

STATEMENT OF ORGANIZATION RECEIPT AND COMMITTEE IDENTIFICATION NUMBER ASSIGNMENT

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CTE LIZ SIERAWSKI								
21900 CHALON								
ST. CLAIR SHORES, M	I 48080							
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Original Statement of	Organization	Acknowle	edgement of	Rece	eipt			
This acknowledges named above.	receipt of the	Original	Statement	of	Organization	from	the	committee
Date received:		April 27, 2016						
The identification number appearing below has been assigned to your committee. This number must be used on each page of all subsequent statements, reports, correspondence or other USE THIS NUMBER ON ALL DOCUMENTS								
	_		139348					
Filing Official:		Larna	elle fal	acey	de			
Secretary of State County Clerk		04/27/2016				7/2016		
			Signature				Da	te
N	_							
County								