FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Othe	er Than An Autho	orized Comm	nittee	Of	ffice Use Only
NAME OF COMMITTEE (in full)		MAILING LABEL OR PRINT 🗑	Example:If typover the lines			
Michigan Doctors Politic		ttee - Michigan State				
ADDRESS (number and street	P.O. Bo	ox 769				
Check if different than previously reported. (ACC)	East La	nsing			MI L	48826
2. FEC IDENTIFICATION	NUMBER 🐂	CITY	A		STATE	ZIPCODE 🛕
C00001180		3. IS RE	THIS X	NEW (N) OR	AMEN (A)	IDED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Reports: July 15 Quarterly Reports: October 15 Quarterly Reports: X July 31 Mid-Ye Report(Non-el Year Only) (M' Termination R (TER)	ort(Q1) (c) ort(Q2) ort(Q3) ort(YE) ear ection Y)	poort Feb 2 ue On: Mar 2	General (on (12C)	Aug 20 Sep 20 Oct 20 (General (126 Special (126 Runoff (30R)	Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R) in the State of
5. Covering Period	01 01	2007	throug	gh 0 6	30 2	007
Type or Print Name of Treasurer Signature of Treasurer		BERG, SCOT			and complete. Date 0 7	31 2007
NOTE : Submission of false,	erroneous, or in	complete information :	may subject the p	person signing th	is Report to the per	nalties of 2 U.S.C 437g.
Office Use						FEC FORM 3X (Rev. 02/2003)

SUMMARY PAGE

Page 2

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name Michigan Doctors Political Action Committee - Michigan State Medical Society D D " D 0 1 0 1 2007 0.6 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand [°]2007 160596.01 January 1 (b) Cash on Hand at 160596.01 Begining of Reporting Period 0.00 0.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 160596.01 160596.01 6(a) and 6(c) for Column B) 16010.00 16010.00 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 144586.01 144586.01 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

Michigan Doctors Political Action Committee - Michigan State Medical Society

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From:		
((a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(i) Iternized (use obliedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add	0.00	0.00
	Lines 11(a)(i) and (ii)		5.00
((b) Political Party Committees	0.00	0.00
`	(c) Other Political Committees	2.22	200
	(such as PACs)	0.00	0.00
((d) Total Contributions (add Lines		
	11(a)(iii),(b) and (c)) (Carry	0.00	0.00
	Totals to Line 33, page 5)		
	Transfers From Affiliated/Other		
F	Party Committees	0.00	0.00
		0.00	0.00
3. <i>A</i>	All Loans Received		
14. I	_oan Repayments Received	0.00	0.00
	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.)	0.00	0.00
	(Carry Totals to Line 37, page 5)	0.00	0.00
	Refunds of Contributions Made o Federal candidates and Other		
	Political Committees	0.00	0.00
	Other Federal Receipts		
	Dividends, Interest, etc.)	0.00	0.00
`	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
		2.22	2.22
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
10 -	Total Receipts (add Lines 11/d)		
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	0.00
	12, 10, 14, 10, 10, 17, and 10(0)/		
	Total Federal Receipts	2.00	2.22
((subtract Line 18(c) from Line 19)	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party	2.22	0.00
3.	Committees	0.00	0.00
٠.	Federal Candidates/Committeesand Other Political Committees	0.00	0.00
4.	Independent Expenditure		
5	(use Schedule E)	0.00	0.00
٠.	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
		0.00	0.00
i .	Loan Repayments Made	0.00	0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
٥.	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	Than Political Committees		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	16010.00	16010.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1	Total Disbursements (add Lines 21(c), 22,		
••	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	16010.00	16010.00
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	16010.00	16010.00
	from Line 31)		16010 00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check o	E NUMBER	:	PAGE 6/	16				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 28b	24 25 28c X 29	26 30b				
Any Information copied from such Reports and State										
or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)	le and address of any political co	ommittee to s	SOIICIL COTILTID	outions from s	uch committee					
Michigan Doctors Political Action Commi	tee - Michigan State Medica	al Society								
Full Name (Last, First, Middle Initial)				ction ID: SB	-					
A. AMPAC				Disbursemer		Y				
Mailing Address 1101 Vermont NE			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
City Washington	State Zip Code DC 20005		Amoun	t of Each Disl	oursement this	Period				
Purpose of Disbursement	20003				1150	.00				
Contribution										
Candidate Name		Category/ Type								
Office Sought: House Disburs	ement For: Primary General									
President	Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial) 3- AMPAC				ction ID: SB						
AIVIFAC			M M	Disbursemer		_ Y				
Mailing Address 1101 Vermont NE			0 4	18	Ý Ž O Ď	7				
City Washington	State Zip Code DC 20005		Amoun	t of Each Disl	oursement this	Period				
Purpose of Disbursement	20000		- Li		6160	.00				
Contribution										
Candidate Name		Category/ Type								
9 🗎	ement For:									
Senate President	Primary General Other (specify) ▼									
State: District:	Curior (Specify)									
Full Name (Last, First, Middle Initial)				ction ID: SB						
Rep. Glenn Anderson			Date of	Disbursemer		V				
Mailing Address 34300 PARKGROVE D	3		0 2	0 8	y žo v	7				
City Westland	State Zip Code MI 48185		Amoun	t of Each Disl	oursement this	Period				
Purpose of Disbursement Contribution					150	0.00				
Candidate Name Rep. Glenn Anderson		Category/ Type								
Office Sought: X House Disburs	ement For:									
Senate President	Primary General									
State: MI District: 18	Other (specify) ▼									
SURTOTAL of Dishursements This Dage (entired		.		· · · · · · · · · · · · · · · · · · ·	7460	.00				
SUBTOTAL of Disbursements This Page (optional		········ <u> </u>	-	• • •		7 7				
TOTAL This Period (last page this line number only	′)		L.							

