FEC FORM 1	STATEMEN ORGANIZA		PAGE 1 / 4		
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
ADDRESS (number and str	PO BOX 252722		<u> </u>		
(Check if addre is changed)			MI 48325 STATE ▲ ZIP CODE ▲		
COMMITTEE'S E-MAIL A	DDRESS				
(Check if address is changed)		NFORCONGRESS@YAHO			
	Optional Second E-Mail Add	ress			
COMMITTEE'S WEB PAG (Check if addre is changed)					
2. DATE 09	01 / Y Y Y Y 01 2015				
3. FEC IDENTIFICATIO	ON NUMBER ► C CO	0585752			
4. 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.					
Type or Print Name of Treasurer					
Signature of Treasurer	Terrance Morrison	[Electronically Filed]	Date 09 02 2015		
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.					
Office Use Only		For further information con Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100			

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5. TYPE OF COMMITTEE					
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 of Candidate					
	Candio Party	date Affiliatio	on DEM Office Sought: X House Senate President	State District	MI 14
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name Candio				
	Party	y Com	imittee:		
	(d)			Democratic, epublican, etc.)	Party.
	Politi	ical A	ction Committee (PAC):		
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organizati	on is a:
			Corporation Corporation w/o Capital Stock	Labor Organiza	tion
			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 seg committee. (i.e., nonconnected committee)	regated 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	Fund	raising 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.	o or more politica	ıl
	(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 politica	I
	Committees Participating in Joint Fundraiser				
		1.	FEC ID number		
		2.	FEC ID number		
		3.	FEC ID number		
		4.	FEC ID number		

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Write or Type Committee Name

TERRANCE MORRISON FOR CONGRESS

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

N	ONE				
	Mailing Address				
		CITY		STATE	ZIP CODE
	Relationship: Connected	Organization Affiliated Comn	nittee Joint Fundrais	sing Representative	Leadership PAC Sponsor
7.	Custodian of Records: Iden books and records.	tify by name, address (phone nu	mber optional) and po	osition of the person in	possession of committee
	Terrance M Full Name	1orrison			
	Mailing Address	PO Box 252722			
		West Bloomfield		MI 4832	25
	Title or Position	CITY		STATE	ZIP CODE
	Treasurer		Telephone	number 248 –	462 - 0858

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	Terrance Morrison
of Treasurer	
Mailing Address	PO Box 252722
	[
	West Bloomfield MI 48325
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent	
Mailing Address	PO Box 252722
	West Bloomfield
	CITY STATE ZIP CODE
Title or Position	Jrer

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.

First In	dependence Bank		
Mailing Address	44 Michigan Avenue		
		MI	48226
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE