

## STATEMENT OF ORGANIZATION RECEIPT AND COMMITTEE IDENTIFICATION NUMBER ASSIGNMENT

|   |                     | コ              |              |          |           |  |
|---|---------------------|----------------|--------------|----------|-----------|--|
| CTE CHARLES T. MISSIG   |                     |                |              |          |           |  |
| 16884 KENNETH   |                     |                |              |          |           |  |
| MACOMB, MI 48044  |                     |                |              |          |           |  |
| L   |                     |                |              |          |           |  |
| Original Statement of Organization Acknowledgement of Receipt   |                     |                |              |          |           |  |
| This acknowledges receipt of named above.   | the <b>Original</b> | Statement of   | Organization | from the | committee |  |
| Date received:  |                     | April 24, 2018 |              |          |           |  |
| 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 |                     |                |              |          |           |  |
| 139629  |                     |                |              |          |           |  |
| Filing Official:  |                     |                |              |          |           |  |
| Secretary of State X County Clerk   |                     | 04/27/2018     |              | 7/2018   |           |  |
|   |                     | Signature      |              | Date     |           |  |
| MACOMB  |                     | _              |              |          |           |  |
| County  |                     |                |              |          |           |  |