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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) JAFFE, RAITT, HEUER & WEISS POLITICAL COMMITTEE 27777 FRANKLIN ROAD ADDRESS (number and street) **SUITE 2500** (Check if address is changed) SOUTHFIELD 48034 MI CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS SLICHTERMAN@JAFFELAW.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00202085 FEC IDENTIFICATION NUMBER > 3. X 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. LICHTERMAN, SUSAN, , , Type or Print Name of Treasurer LICHTERMAN, SUSAN, , , [Electronically Filed] 04 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530 Local 202-694-1100

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TYPE OF COMMITTEE:						
andidate Committee:						
(a) This committee is a principal campaign committee. (Complete the candidate info	ermation below.)					
(b) This committee is an authorized committee, and is NOT a principal campaign coinformation below.)	ommittee. (Complete the candidate					
Name of Candidate ''', ''', ''', ''', ''', ''', ''', ''						
Candidate Party Affiliation Office Sought: House Senate	President District					
(c) This committee supports/opposes only one candidate, and is NOT an authorized	d 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 of	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 committee. (i.e., nonconnected committee)	Γ a separate segregated fund or party					
In addition, this committee is a Lobbyist/Registrant PAC.						
In addition, this committee is a Leadership PAC. (Identify sponsor on I	ine 6.)					
(g) This committee is an independent expenditure-only political committee (Super PA	AC).					
In addition, this committee is a Lobbyist/Registrant PAC.						
(h) This committee is a political committee with both contribution and non-contribution	on accounts (Hybrid PAC).					
In addition, this committee is a Lobbyist/Registrant PAC.						
Joint Fundraising Representative:						
(i) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, at least one of which is an authorized committee of a	·					
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, none of which is an authorized committee of a federal candidate.						
Committees Participating in Joint Fundraiser						
1.	C					
	C					

Title or Position ▼

TREASURER

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٧	Vrite or Type Committee Name		
	JAFFE, RAITT	, HEUER & WEISS POLITICAL COMMITTI	EE
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leade A HOLLISTER LLP POLITICAL ACTION COMMITTEE	
	Mailing Address	200 MASSACHUSETTS AVE NW	
		SUITE 500	
		WASHINGTON DC 20001	-5875
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
7.	books and records.	ify by name, address (phone number optional) and position of the person in posses	ssion of committee
	Adams, Scr Full Name	xt, , ,	
	Mailing Address	27777 Franklin Road	
		Southfield MI 48034	·
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Director of Finance		727 - 1405
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
	Full Name LICHTERM	AN, SUSAN, , ,	
	of Treasurer		
	Mailing Address	27777 FRANKLIN ROAD	
		SUITE 2500	
		SOUTHFIELD MI 48034	·
		CITY ▲ STATE ▲	ZIP CODE ▲

248

Telephone number

1423

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Full Name of Designated	(101000 02,2000)		
Agent			
Mailing Address			
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
	Telephone n	umber	
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the comm es or maintains funds.	ittee deposits f	unds, holds accounts, rents
Name of Bank, D	epository, etc.		
	BANK OF AMERICA		
Mailing Address	2600 WEST BIG BEAVER ROAD		
	TROY	MI	48084
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