

## MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS ORIGINAL OR AMENDED STATEMENT OF ORGANIZATION FORM FOR CA

STATEMENT OF ORGANIZATION F	ORM FOR CANDIDATE COMMITTEES
1. Committee ID#: 335みひ	10. REPORTING WAIVER REQUEST: If the committee does not expect to receive or expend in excess of \$1,000 in an election
2. Type of Filing: ☐ Original ☐ Amendment to Items: 8 Eff. Date: 1-30-2012	and checks this box, the filing requirement of pre, post and annual campaign statements is waived. The Reporting Waiver will be automatically lost if the committee exceeds the \$1,000 threshold.
3. Full Name of Committee (must include Candidate's first and last name): $\int e^{\int f} W R_{13} h dt = 2000$	11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association)
4a. Candidate Full Name (Last, First, M.I.): WRight, フェナナ	a. Official Depository  BANK of AMERICA
<ul> <li>4b. Political Party (if applicable):</li> <li>4c. County of Residence: Govern</li> <li>4d. Office Sought (Check one):</li> </ul>	b. Secondary Depository  BY DEPUTY CL
Governor State Rep. State Rep. State Bd. of Ed. UofM Reg. WSU Gov. Circuit Court Municipal Court Local or other please specify:  District Court  DRAIN  State Senator Attorney Gen. MSU Trustee Appeals Court Probate Court Probate Court  DRAIN  COMMISSIONEA  4e. District/Circuit # or Jurisdiction:	12. This item applies only to Cubernatorial Candidate Committees: Check if this committee intends to seek qualifying contributions or make qualifying expenditures.  13. ELECTRONIC FILING: This item applies to committees that file with the Michigan Department of State Bureau of Elections only and does not apply to Candidate Committees that file with the County Clerk's office
5. Date Committee was Formed: 6a. Committee Phone #: 6b. Committee Fax #:	The Campaign Finance Act requires any committee that files with the Secretary of State and spends or receives \$20,000 in the preceding calendar year OR expects to spend or receive \$20,000 in the current calendar year to file campaign statements electronically. MERTS Plus software is provided to you free of charge to assist you in meeting this requirement.
6c. Committee E-mail Address:  6d. Committee Website Address:	Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically.
7a. Complete Comm. Mailing Address (May be PO Box):	** OR **
2174 Sycamore Burton, MI 48509	Committee did not spend or receive or does not expect to spend or receive in excess of \$20,000 and would like to file electronically voluntarily.
7b. Complete Comm. Street Address (May not be PO Box):	14. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and
8. Treasurer Name and Complete Address:  WARREN VYVYIN  1455 LAURENTIAN PASS  Flint, MI 48532  Phone #: <u>810 733-3593</u> E-mail Address: WVyvym @ CO. Genesee. MI. US  9. Designated Record Keeper Name and Complete Address:  SAME AS #8	completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)  Candidate  1-30-201  Current Treasurer
Phone #: E-mall Address:	Designated Record Keeper (Required only if filing electronically)