

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION FORM FOR CANDIDATE COMMITTEES

1. Committee ID #: 2. Type of Filing: Original Amendment to Items: Eff. Date:	10. REPORTING WAIVER REQUEST: If the committee does not expect to receive or expend in excess of \$1,000 in an election 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): COMMITTEE TO ELECT NATHAN SHANNON	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.): Shannon, Nathan B. 4b. Political Party (if applicable):	Bank of America 40950 Van Dyke Ave
4c. County of Residence: Macomb 4d. Office Sought (Check one):	b. Secondary Depository
Governor Lt. Governor State Senator State Rep. Sec. of State Attorney Gen. State Bd. of Ed. UofM Reg. MSU Trustee WSU Gov. Supreme Court Appeals Court Circuit Court District Court Probate Court Municipal Court Local or other please specify: City Council	12. This item applies only to Gubernatorial 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
4e. District/Circuit # or Jurisdiction: Sterling Heights 5. Date Committee was Formed: 02/11/13 6a. Committee Phone #: (586) 840-8533	apply to Candidate Committees that file with the County Clerk's office. 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
6b. Committee Fax #: 6c. Committee E-mail Address: 6d. Committee Website Address: 7a. Complete Comm. Mailing Address (May be PO Box): 40256 Diane Drive	you free of charge to assist you in meeting this requirement. Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically. ** OR ** 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
Sterling Heights, MI 48313 7b. Complete Comm. Street Address (May <i>not</i> be PO Box):	voluntarily. 14. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are
40256 Diane Drive Sterling Heights, MI 48313 8. Treasurer Name and Complete Address: Nathan Shannon 40256 Diane Drive Sterling Heights, MI 48313	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 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)
Phone #: (586) 840-8533 E-mail Address:	Mathan B. Shamm 2-11-13 Candidate
9. Designated Record Keeper Name and Complete Address:	Candidate Withou B. Sharm 2-11-13 Current Treasurer
Phone #: E-mail Address:	Designated Record Keeper (Required only if filing electronically)