FEC FORM 1	STATEMENT OF ORGANIZATION	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type over the lines.	12FE4M5
ADDRESS (number and street)	419 S. WASHINGTON	
(Check if address is changed)	SUITE 200	
is changed)		MI 48933
		STATE ZIP CODE
COMMITTEE'S E-MAIL ADDF	RESS	
(Check if address is changed)	workingmichinfo@gmail.com	
	Optional Second E-Mail Address	
COMMITTEE'S WEB PAGE A (Check if address is changed)		
	02 / Y Y Y Y 2020	
3. FEC IDENTIFICATION I	NUMBER ► C C00627240	
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	t is true, correct and complete.
Type or Print Name of Treasu	rer Pugh, Josh, , ,	
Signature of Treasurer	ph, Josh, , , [Electronically Filed]	Date 08 / 02 / 2020
NOTE: Submission of false, erro	neous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED V	
Office Use Only	For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	

08/02/2020 23 : 02

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FEC FC	Page 2
TYPE OF C	COMMITTEE
Candidate	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 the candidate information below.)
Name of Candidate	
Candidate Party Affiliat	ion Office Sought: House Senate President District
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Cor	nmittee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
	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:
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Corr	nmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

WORKING MICHIGAN (SUPERPAC)

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

	Mailing Address			
		CITY	S	TATE ZIP CODE
	Relationship: Connected	Organization Affiliated Committe	Joint Fundraising Rep	Dresentative Leadership PAC Sponsor
7.	Custodian of Records: Ident books and records.	tify by name, address (phone numbe	optional) and position o	of the person in possession of committee
	Full Name			
	Mailing Address			
	Title or Position	CITY	STA	ATE ZIP CODE
			Telephone number	
8.	Treasurer: List the name and any designated agent (e.g., a		of the treasurer of the con	nmittee; and the name and address of
	Full Name Pugh, Josh of Treasurer I	,,, 		
	Mailing Address	419 S Washington		
		Suite 200		
		Lansing CITY	ATS	MI 48933 – L
I	Title or Position Treasurer		Telephone number	517 - 618 - 1235

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent								1																		1		
Mailing Address																												
																		L			L							
							СІТ	ΓY										STA	ΛΤΕ				ZII	ΡC	COE	θE		
Title or Position																												
													Tele	eph	ione	e ni	umt	ber										

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.

Ν	ISU Federal Credit Union									
Mailing Address	1200 E Michigan									
	Ste 300									
	Lansing	MI	48912							
	CITY	STATE	ZIP CODE							
Name of Bank, Dep	Name of Bank, Depository, etc.									
L										
Mailing Address										
	CITY	STATE	ZIP CODE							