SCHEDOLL B (I LOT OHII 3A)	Use seperate schedule(s)			IE NUMI	BER:		L P	AGE	/ / 16			
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	nly one) 22 28	a	23 28b	24 28c	-	25 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam												
<u> </u>	and address of any political	COITIII	iiiiee io s	SOIICIL CO	HIHDU	lions m	JIII SUCII	COITIIII	illee			
NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Committ	ee - Michigan State Medi	cal S	ociety									
Full Name (Last, First, Middle Initial)				Tra	nsact	ion ID:	SB29.	12797	,			
Barb Byrum for State Representative						isburse		V * V		V		
Mailing Address 4523 STONE ROAD				03 15 7 2007								
City	State Zip Code			Am	ount c	of Each	Disburs	ement	this P	eriod		
Onondaga Purpose of Disbursement	MI 49264	_		+					100.0	0		
Contribution						•				-		
Candidate Name Barb Byrum for State Representative			egory/ ype									
	ment For:											
Senate President	Primary General Other (specify) ▼											
State: MI District: 67	(- y) \											
Full Name (Last, First, Middle Initial)				Tra	nsact	ion ID:	SB29.	12789)			
Bill Hardiman for State Senate						isburse		.,,				
Mailing Address PO Box 1669				0	2 ^M	[′] 0	8 /	ž	0 Ď 7	Y		
City Grand Rapids	State Zip Code MI 49501			Am	ount c	of Each	Disburs					
Purpose of Disbursement Contribution		•						2	200.0	0		
Candidate Name Bill Hardiman for State Senate			egory/ ype									
Office Sought: House Disburse X Senate President	ment For: Primary General Other (specify) ▼											
State: MI District: 29												
Full Name (Last, First, Middle Initial) Bishop Majority Fund				-		ion ID: isburse	SB29. ement	12777	•			
Mailing Address 883 Great Oaks Blvd.				0 ^M		/ D 1	5 /	ž	0 Ď 7	Y		
City Rochester	State Zip Code MI 48307			Am	ount c	of Each	Disburs	ement	this P	eriod		
Purpose of Disbursement Contribution				1 L				. 10	0.00	0		
Candidate Name			egory/ ype									
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼											
SUBTOTAL of Disbursements This Page (optional)								16	00.0	0		
ODITIAL OF DISDUISEMENTS THIS FAGE (OPTIONAL)			. •					-		\dashv		
TOTAL This Period (last page this line number only)			. •									

SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only		PAGE 8/16
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 28a 28l	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Committee				TION COOL COMMITTEE
Full Name (Last, First, Middle Initial) Citizens for John Gleason Mailing Address 2617 Macomber			Date of Disbu	ID: SB29.12788 ursement
City Flint	State Zip Code MI 48503		Amount of Ea	ach Disbursement this Period
Purpose of Disbursement Contribution				175.00
Candidate Name Citizens for John Gleason Office Sought: House Dishure		ategory/ Type		
Office Sought: House Disburse X Senate President State: MI District: 27	Primary General Other (specify)			
Full Name (Last, First, Middle Initial) Gitizens Supporting Mike Nofs			Transaction Date of Disbu	
Mailing Address PO Box 219			03 M	D 1 5 Y 2 0 0 7 Y
City Battle Creek	State Zip Code MI 49017		Amount of Ea	ach Disbursement this Period 200.00
Purpose of Disbursement Contribution Candidate Name		ategory/		200.00
Citizens Supporting Mike Nofs		Туре		
Office Sought: X House Disburse Senate President State: MI District: 62	ment For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Committee to Elect Gretchen Whitmer			Date of Disbu	
Mailing Address PO Box 11063			03 /	01
City East Lansing	State Zip Code MI 48823		Amount of Ea	ach Disbursement this Period
Purpose of Disbursement Contribution Candidate Name				300.00
Committee to Elect Gretchen Whitmer		ategory/ Type		
Office Sought: House Disburse X Senate President State: MI District: 23	ment For: Primary General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)		<u></u>		675.00
TOTAL This Period (last page this line number only)		•		

TEMPED DISPURSEMENTS	Use seperate schedule(s)		check or			١.			NGE	9/10)
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	ΙĖ	21b 27	\Box	22 28a	23 28t	, F	24 28c	X	25 29	
Any Information copied from such Reports and State											5
or for commercial purposes, other than using the name	ie and address of any political c	omm	ittee to s	solicit	contrib	outions	from	such	comm	nittee	
NAME OF COMMITTEE (In Full)											
/ Michigan Doctors Political Action Commit	tee - Michigan State Medic	al S	ociety								
Full Name (Last, First, Middle Initial)				1	Transa	ction	I D : S	B29.1	2818	3	
Committee to Elect Marie Donigan						Disbu			/ · · ·	V .	V
Mailing Address 612 S. Dorchester		03 0 7 2 0 0 7									
City Payal Cak	State Zip Code			,	Amoun	t of Ea	ch D	isburse	ement	this P	eriod
Royal Oak Purpose of Disbursement	MI 48067			-						150.0	0
Contribution							0				•
Candidate Name Committee to Elect Marie Donigan			egory/ /pe								
	ement For: Primary General										
Senate President	Other (specify)										
State: MI District: 26											
Full Name (Last, First, Middle Initial)							_	B29.1	2836	6	
5 CTE Joel Shelotrown					Date of	Disbu			/ ° V	· · ·	V
Mailing Address 2225 Gray Road					0 4		18		2	0 ŏ 7	
City West Branch	State Zip Code MI 48861		Amount of Each			ch D	isburse	ement	this P	eriod	
Purpose of Disbursement Contribution									0	200.0	00
Candidate Name			egory/ vpe								
Senate President	ement For: Primary General Other (specify)										
State: District: Full Name (Last, First, Middle Initial)											
CTE Kathy Angerer					Date of	Disbu	rsem	B29.1 ent			14
Mailing Address PO Box 157					0 2		0 8		Ź	0 Ď 7	1
City Dundee	State Zip Code MI 48131			,	Amoun	t of Ea	ch D	isburse			-
Purpose of Disbursement Contribution						•				200.0	00
Candidate Name CTE Kathy Angerer			egory/ vpe								
Senate President	ement For: Primary General Other (specify)										
State: District:											
SUBTOTAL of Disbursements This Page (optional)			. •						. ;	550.0	0
TOTAL This Period (last page this line number only	<u> </u>										

SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check	NE NUI only one			L P	AGE 1	0 / 16							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	_ 2	_	23 28b	24 28c	X 2	_ ⊢	26 30b						
Any Information copied from such Reports and State or for commercial purposes, other than using the nan															
NAME OF COMMITTEE (In Full)	le and address of any political co	Jillillittee to	Solicit	OHUIDU	lions in	JIII SUCII	COMMINIC	iee							
Michigan Doctors Political Action Commit	tee - Michigan State Medica	al Society													
Full Name (Last, First, Middle Initial)			Tı	ansac	tion ID:	SB29.1	12827								
CTE Kim Meltzer					Disburse		V V	v ° v							
Mailing Address 20585 Leelanau Dr.							03								
City Clinton Two	State Zip Code MI 48038		А	mount (of Each	Disburs	ement th	nis Pe	riod						
Clinton Twp. Purpose of Disbursement	WII 48038		Н Г				15	50.00							
Contribution			"												
Candidate Name CTE Kim Meltzer		Category/ Type													
3 1	ement For:														
Senate President	Primary General Other (specify)														
State: MI District: 33															
Full Name (Last, First, Middle Initial)						SB29.1	12840								
CTE Tim Melton				ate of С	Disburse	ement	V	V ° V	1						
Mailing Address 1604 N Sterling				0"5 "		1 ′	20	ŏ 7 °							
City Ponitac	State Zip Code MI 48340		A	mount (of Each	Disburs	ement th	nis Pe	riod						
Purpose of Disbursement Contribution			_ L				20	00.00							
Candidate Name		Category/ Type													
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)														
State: District:															
Full Name (Last, First, Middle Initial) Ed Gaffney Leadership Fund					t ion ID: Disburse	SB29.1	12829								
Mailing Address 283 Kenwood Court) 4	/ D 1	8 /	ž 0	ŏ 7 °							
City Grosse Pointe	State Zip Code MI 48236		A	mount (of Each	Disburs	ement th	nis Pe	riod						
Purpose of Disbursement Contribution	1	•	_ L				1.	50.00							
Candidate Name		Category/ Type													
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)														
SUBTOTAL of Disbursements This Page (optional)			_ Γ	•	•		50	0.00							
OD TOTAL OF DISSURGEMENTS THIS Fage (Optional)			·	-	•	•	• •	·							
TOTAL This Period (last page this line number only)		. [

TEMIZED DIODUDOEMENTO	Use seperate schedule(s)		check or		och.		_ <u> </u>	HGE	11/1	0	_
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	ΙÈ	21b 27	22 28	аГ	23 28b	24 28c	X	25 29	ш	6 0b
Any Information copied from such Reports and Statem			y persor	for the	purpo	ose of so	olicating of	contrib	outions	$oldsymbol{ol}oldsymbol{ol}oldsymbol{ol}}}}}}}}}}}}}}}}}}}$	
or for commercial purposes, other than using the name	and address of any political of	comm	ittee to s	olicit co	ntribu	itions fro	om such	comm	nittee		
NAME OF COMMITTEE (In Full)											
/ Michigan Doctors Political Action Committ	ee - Michigan State Medio	cal S	ociety								
Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	SB29.1	283	1		
Led Gaffney Leadership Fund						Disburse		v v	V .	V	
Mailing Address 283 Kenwood Court		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$									
City Grosse Pointe	State Zip Code			Am	ount	of Each	Disburse	ement	this P	eriod	
Purpose of Disbursement	MI 48236			- [150.0	0	1
Contribution											ı
Candidate Name			egory/ ype								
	ment For:										
Senate President	Primary General Other (specify) ▼										
State: District:											
Full Name (Last, First, Middle Initial)				1			SB29.1	2806	3		
Friends of Andy Coulouris						Disburse / D		V V	V	V	
Mailing Address PO Box 2005				0	3 "	1	5 /	2	0 Ď 7		
,	State Zip Code MI 48605			Am	ount	of Each	Disburse	ement	this P	eriod	1
Purpose of Disbursement Contribution									200.0	0	
Candidate Name			egory/ ype								
	ment For:										
Senate President	Primary General Other (specify) ▼										
State: District:	(- / /										
Full Name (Last, First, Middle Initial) Friends of Gabe Leland						tion ID: Disburse	SB29.1 ement	2823	3		
Mailing Address 19403 W. Warren				O ^M	3 ^M	[′] 3	0 /	ž	0 ŏ 7	Y	
,	State Zip Code MI 48208			Am	ount	of Each	Disburse	ement	this P	eriod	_
Purpose of Disbursement Contribution				1 L					150.0	0	
Candidate Name Friends of Gabe Leland			egory/ ype								
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	•	· ·								
State: District:	· · · ·										
SUBTOTAL of Disbursements This Page (optional)			. •					!	500.0	0]
TOTAL This Period (last page this line number only)									•		1

	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE (check onl	NUMBER:	PAGE 12/16						
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 23 28a 28b	24 25 26 28c X 29 30b						
	y Information copied from such Reports and Statem for commercial purposes, other than using the name										
	NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Committee										
_	Full Name (Last, First, Middle Initial)			Transaction ID: SI	 B29.12809						
Α.	Friends of John Moolenaar			Date of Disburseme							
	Mailing Address 2203 Cranbrook Dr.		03								
	,	State Zip Code MI 48642		Amount of Each Di	sbursement this Period						
	Purpose of Disbursement Contribution				200.00						
	Candidate Name		Category/ Type								
	Senate President	ment For: Primary General Other (specify)									
	State: MI District: 98 Full Name (Last, First, Middle Initial)										
В.	Friends of Michael Sak			Transaction ID: SI Date of Disbursement	ent						
	Mailing Address 236 Valley Ave., NW		03 / 15	y žo v v							
	,	State Zip Code MI 49504		Amount of Each Di	sbursement this Period						
	Purpose of Disbursement Contribution			250.00							
	Candidate Name Friends of Michael Sak		Category/ Type								
	Office Sought: Senate President State: Disburse	ment For: Primary General Other (specify)									
<u>С</u> .	Full Name (Last, First, Middle Initial) Friends of Paul Condino			Transaction ID: SI Date of Disburseme							
	Mailing Address 21170 WINCHESTER			05 01	2007						
		State Zip Code MI 48076		Amount of Each Di	sbursement this Period						
	Purpose of Disbursement Contribution				200.00						
	Candidate Name		Category/ Type								
	Senate President	ment For: Primary General Other (specify)									
Г	State: MI District:										
s	UBTOTAL of Disbursements This Page (optional) .		>		650.00						
Т	OTAL This Period (last page this line number only)		>								

SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)		NE NUMI only one)	BER:		L P	AGE 1	3 / 16						
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28:		23 28b	24 28c	X 2		26 30b					
Any Information copied from such Reports and State														
or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	The and address of any political co	ommittee to	SOIICIL CO	ntribu	lions ire	om such	COMMI	ee						
Michigan Doctors Political Action Comm	ttee - Michigan State Medica	al Society												
Full Name (Last, First, Middle Initial)			Tra	nsact	ion ID:	SB29.1	12817							
Friends of Steve Tobocman					isburse		V V	v ° v	1					
Mailing Address PO box 9746							03							
City Detroit	State Zip Code MI 48209		Am	ount c	f Each	Disburs	ement th	is Per	riod					
Purpose of Disbursement Contribution							25	50.00						
Candidate Name Friends of Steve Tobocman	-	Category/ Type												
Senate President	sement For: Primary General Other (specify)													
State: MI District: 12 Full Name (Last, First, Middle Initial)						0000								
Gilda Jacobs for Senate				e of D	isburse	SB29.1 ement			,					
Mailing Address 8353 Hendrie Blvd							žo	ŏ7 [°]						
City Huntington Woods	State Zip Code MI 48070		Am	ount c	of Each	Disburs			-					
Purpose of Disbursement Contribution				•			35	50.00						
Candidate Name		Category/ Type												
Office Sought: House X Senate President State: MI District: 14	sement For: Primary General Other (specify)													
Full Name (Last, First, Middle Initial)			_			0000	10701							
Hansen Clark for State Senate			-	e of D	isburse			V * V	,					
Mailing Address 243 W. Congress, Ste.	350		0	3 ^M	0	1 /	žo	ŏ7 [°]						
City Detroit	State Zip Code MI 48226		Am	ount c	f Each	Disburs	ement th	is Per	riod					
Purpose of Disbursement Contribution		•					30	00.00						
Candidate Name Hansen Clark for State Senate		Category/ Type												
Office Sought: House Disbur	sement For: Primary General Other (specify) ▼													
SUBTOTAL of Disbursements This Page (optiona)				-		90	0.00						
COLITICA DI DIOGRAPIA I I I I I I I I I I I I I I I I I I	,			•	-			•	-					
TOTAL This Period (last page this line number on	y)		· L											

