, rents
	Capital One Bank	
Mailing Address	4825 Cordell Ave.	
	Bethesda MA 20814	
	CITY STATE	ZIP CODE
Name of Bank, D	repository, etc.	
	Chain Bridge Bank	
Mailing Address		
	Malaca	
	McLean VA 22101	

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	PO Box 27363		
	Lansing		48909-7363
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	ative Leadership PAC Sponso
Designated Agent: Identify	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. ica Bank	ephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching and the position of Bank, Comer	CITY CITY Tele ries: List all banks or other depositories in which the intains funds.	ephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main the safety deposit boxes or main the safety deposit boxes or main the safety depository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. ica Bank 2615 Lake Lansing	ephone Number	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main the safety deposit boxes or main the safety deposit boxes or main the safety depository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. ica Bank	ephone Number	

FEC Form 1S (Revised 02/2017)

safety deposit boxes or ma			Telephone Number	sits funds, holds accounts, rents
Banks or Other Depositors afety deposit boxes or many Name of Bank, Depository, etc.	intains funds. Fargo Bank			sits funds, holds accounts, rents
Banks or Other Depositor safety deposit boxes or ma	intains funds.	r other depositories in which		sits funds, holds accounts, rents
TITLE OR POSITION			Telephone Number	
TITLE OR POSITION				
	▼	CITY ▲	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
Designated Agent: Identify	by name, address ((phone number – optional)		
Connected	I Organization	Affiliated Committee	int Fundraising Represer	ntative Leadership PAC Spo
Relationship:		CITY A	STATE A	ZIP CODE ▲
	Bethesda		, MD ,	20824-0844
Mailing Address	PO Box 30844			
Take Back the Ho	use 2020 			
	=	ated Committee, Joint Fur	ndraising Representati	ve, or Leadership PAC Sponso
4			FEC ID number	C
J			FEC ID number	
3.			FEC ID number	
2.			FEC ID number	C

FEC Form 1S (Revised 02/2017)

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	C
4.			FEC ID number	С
	of Any Connected On in 2020	rganization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
N	Mailing Address	320 First Street Southweast		
		Washington	ı DCı	20003-1838
F	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected (Organization Affiliated Committee X Joint F	Fundraising Representa	
		by name, address (phone number – optional)		
Ful	II Name	oy name, address (phone number – optional)		
Ful		oy name, address (phone number – optional)		
Ful	II Name	by name, address (phone number – optional)		
Ful Ma	II Name	CITY	STATE A	ZIP CODE A
Ful Ma	II Name	CITY A	STATE A	ZIP CODE A
Ful Ma Ti 9. Banks safety Name Deposi	ailing Address ITLE OR POSITION or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY Tele	ephone Number	
Ful Ma Ti 9. Banks safety Name Deposi	II Nameailing Address ITLE OR POSITION or Other Depositoric deposit boxes or main of Bank,	CITY Tele	ephone Number	
Ful Ma Ti 9. Banks safety Name Deposi	ailing Address ITLE OR POSITION or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY Tele	ephone Number	

FEC Form 1S (Revised 02/2017)

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

h). Joint Fundraisi		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
NRSC Targeted	State victory		
Mailing Address	PO Box 60148		
Maining Address			
	Washington	, DC	20039-0148
Relationship:	CITY A	STATE ▲	ZIP CODE A
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC St
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee	Fundraising Representa	Leadership PAC S
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esignated Agent: Identi		Fundraising Representation	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
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FEC Form 1S (Revised 02/2017)

Name of Bank, Depository, etc. Mailing Address					
Banks or Other Depositor safety deposit boxes or ma		nks or other depositories in	n which the commi	ttee deposit	s funds, holds accounts, rents
			Telephone N	lumber	
TITLE OR POSITION	▼	CITY A		STATE A	ZIP CODE ▲
Mailing Address					
Full Name					
Designated Agent: Identify	by name, addr	ress (phone number – opti	onal)		
Connected	Organization	Affiliated Committee	✗ Joint Fundraisin	g Represent	ative Leadership PAC Spor
Relationship:		CITY ▲		STATE A	ZIP CODE ▲
	Beverly	5.1001, 2110 1 1001		ı MA ı	, 01915-1666
Mailing Address	C/O Red Cur	ve Solutions Street, 2nd Floor			
	0/0.5.10	21.			
Name of Any Connected	Organization, <i>A</i>	Affiliated Committee, Join	nt Fundraising Re	presentativ	e, or Leadership PAC Sponso
4			FEC II	O number	C
3.				O number	C
2.				O number	C
_			FEC II	O number	C

FEC Form 1S (Revised 02/2017) for

Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or ma ame of Bank, epository, etc. Mailing Address	▼ ries: List all ban	CITY A		Telephone No		ZIP CODE A ts funds, holds accounts, rent
Mailing Address TITLE OR POSITION anks or Other Depositor aftety deposit boxes or material deposit boxes or material depository, etc.	▼ ries: List all ban	CITY A		Telephone No	umber	ZIP CODE ▲
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Mailing Address TITLE OR POSITION	▼ ries: List all ban	CITY A		Telephone No	umber	ZIP CODE ▲
Mailing Address						
Mailing Address						
Mailing Address					STATE A	
Full Name						
esignated Agent: Identify						
Connected	d Organization	Affiliated Commi	tee 🗶 .loi	nt Fundraising	Represent	ative Leadership PAC Sp
Relationship:		CITY A			STATE A	ZIP CODE A
	Beverly				MA I	01915-1665
3	138 Conant S	Street				
Mailing Address	C/) Red Curve	e 				
Take Flight Comm	nittee, Inc.					
		ffiliated Committe	e, Joint Fund	Iraising Rep	resentativ	e, or Leadership PAC Spon
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					number	C
				EEC ID	number	C
3.				I LO ID	Hullibel	C
				FEC ID	number	

FEC Form 1S (Revised 02/2017)

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

h). Joint Fundraisi	ng raitioipanti		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
Take Back the He	ouse 2022 		
	PO Box 30844		
Mailing Address			
	Bethesda	MD MD	20824-0844
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	oint Fundraising Represen	tative Leadership PAC Si
		oint Fundraising Represen	tative Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee X J		tative Leadership PAC S
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