



Michigan Department of State
Bureau of Elections

MACOMB COUNTY CLERK
MT. CLEMENS, MICHIGAN

21 JUN - 3 PM 8:07

FILED

DISSOLUTION CAMPAIGN STATEMENT

This form may be used to request dissolution of committee that has a Reporting Waiver. A dissolved committee has no further filing obligations under Michigan's Campaign Finance Act.

Type or print clearly in ink

| | | |
|---------------------------|-------------------------------|-----------------------------|
| Committee Name: | Committee I.D. Number: | Date of Dissolution: |
| <u>CTE NATHAN SHANNON</u> | <u>139034</u> | <u>5-28-2021</u> |

I/We certify that the committee listed above:

Currently maintains a Reporting Waiver and has not exceeded the \$1,000.00 threshold.

Has no outstanding late fees or other remaining debts.

Has no remaining assets.

I/We further certify that the remaining funds (if any) were disposed in the following manner:

Donation to St. Jude Children's Research Hospital
in the amount of \$10.52

Nathan B. Shan
Signature of Committee Treasurer or Designated Record Keeper

5-28-2021
Date

Nathan B. Shan
Signature of Candidate (if a Candidate Committee)

5-28-2021
Date

Return this form to your filing official. If the committee does not maintain a Reporting Waiver, you cannot dissolve it with this form.

RETURN TO:
MACOMB COUNTY ELECTIONS DEPARTMENT
32 MARKET STREET
MOUNT CLEMENS, MI 48043