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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example-If typing, type over the lines

Friends of Senator Carl Levin

ADDRESS (number and street) ▼ 10 G Street, NE, Suite 470

X Check if different than previously reported. (ACC)

Washington | DC | 20002

2. FEC IDENTIFICATION NUMBER ▼ C00088484

CITY ▲ | STATE ▲ | ZIP CODE ▲

3. IS THIS REPORT X NEW (N) OR AMENDED (A)

STATE ▼ DISTRICT: MI 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- X January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on ____ in the State of ____

(c) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on ____ in the State of ____

5. Covering Period 10 01 2004 through 12 31 2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Tina Stoll

Signature of Treasurer Electronically Filed by Tina Stoll Date 01 28 2005

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							

FEC FORM 3
(Revised 02/2003)

25020032101

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Friends of Senator Carl Levin

Report Covering the Period: From: M M 10 D D 01 Y Y Y Y 2004 To: M M 12 D D 31 Y Y Y Y 2004

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	4115.00	20580.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	1600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	4115.00	18980.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5929.17	327186.08
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	580181.53
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	5929.17	-252995.45
8. Cash on Hand at Close of Reporting Period (from Line 27)	680900.91	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

25020032102

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Friends of Senator Carl Levin

Report Covering the Period: From: M M 10 D D 01 Y Y Y Y 2004 To: M M 12 D D 31 Y Y Y Y 2004

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	850.00	
(ii) Uniternized	265.00	
(iii) TOTAL of contributions from individuals ▶	1115.00	14430.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACS)	3000.00	6150.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	4115.00	20580.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	260.32
13. LOANS		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	580181.53
15. OTHER RECEIPTS (Dividends, Interest, etc.)	6186.23	35760.23
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	10301.23	636782.08

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	5929.17	327186.08
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of all Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	1100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	1600.00
21. OTHER DISBURSEMENTS	63500.00	247982.35
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	69429.17	576768.43

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	740028.85
24. TOTAL RECEIPTS THIS PERIOD (from Line 18, page3)	10301.23
25. SUBTOTAL (add Line 23 and Line 24)	750330.08
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	69429.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	680900.91

25020032104

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 5 / 21
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A. Full Name (Last, First, Middle Initial)
Mr. Harry Newton
Mailing Address 205 West 19th Street, Apt. 9
City: New York State: NY Zip Code: 10011
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Lexicographer
Receipt For: 2008 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 400.00
Date of Receipt: 10 / 22 / 2004
Transaction ID: C213
Amount of Each Receipt this Period: 400.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Belz Enterprises
Mailing Address 100 Peabody Place
City: Memphis State: TN Zip Code: 38103
FEC ID number of contributing federal political committee: C
Name of Employer: Belz Enterprises
Occupation: Real Estate and Investments Executive
Receipt For: 2008 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 450.00
Date of Receipt: 10 / 18 / 2004
Transaction ID: C232
Amount of Each Receipt this Period: 450.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
PARTNERSHIP—partners below if itemized

C. Full Name (Last, First, Middle Initial)
Mr. Jack A. Belz
Mailing Address 100 Peabody Place
City: Memphis State: TN Zip Code: 38103
FEC ID number of contributing federal political committee: C
Name of Employer: Belz Enterprises
Occupation: Real Estate and Investments Executive
Receipt For: 2008 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 599.94
Date of Receipt: 10 / 18 / 2004
Transaction ID: C221
Amount of Each Receipt this Period: 299.97
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 850.00

TOTAL This Period (last page this line number only) ▶

25020032105

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 21
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A. Full Name (Last, First, Middle Initial)
Mr. Ronald A. Belz

Mailing Address 100 Peabody Place

City: Memphis
State: TN
Zip Code: 38103

FEC ID number of contributing federal political committee: C

Name of Employer: Belz Enterprises

Occupation: Real Estate and Investments Executive

Receipt For: 2008
X Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.06

Date of Receipt
M M / D D / Y Y Y Y
10 18 2004

Transaction ID: C222

Amount of Each Receipt this Period
150.03

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 850.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 21
(check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.
Full Name (Last, First, Middle Initial)
Cummins Inc PAC
Mailing Address 801 Pennsylvania Avenue, NW
North Building, Suite 625
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee. C C00377952
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt M M / D D / Y Y Y Y: 10 20 2004
Transaction ID: C231
Amount of Each Receipt this Period 1000.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Realtors PAC
Mailing Address 430 N. Michigan Avenue
City: Chicago State: IL Zip Code: 60611
FEC ID number of contributing federal political committee. C C00030718
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt M M / D D / Y Y Y Y: 10 25 2004
Transaction ID: C214
Amount of Each Receipt this Period 1000.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
SBC Telecommunications, Inc. PAC
Mailing Address 1401 I Street, NW
Suite 1100
City: Washington State: DC Zip Code: 20005
FEC ID number of contributing federal political committee. C C00108017
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt M M / D D / Y Y Y Y: 10 09 2004
Transaction ID: C216
Amount of Each Receipt this Period 1000.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

TOTAL This Period (last page this line number only) ▶ 3000.00

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 21
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.
Full Name (Last, First, Middle Initial)
A.B. Data LTD
Mailing Address 8050 N. Port Washington Road
City: Milwaukee State: WI Zip Code: 53217
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 28767.92

Date of Receipt: 10 05 2004
Transaction ID: C217
Amount of Each Receipt this Period: 946.71
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Payment for List Rental

B.
Full Name (Last, First, Middle Initial)
A.B. Data LTD
Mailing Address 8050 N. Port Washington Road
City: Milwaukee State: WI Zip Code: 53217
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 28767.92

Date of Receipt: 11 12 2004
Transaction ID: C218
Amount of Each Receipt this Period: 561.71
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Payment for List Rental

C.
Full Name (Last, First, Middle Initial)
A.B. Data LTD
Mailing Address 8050 N. Port Washington Road
City: Milwaukee State: WI Zip Code: 53217
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 28767.92

Date of Receipt: 11 29 2004
Transaction ID: C219
Amount of Each Receipt this Period: 84.10
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Payment for List Rental

SUBTOTAL of Receipts This Page (optional) ▶ 1592.52

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 21
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.
Full Name (Last, First, Middle Initial)
Merrill Lynch
Mailing Address 39577 Woodward Avenue
Suite 100
City: Bloomfield Hills State: MI Zip Code: 48304
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date 9659.55
Date of Receipt: 10 / 15 / 2004
Transaction ID: C223
Amount of Each Receipt this Period: 537.04
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Interest

B.
Full Name (Last, First, Middle Initial)
Merrill Lynch
Mailing Address 39577 Woodward Avenue
Suite 100
City: Bloomfield Hills State: MI Zip Code: 48304
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date 9659.55
Date of Receipt: 10 / 18 / 2004
Transaction ID: C224
Amount of Each Receipt this Period: 1778.97
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Interest

C.
Full Name (Last, First, Middle Initial)
Merrill Lynch
Mailing Address 39577 Woodward Avenue
Suite 100
City: Bloomfield Hills State: MI Zip Code: 48304
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date 9659.55
Date of Receipt: 10 / 27 / 2004
Transaction ID: C225
Amount of Each Receipt this Period: 987.28
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Interest

SUBTOTAL of Receipts This Page (optional) ▶ 3303.29

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 21
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.
Full Name (Last, First, Middle Initial)
Merill Lynch
Mailing Address 39577 Woodward Avenue
Suite 100
City: Bloomfield Hills State: MI Zip Code: 48304
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 9659.55

Date of Receipt: 10 29 2004
Transaction ID: C226
Amount of Each Receipt this Period: 153.12
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Dividend

B.
Full Name (Last, First, Middle Initial)
Merill Lynch
Mailing Address 39577 Woodward Avenue
Suite 100
City: Bloomfield Hills State: MI Zip Code: 48304
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 9659.55

Date of Receipt: 11 17 2004
Transaction ID: C227
Amount of Each Receipt this Period: 641.73
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Interest

C.
Full Name (Last, First, Middle Initial)
Merill Lynch
Mailing Address 39577 Woodward Avenue
Suite 100
City: Bloomfield Hills State: MI Zip Code: 48304
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 9659.55

Date of Receipt: 11 30 2004
Transaction ID: C228
Amount of Each Receipt this Period: 284.43
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Dividend

SUBTOTAL of Receipts This Page (optional) ▶ 1079.28

TOTAL This Period (last page this line number only) ▶

25020032110

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 21
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A. Full Name (Last, First, Middle Initial)
Merrill Lynch

Mailing Address 39577 Woodward Avenue
Suite 100

City: Bloomfield Hills
State: MI
Zip Code: 48304

FEC ID number of contributing federal political committee: C

Name of Employer:

Occupation:

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date: 9659.55

Date of Receipt: M M / D D / Y Y Y Y
12 31 2004

Transaction ID: C229

Amount of Each Receipt this Period: 211.14

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Dividend

SUBTOTAL of Receipts This Page (optional) ▶ 211.14

TOTAL This Period (last page this line number only) ▶ 6186.23

25020032111

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A. Full Name (Last, First, Middle Initial)
Campaign Finance Consultants

Mailing Address 503 Capitol Court, NE
Suite 100

City: Washington State: DC Zip Code: 20002

Purpose of Disbursement: Fundraising Expense

Candidate Name:

Category/Type: 003

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2008 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D291
Date of Disbursement: 10 / 14 / 2004

Amount of Each Disbursement this Period: 2613.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Campaign Finance Consultants

Mailing Address 503 Capitol Court, NE
Suite 100

City: Washington State: DC Zip Code: 20002

Purpose of Disbursement: Fundraising Expense

Candidate Name:

Category/Type: 003

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2008 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D279
Date of Disbursement: 11 / 17 / 2004

Amount of Each Disbursement this Period: 693.17

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Centrell Culter

Mailing Address 1789 Olive Street

City: Capitol Heights State: MD Zip Code: 20743

Purpose of Disbursement: Printing Expense

Candidate Name:

Category/Type: 008

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2008 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D290
Date of Disbursement: 11 / 17 / 2004

Amount of Each Disbursement this Period: 217.85

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 3524.42

TOTAL This Period (last page this line number only) ▶

25020032112

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.
Full Name (Last, First, Middle Initial)
Comerica

Mailing Address Platinum Plus for Business
P.O. Box 14469

City: Wilmington State: DE Zip Code: 19886

Purpose of Disbursement: Bank Management fee

Candidate Name:

Category/Type: 001

Office Sought: House / Senate / President

Disbursement For: X Primary / General / Other (specify)

State: District:

Transaction ID: D298
Date of Disbursement: 10/04/2004

Amount of Each Disbursement this Period: 43.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Comerica

Mailing Address Platinum Plus for Business
P.O. Box 14469

City: Wilmington State: DE Zip Code: 19886

Purpose of Disbursement: Bank Service Charge

Candidate Name:

Category/Type: 001

Office Sought: House / Senate / President

Disbursement For: X Primary / General / Other (specify)

State: District:

Transaction ID: D297
Date of Disbursement: 10/18/2004

Amount of Each Disbursement this Period: 16.49

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Comerica

Mailing Address Platinum Plus for Business
P.O. Box 14469

City: Wilmington State: DE Zip Code: 19886

Purpose of Disbursement: Bank Management Fee

Candidate Name:

Category/Type: 001

Office Sought: House / Senate / President

Disbursement For: X Primary / General / Other (specify)

State: District:

Transaction ID: D298
Date of Disbursement: 11/04/2004

Amount of Each Disbursement this Period: 43.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 103.49

TOTAL This Period (last page this line number only) ▶

25020032113

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use seperate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.
Full Name (Last, First, Middle Initial): Comerica
Mailing Address: Platinum Plus for Business, P.O. Box 14469
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: Bank Service Charge
Candidate Name:
Category/Type: 001
Office Sought: House / Senate / President
State: District:
Disbursement For: 2008 X Primary General Other (specify)
Transaction ID: D299
Date of Disbursement: 11/12/2004
Amount of Each Disbursement this Period: 24.59
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Comerica
Mailing Address: Platinum Plus for Business, P.O. Box 14469
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: Bank management fee
Candidate Name:
Category/Type: 001
Office Sought: House / Senate / President
State: District:
Disbursement For: 2008 X Primary General Other (specify)
Transaction ID: D305
Date of Disbursement: 12/06/2004
Amount of Each Disbursement this Period: 43.50
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Comerica
Mailing Address: Platinum Plus for Business, P.O. Box 14469
City: Wilmington State: DE Zip Code: 19886
Purpose of Disbursement: Service Charge
Candidate Name:
Category/Type: 001
Office Sought: House / Senate / President
State: District:
Disbursement For: 2008 X Primary General Other (specify)
Transaction ID: D306
Date of Disbursement: 12/13/2004
Amount of Each Disbursement this Period: 18.15
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ **86.24**

TOTAL This Period (last page this line number only) ▶

25020032114

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use seperate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A. Full Name (Last, First, Middle Initial)
Jewish News

Mailing Address 29200 Northwestern Highway
Suite 110

City: Southfield State: MI Zip Code: 48034

Purpose of Disbursement: Advertisement Expense

Candidate Name:

