

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

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FEC Office Use Only CENTER

1. NAME OF COMMITTEE (in full) X (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

MIKE O'BRIEN FOR CONGRESS

ADDRESS (number and street) PO BOX 666

(Check if address is changed)

DOUGLAS MI 49406

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

mikeobrienforcongress@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

mikeobrienforcongress.com

2. DATE 06 ' 17 ' 2012

3. FEC IDENTIFICATION NUMBER C00519892

4. IS THIS STATEMENT NEW (N) OR X 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.

Type or Print Name of Treasurer Julianne Fletcher

Signature of Treasurer Julianne Fletcher

Date 06 ' 17 ' 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Table with 5 columns and 1 row, labeled 'Office Use Only'.

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

FEC FORM 1 (Revised 02/2009)

12030824765

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for 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.

Full Name

MIKE O'BRIEN

Mailing Address

PO BOX 566

DOUGLASS

MI

49406

Title or Position

CITY

STATE

ZIP CODE

Candidate

Telephone number

269-397-0643

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

JULIANNE FLETCHER

Mailing Address

PO BOX 1299

Saugatuck

MI

49453

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

517-290-3204

12030824767

Full Name of Designated Agent

Keith Charam

Mailing Address

P.O. Box 566

Douglas

CITY

MI

STATE

49406

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

12030824768

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.

Macatawa Bank

Mailing Address

P.O. Box 3119

Holland

CITY

MI

STATE

49422

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |

[Signature]
PREPARER

7/2/12
DATE PREPARED