

ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION FORM FOR LOCAL CANDIDATE A COMMITTEES FILED WITH A COUNTY CLERK Information on this form is made public.

1. Committee ID #: 139531	*2. Type of Filing: Origin	al: dment to items: 04/19/2017	Eff. Date: 0	4/22/2017
*3. Full Name of Committee (must include Candidate's first and last name):				
Gary Lusk City Council				
*4a. Candidate Full Name: Last Name Lu	sk	First Name Gary	M.I.	W
*4b. Political Party (if applicable):		*4c. County of Residence: MACC	омв 🔽	
*4d. Office Sought: City Council	_	*4e. District or Jurisdiction:	Sterling Height	S
*5. Date Committee was Formed: 04/22/2017				
*6a. Committee Phone: (586) 201-432	23	6b. Committee Fax #:		
*6c. Committee Email Address: ga	arylusk@comcast.net	6d. Committee Website Address:	www.garylusk.co	om
*7a. Complete Committee Mailing Address (May be PO Box): 43677 St Ives Ct Sterling Heights MI 48314				
*7b. Complete Committee Street Address (May not be PO Box):				
430// Stives Ci Stemmu nemins mi 403 i4				
*8. Treasurer Name and Complete Address	s:			ว ซ
Gary Lusk				∨ <u>™</u>
Phone #: (586) 201-4323	Email Addr	ess: garylusk@comcast.net	s. 3 km	La.
9. Designated Record Keeper Name and Complete Address:				
Gary Lusk				င္ပာ
Phone #: (586) 201-4323	Email Addr	ess: garylsuk@comcast.net		17
*10. REPORTING WAIVER REQUEST: YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER. The committee does not expect to receive or expend in excess of \$1,000 in an election. I/We understand that if the committee does not spend or received in excess of \$1,000 in an election, the committee does not owe Pre, Post and Quarterly Campaign Statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the \$1,000 threshold and all required campaign statements must be filed. A Reporting Waiver does not exempt a committee from filing Late Contribution Reports. NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER. The committee expects to receive or expend in excess of \$1,000 in an election. I/We understand that the committee owes Pre, Post, Quarterly Statements even if the committee does not spend or receive in excess of \$1,000 in an election. I further understand that the Reporting Waiver cannot be requested retroactively to avoid filing requirements and to avoid paying late filing fees. Further information regarding Reporting Waivers can be found in Appendix C of the Committee Manual.				
*11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association) While this item must be completed, an account does not have to be opened until the first contribution is received. *Official Depository (name and address): KeyBank 330 West 14 Mile Clawson MI 48017 Secondary Depository (name and address):				
12. 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 campaign statements electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and 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:	Date:	*Current Treasurer	Date	:
*Designated Record Keeper (If Applicable) Date:				