FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

NAME OF COMMITTEE (in full)		Check if name s changed)	Example: If typing, type over the lines.	12FE4M5		
TERRANCE MORRISON F	DR CON	GRESS				
	<u> </u>	 				
ADDRESS (number and street)	РО ВС	X 252722				
(Check if address is changed)						
		ŖĿϘΟΜϜΙĘĿD ITY ▲		M 48325		
COMMITTEE'S E-MAIL ADDRE	SS .					
(Check if address is changed) TERRANCEMORRISONFORCONGRESS@YAHOO.COM						
	Optional	Second E-Mail Ad	dress	ı		
,	<u> </u>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
COMMITTEE'S WEB PAGE ADI	DRESS (U	RL)				
(Check if address is changed)						
		•				
2. DATE 07 27	⁰ / 20	19				
3. FEC IDENTIFICATION N	JMBER	C		, · .		
4. IS THIS STATEMENT	NEW	(N) OR	AMENDED (A)			
I certify that I have examined the	is Statem	ent and to the best	of my knowledge and belief	it is true, correct and complete.		
Type or Print Name of Treasure	TER	RANCE MORE	RISON			
Signature of Treasurer	hi	ance	horres	Date 07 27 2019		
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.						
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	FFL. FLIBIVI L		

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		OMMITTEE e 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. (Complete information below.)	the candidate
Name Candi		TERRANCE, MORRISON	<u> </u>
Candid Party	date Affiliatio	on DEM Sought: X House Senate President	State MI MI District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Party	y Com	nmittee:	er a ser see se
(d)			nocratic, ablican, etc.) Party
Polit	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
		Corporation Corporation w/o Capital Stock	oor Organization
		Membership Organization Trade Association Co	operative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg 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	Fund	draising Representative:	THE RESERVE OF THE PERSON OF T
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number C	
	3.	FEC ID number C	
	4.		

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Write or Type Committee I	lame	
ERRANCE MORRI	SON FOR CONGRESS	
Name of Any Connec	ed Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
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ифи <u>Е </u>		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conr	ected Organization Affiliated Committee Joint Fundraising Represent	tative: Leadership PAC Sponsor
Custodian of Records	Identify by name, address (phone number optional) and position of the	person in possession of committee
books and records.	, , , , , , , , , , , , , , , , , , , ,	,
ITER	RANÇE, MORRISON , , , , , , , , , , , , , , , , , , ,	
r un ivame	PO BOX 252722	<u>. </u>
Mailing Address	1	
	WEST BLOOMFIELD	48325
Title or Position	CITY STATE	ZIP CODE
TREASURER	1 12.	48 _ 462 _ 0858
[ITEMODINEIR]	Telephone number	40 - 402 - 0030
Treasurer: List the nam	e and address (phone number optional) of the treasurer of the committee	e; and the name and address of
any designated agent (e		
Full Name of Treasurer TER	RANCE, MORRISON	
or freasurer	PO BOX 252722	
Mailing Address	<u> </u>	
	WEST BLOOMFIELD MI	48325 -
Title or Position	CITY STATE	ZIP CODE
TERASURER , ,	Telephone number	48 462 0858

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