		Use seperate schedule(s)		(check o		e NUMBER. PAGE I						_
ľ	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	\int 2	´ —	23 28b	24 28c	X	25 29	ш.	
	y Information copied from such Reports and Staten										5	_
or 1	for commercial purposes, other than using the nam	e and address of any politic	al comr	nittee to	solicit c	ontribu	utions fr	om such	comr	nittee		
	NAME OF COMMITTEE (In Full)											
/	Michigan Doctors Political Action Committ	ee - Michigan State Me	dical S	Society								
	Full Name (Last, First, Middle Initial)				Tı	ansac	tion ID:	SB29.1	278	2		
٩.	Hardiman for State Senate				_	ate of I	Disburs	ement	V V	ν.	Y	
	Mailing Address 3351 Claystone, SE, Sui	te 210				2		1	2	0 ŏ 7		
	City	State Zip Code MI 49546			А	mount	of Each	Disburse	emen	t this F	eriod	
	Grand Rapids Purpose of Disbursement	WII 49546			- [500.0	00	1
	Contribution											ı
	Candidate Name Hardiman for State Senate			tegory/ ype								
	Office Sought: House Disburse Senate	ement For: Primary Genera										
	President	Other (specify)										
	State: District:											
5	Full Name (Last, First, Middle Initial)							SB29.1	279	8		
5.	Marc Corriveau for State Rep						Disburs		V V	· v	V	
	Mailing Address PO Box 5251) 3 ^M	1	5 /	<u>'</u> 2	0 ŏ 7					
	City Northville	State Zip Code MI 48167			A	mount	of Each	Disburse	emen	t this F	eriod	_
	Purpose of Disbursement Contribution] L					150.0	00	
	Candidate Name			tegory/ ype								
	Office Sought: House Disburse Senate President	ement For: Primary Genera Other (specify)	•									
	State: District:											
Э.	Full Name (Last, First, Middle Initial) Martin Griffin for State Rep						t ion ID : Disburs	SB29.1 ement	1280	7		
	Mailing Address 705 Grinnel) 3 ^M	/ D 1	5 /	ž	0 ŏ 7	Υ	
	City Jackson	State Zip Code MI 49203			A	mount	of Each	Disburse	emen	t this F	eriod	_
	Purpose of Disbursement Contribution								_	150.0	00	_
	Candidate Name			tegory/ ype								
	Senate President	ement For: Primary General Other (specify)	1									
	State: District:											_
s	UBTOTAL of Disbursements This Page (optional)			•						800.0	0	
T	OTAL This Period (last page this line number only)	1		▶								1