Category/Type: D04

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2008 X Primary General Other (specify)

Transaction ID: D276
Date of Disbursement: 10 / 19 / 2004

Amount of Each Disbursement this Period: 980.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Lou's Deli

Mailing Address 8220 W. McNichols Road

City: Detroit State: MI Zip Code: 48221

Purpose of Disbursement: Catering Expense

Candidate Name:

Category/Type: 006

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2008 X Primary General Other (specify)

Transaction ID: D277
Date of Disbursement: 10 / 14 / 2004

Amount of Each Disbursement this Period: 279.84

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address 100 North Tryon Street

City: Bank Of America State: NC Zip Code: 28255

Purpose of Disbursement: Credit Card Payment, see below.

Candidate Name:

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2008 X Primary General Other (specify)

Transaction ID: D280
Date of Disbursement: 11 / 08 / 2004

Amount of Each Disbursement this Period: 955.18

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 2215.02

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use seperate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.
Full Name (Last, First, Middle Initial)
Hertz

Mailing Address 1 Detroit Metropolitan Airport

City: Detroit State: MI Zip Code: 48242

Purpose of Disbursement: Rental Car Expense

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2008 X Primary General Other (specify)

Transaction ID: D282
Date of Disbursement: M M / D D / Y Y Y Y 11 / 08 / 2004

Amount of Each Disbursement this Period: 430.97

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address 5101 Northwest Drive

City: Saint Paul State: MN Zip Code: 55111

Purpose of Disbursement: Airfare Expense

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2008 X Primary General Other (specify)

Transaction ID: D281
Date of Disbursement: M M / D D / Y Y Y Y 11 / 08 / 2004

Amount of Each Disbursement this Period: 509.21

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 5929.17

25020032116

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use seperate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.
Full Name (Last, First, Middle Initial)
12th District Democratic Party

Mailing Address 28411 Gratiot Avenue

City: Roseville State: MI Zip Code: 48066

Purpose of Disbursement: Donation

Candidate Name:

Category/Type: 012

Office Sought: House / Senate / President

State: District:

Disbursement For: 2008 X Primary General Other (specify)

Transaction ID: D278
Date of Disbursement: 10 / 29 / 2004

Amount of Each Disbursement this Period: 3000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Donation

B.
Full Name (Last, First, Middle Initial)
Alaska Democratic Party

Mailing Address 2000 E. Dowling Road

City: Anchorage State: AK Zip Code: 99507

Purpose of Disbursement: Donation

Candidate Name:

Category/Type: 012

Office Sought: House / Senate / President

State: District:

Disbursement For: 2008 X Primary General Other (specify)

Transaction ID: D288
Date of Disbursement: 10 / 27 / 2004

Amount of Each Disbursement this Period: 4000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Cantwell 2006

Mailing Address 503 Capitol Court, NE
Suite 100

City: Washington State: DC Zip Code: 20002

Purpose of Disbursement: Donation

Candidate Name: Maria Cantwell

Category/Type: 012

Office Sought: House / X Senate / President

State: WA District:

Disbursement For: 2008 X Primary General Other (specify)

Transaction ID: D293
Date of Disbursement: 12 / 16 / 2004

Amount of Each Disbursement this Period: 1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

For 2006 Primary Election

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 8000.00

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 18 / 21

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☐ 20a	☐ 20b	☐ 20c	☒ 21

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.

Full Name (Last, First, Middle Initial)
Cantwell 2006

Mailing Address 503 Capitol Court, NE
Suite 100

City Washington | State DC | Zip Code 20002

Purpose of Disbursement
Donation

Candidate Name
Maria Cantwell

012 Category/ Type

Office Sought: House / X Senate / President

State: WA District:

Disbursement For: 2008
Primary X General
Other (specify)

Transaction ID: D303
Date of Disbursement
12 / 16 / 2004

Amount of Each Disbursement this Period
1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

For 2006 General Election

B.

Full Name (Last, First, Middle Initial)
Friends of Hillary

Mailing Address 1717 K Street, NW
Suite 309A

City Washington | State DC | Zip Code 20036

Purpose of Disbursement
Donation

Candidate Name
Hillary Clinton

012 Category/ Type

Office Sought: House / X Senate / President

State: NY District:

Disbursement For: 2008
Primary X General
Other (specify)

Transaction ID: D304
Date of Disbursement
12 / 10 / 2004

Amount of Each Disbursement this Period
1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

For 2006 General Election

C.

