FEC

STATEMENT OF

FORM 1	ORGANIZAT	TON		
1 0111111 1	(See instructions)			Office use only
NAME OF COMMITTEE (in f	ull) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Jay Riemersm	a for Congress Campaign Committe	ee 		
ADDRESS (number and s	PO Box 1467			
(Check if address				
is changed)	Holland		LMI L	49422 1467
	CIT	TY▲	STATE	ZIP CODE 📥
COMMITTEE'S E-MAII	ADDRESS (Please provide only one e-mail			
(Check if address is changed)	ijelgerhuis@jayriemers	ma.com 		
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
(Check if address	www.jayriemersma.com			
is changed)				
2. DATE 0.4	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		1	
3. FEC IDENTIFICATION	TION NUMBER C	C00462283		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of my knowled	dge and belief it is true, correct an	d complete	
Torre or Dist Name of S	Freasurer John Faber			
Type or Print Name of	reasurer			
Signature of Treasurer	Electronically Filed by John Faber		Date 0 4	D 26 / Y Y Y O 10
NOTE: Submission of fals	se, erroneous, or incomplete information may sub			es of 2 U.S.C. §437g.
Office		For further information of		
Use Only		Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

		FEC F	Form 1 (Revised 02/2009)	Page 2						
5.	TYPE	OF CC	DMMITTEE (Check One)							
	Cand	Candidate Committee:								
	(a)	X	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 Cand		Jay Riemersma							
	Cand Party	idate Affiliatio	on REP Office X House Senate President	State MI District 02						
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District						
	Name Cand									
	Party	Comm								
	(d)		(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.						
	Politi	cal Act	tion Committee (PAC):							
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	cted 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 segrega committee. (i.e., nonconnected committee)	ated 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.)										
Joint Fundraising 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						
		Comi	mittees Participating in Joint Fundraiser							
			1.							
			2 FEC ID number C							
			3. FEC ID number							
			4 FEC ID number C							

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Write or Type Committee Name			
Jay Riemersma for Con	gress Campaign Committee		
6. Name of Any Connected Org	panization, Affiliated Committee, Joint F	Fundraising Representative, or L	eadership PAC Sponsor
NONE			
Mailing Address	<u> </u>		
	<u> </u>		
		<u>MI</u>	00000 _ _
	CITY	STATE ▲	ZIP CODE
Relationship:			_
Connected Organization	Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
7. Custodian of Records: Ide possession of Committee Full Name		nber optional), and position	of the person in
Mailing Address	391 Blue Isle Drive		
	Holland		49424 _ 1397
Title or Position ♥	CITY A	STATE	ZIP CODE A
Treasurer		Telephone number	
	and address (phone number optio designated agent (e.g., assistant tro aber		nmittee; and the
Mailing Address	391 Blue Isle Drive		
	Holland		49424 _ 1397
Title or Position ♥	CITY A	STATE▲	ZIP CODE A
Treasurer		Telephone number	

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	Full Name of Designated Agent	Brian Cannon			
	Mailing Address	210 Central Avenue			
		# 210			
		Holland	<u>MI</u>	49423 – 3118	
	Title or Position ▼	CITY A	STATE A	ZIP CODE A	
	As	Telephone	e number		
9.	Banks or Other Do safety deposit boxe Name of Bank, Dep	ittee deposits funds, ho	ulds accounts, rents		
	Moiling Address	The Bank of Holland 150 Central Avenue			
	Mailing Address				
		Holland	MI	49423 _ 2832	
		CITY 🗖	STATE △	ZIP CODE 🛕	
	Name of Bank, Dep	pository, etc.			
	Mailing Address				
		CITY 🙇	STATE. △	ZIP CODE 🛕	