TEMPED DISPURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page		check o			•	[P.	AGE	15/1	0	
TEMIZED DISBURSEMENTS			21b	$\bigcap_{i=1}^{n} 2^{i}$	22	23	24		25		26
Any Information copied from such Reports and Statem	ents may not be sold or used	l by ar	27 ov persor	\perp	28a Je nurn	28b	olicating		29 butions	\coprod_{i}	30b
or for commercial purposes, other than using the name										5	
NAME OF COMMITTEE (In Full)											
Michigan Doctors Political Action Committ	ee - Michigan State Medi	ical S	Society								
Full Name (Last, First, Middle Initial)				Т	ransac	tion ID:	SB29.1	282	6		
Meadows Majority Fund						Disburs		V * V	· V	V	
Mailing Address Po Box 4041					0 3	/ B	3 O /	Ż	0 ŏ 7	· T	
,	State Zip Code			Α	mount	of Each	Disburs	emen	t this F	erio	ı
East Lansing	MI 48826			- [150.0	00	٦
Purpose of Disbursement Contribution					-						_
Candidate Name			egory/ ype								
	ment For:										
Senate President	Primary General Other (specify) ▼										
State: District:	Other (appeality)										
Full Name (Last, First, Middle Initial)				т	ransac	tion ID:	SB29.1	281	 6		
3. Michael Switalski Leadership Fund					ate of	Disburs	ement			1/	
Mailing Address 31412 Gay				1 L	0 3	/ D	5 /	ž	0 ŏ 7	Y	
City Roseville	State Zip Code MI 48066			A	mount	of Each	Disburs	emen	t this F	erio	i
Purpose of Disbursement Contribution			·						175.0	00	
Candidate Name			egory/ ype								
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼										
State: District:											
Full Name (Last, First, Middle Initial) Pam Byrnes for State Representaive						tion ID: Disburs	SB29.1	1279	6		
Mailing Address 17381 N M-52						/ D	5 /	Ý Ž	0 ŏ 7	Y	
City Chelsea	State Zip Code MI 48118			A	mount	of Each	Disburs	emen	t this F	erio	i
Purpose of Disbursement Contribution			•] L					200.0	00	_
Candidate Name Pam Byrnes for State Representaive Category, Type											
Senate President	ment For: Primary General Other (specify)										
State: MI District: 52											
SUBTOTAL of Disbursements This Page (optional)			▶						525.0	0	
TOTAL This Period (last page this line number only)									•		\neg

TEMES DISPURSEMENTS	Use seperate schedule(s)		check or		DEN.		_ F	PAGE 10/10			
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b	22		23	24	П	25	26	
Any Information conied from such Departs and Cta	tomonte may not be said as yeard b	1	27	for the		28b	28c	X	29	30	
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n										•	
NAME OF COMMITTEE (In Full)											
Michigan Doctors Political Action Comm	nittee - Michigan State Medic	al So	ciety								
Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	SB29.1	2779	9		
Patty Birkholz for State Senate					te of [Disburse / D		V * V	· V	V	
Mailing Address PO BOX 316				Ŏ	2 "	,	1 /	2	0 ŏ 7		
City ALLEGAN	State Zip Code MI 49010-0316			Am	ount	of Each	Disburse	ement	this P	eriod	
Purpose of Disbursement	1011 49010-0316			$+$ Γ					200.0	0	
Contribution						•				•	
Candidate Name Patty Birkholz for State Senate		Cate Ty									
	irsement For:										
X Senate President	Primary General Other (specify) ▼										
State: MI District: 24	Curior (opcomy)										
Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	SB29.1	279	5		
Raymond E. Basham for Senate				Da	te of [Disburse	ement			_	
Mailing Address 12406 Telegraph Rd.					3 M	/ D 1	5 /	2	0 ŏ 7	Y	
City Taylor	State Zip Code MI 48180			Am	ount	of Each	Disburse	ement	this P	eriod	
Purpose of Disbursement Contribution									150.0	0	
Candidate Name Raymond E. Basham for Senate	1	Cate Ty									
Office Sought: House Disbu	irsement For:										
Senate	Primary General										
President State: District:	Other (specify)										
Full Name (Last, First, Middle Initial)				Tro	neac	tion ID.	SB29.1	2700	<u> </u>		
The Great Southwest Fund						Disburs		2750	,		
Mailing Address PO Box 14081				o ^N	2 M	[′] D0	8 /	ž	0 ŏ 7	Y	
City	State Zip Code			Am	ount	of Each	Disburse	ement	this P	eriod	
Lansing	MI 48901-4081						• • •	1	500.0	n	
Purpose of Disbursement Contribution					-		-		300.0	0	
Candidate Name	'	Cate Ty									
Office Sought: House Disbu	rsement For: Primary General										
President	Other (specify)										
State: District:											
SUBTOTAL of Disbursements This Page (option	al)		•					18	350.0	0	
								161	010.0	n	
TOTAL This Period (last page this line number of	niv)							101	<i>,</i> 10.0	U	