Full Name (Last, First, Middle Initial)
Friends of Hillary

Mailing Address 1717 K Street, NW
Suite 309A

City Washington | State DC | Zip Code 20036

Purpose of Disbursement
Donation

Candidate Name
Hillary Clinton

012 Category/ Type

Office Sought: House / X Senate / President

State: NY District:

Disbursement For: 2008
X Primary General
Other (specify)

Transaction ID: D292
Date of Disbursement
12 / 10 / 2004

Amount of Each Disbursement this Period
1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

For 2006 Primary Election

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

TOTAL This Period (last page this line number only) ▶

25020032118

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A. Full Name (Last, First, Middle Initial)
Kentucky Democratic Party Coordinated Campaign

Mailing Address 3553 Lexington Road

City: Winchester State: KY Zip Code: 40391

Purpose of Disbursement: Donation

Candidate Name:

Category/Type: 012

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2008 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D287
Date of Disbursement: 10/27/2004

Amount of Each Disbursement this Period: 4000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Martin Frost Campaign Committee

Mailing Address 6 E Street, SE

City: Washington State: DC Zip Code: 20003

Purpose of Disbursement: Donation

Candidate Name: Martin Frost

Category/Type: 012

Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 24

Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D260
Date of Disbursement: 10/07/2004

Amount of Each Disbursement this Period: 1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

For 2004 General Election

C. Full Name (Last, First, Middle Initial)
Maynard for Michigan Committee

Mailing Address Suite 417 Northbank Center
432 N. Saginaw Street

City: Flint State: MI Zip Code: 48502

Purpose of Disbursement: Donation

Candidate Name:

Category/Type: 012

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2008 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D259
Date of Disbursement: 10/11/2004

Amount of Each Disbursement this Period: 500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

For 2004 Election

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5500.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use seperate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.
Full Name (Last, First, Middle Initial)
Michigan Democratic Party

Mailing Address 606 Townsend

City: Lansing State: MI Zip Code: 48933

Purpose of Disbursement: Excess Campaign Funds

Candidate Name:

Office Sought: House / Senate / President

State: District:

Disbursement For: 2008 X Primary General Other (specify)

Category/Type: 012

Transaction ID: D289

Date of Disbursement: 10 / 15 / 2004

Amount of Each Disbursement this Period: 20000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Excess Campaign Funds

B.
Full Name (Last, First, Middle Initial)
Michigan Democratic Party

Mailing Address 606 Townsend

City: Lansing State: MI Zip Code: 48933

Purpose of Disbursement: Excess Campaign Funds

Candidate Name:

Office Sought: House / Senate / President

State: District:

Disbursement For: 2008 X Primary General Other (specify)

Category/Type: 012

Transaction ID: D283

Date of Disbursement: 11 / 01 / 2004

Amount of Each Disbursement this Period: 15000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Excess Campaign Funds

C.
Full Name (Last, First, Middle Initial)
Oklahoma Democratic Party

Mailing Address 4100 N. Lincoln Blvd.

City: Oklahoma City State: OK Zip Code: 73105

Purpose of Disbursement: Donation

Candidate Name:

Office Sought: House / Senate / President

State: District:

Disbursement For: 2008 X Primary General Other (specify)

Category/Type: 012

Transaction ID: D284

Date of Disbursement: 10 / 27 / 2004

Amount of Each Disbursement this Period: 4000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 39000.00

TOTAL This Period (last page this line number only) ▶

25020032120

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Friends of Senator Carl Levin

A.
Full Name (Last, First, Middle Initial)
South Carolina Democratic Party

Mailing Address 1517 Blanding Street

City: Columbia | State: SC | Zip Code: 29201

Purpose of Disbursement: Donation

Candidate Name:

012 Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: 2008 X Primary General Other (specify)

Transaction ID: D285
Date of Disbursement: 10 / 27 / 2004

Amount of Each Disbursement this Period: 4000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
South Dakota Democratic Party

Mailing Address Victory 2004
2701 S. Minnesota Avenue

City: Sioux Falls | State: SD | Zip Code: 57105

Purpose of Disbursement: Donation

Candidate Name:

012 Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: 2008 X Primary General Other (specify)

Transaction ID: D285
Date of Disbursement: 10 / 27 / 2004

Amount of Each Disbursement this Period: 4000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 8000.00

TOTAL This Period (last page this line number only) ▶ 63500.00

25020032121
25020032121

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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Postmark

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Date of Receipt

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Date of Receipt

RD 01-28-05
Preparer Date Prepared

25020032122
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