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: _____

3. Full Name of Committee (must include Candidate's first and last name): Committee to elect Michael Gordon

4a. Candidate Full Name (Last, First, M.I.):
Gordon II, Michael, G

4b. Political Party (if applicable): Republican

4c. County of Residence: Macomb

4d. Office Sought (Check one):

☐ 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: County Commissioner

4e. District/Circuit # or Jurisdiction: 20

5. Date Committee was Formed: 05/13/08

6a. Committee Phone #: (586) 260-2495

6b. Committee Fax #: _____

6c. Committee E-mail Address: gordon.michael09@yahoo.com

6d. Committee Website Address: _____

7a. Complete Comm. Mailing Address (May be PO Box):
P.O. Box 380295
Clinton Twp., MI 48038-0295

7b. Complete Comm. Street Address (May *not* be PO Box):
38590 Gainsborough Dr.
Clinton Twp., MI 48038

8. Treasurer Name and Complete Address:
Gordon, Cheryl, M.
38590 Gainsborough Dr.
Clinton Twp., MI 48038

Phone #: (586) 630-0565

E-mail Address:

9. Designated Record Keeper Name and Complete Address:

Phone #: _____

E-mail Address:

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.

11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association)

a. Official Depository
Huntington Bank
41801 Garfield Rd.
Clinton Twp., MI 48038

b. Secondary Depository

FILED
08 MAY 13 PM 1:19
MACOMB COUNTY CLERK
MT. CLEMENS, MICHIGAN

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 apply to Ballot Question 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 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 voluntarily.

14. 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 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

Cheryl M Gordon
Current Treasurer

Designated Record Keeper (Required only if filing electronically)