**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. jerry topicz 3926 decourey ave ADDRESS (number and street) (Check if address is changed) covington 41015 KY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jerrytopicz@gmail.com (Check if address is changed) Optional Second E-Mail Address jerrytopicz@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00586784 FEC IDENTIFICATION NUMBER > 3. × 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. bryan weller Type or Print Name of Treasurer bryan weller [Electronically Filed] 09 2015 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

	EEC <b>Eo</b>	rm 1 (Paying 02/2000)	Page <b>2</b>
		omm 1 (Revised 02/2009) OMMITTEE	raye Z
		Committee:	
(a)	$\times$	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. (Corinformation below.)	nplete the candidate
Nam Cand	e of didate	jerry topicz	
	didate y Affiliati	on IDP Office Sought: House Senate X President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number C	
	4.		

	evised 02/2009)		Page <b>3</b>
Write or Type Committe	e Name		
jerry topicz			
. Name of Any Conn	ected Organization, Affiliated Committee, Jo	int Fundraising Representative, o	or Leadership PAC Sponsor
NONE			
Mailing Address			
			1
	CITY	STATE	ZIP CODE
Relationship: Co	onnected Organization Affiliated Committee	Joint Fundraising Representati	ve Leadership PAC Sponso
Custodian of Record books and records.	ds: Identify by name, address (phone number	optional) and position of the per	rson in possession of committe
bry Full Name	yan weller		
Mailing Address	117 n gorham		
maming radioses	1		
	jackson	MI	49202
Title or Position	CITY	STATE	ZIP CODE
		Telephone number 51	7 - 435 - 5066
Treasurer: List the na	ame and address (phone number optional) c : (e.g., assistant treasurer).	of the treasurer of the committee; a	and the name and address of
Full Name bry	ran weller		
oi ileasurei			
Mailing Address	117 n gorham		
	11/ n gorham		
	jackson	MI	49202
	[1	MI STATE	ZIP CODE

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Full Name of Designated		
Agent		
Mailing Address		
	OTTY STATE 7	
Title or Position	CITY STATE ZII	P CODE
	Depository, etc.	
Mailing Address	huntingtom  3600 latonia ave	
	3600 latonia ave	
	3600 latonia ave  covington  KY 41015	P CODE
	3600 latonia ave  covington  CITY  STATE  ZI	P CODE
Mailing Address	3600 latonia ave  covington  CITY  STATE  ZI	P CODE
Mailing Address	3600 latonia ave  covington  CITY  STATE  ZI  Depository, etc.	P CODE
Mailing Address  Name of Bank,	3600 latonia ave  covington  CITY  STATE  ZI  Depository, etc.	P CODE
Mailing Address  Name of Bank,	3600 latonia ave  covington  CITY  STATE  ZI  Depository, etc.	P CODE