

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Flynn for Congress

ADDRESS (number and street)

PO box 182152

Check if different than previously reported. (ACC)

Shelby Township

MI

48318

2. FEC IDENTIFICATION NUMBER ▼

C C00574087

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MI

10

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Barbara Bulic

Signature of Treasurer Barbara Bulic

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Flynn for Congr

Report Covering the Period: From: / / To: / /

	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(e))....	17200.00	23775.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	17200.00	23775.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	35514.12	42089.12
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	35514.12	42089.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6688.02	
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).....	25000.00	

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 3 (Revised 12/2003)

Write or Type Committee Name

Flynn for Congrss

Report Covering the Period: From: / / To: / /

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).....	17000.00	23575.00
(ii) Unitemized.....	200.00	200.00
(iii) TOTAL of contributions from individuals ▶	17200.00	23775.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	17200.00	23775.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	25000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	25000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	2.14	2.14
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	17202.14	48777.14

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35514.12	42089.12
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	0.00
(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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	35514.12	42089.12

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	25000.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	17202.14
25. SUBTOTAL (add Line 23 and Line 24).....	42202.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35514.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6688.02

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 5 OF 23
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 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)
Flynn for Congr

A. Full Name (Last, First, Middle Initial)
Joseph Caradonna

Mailing Address 6424 Academy Drive

City Washington State MI Zip Code 48094

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation home builder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2015

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period
 500.00
 donation

B. Full Name (Last, First, Middle Initial)
dr James Cho

Mailing Address 3759 red maple ct

City oakland State MI Zip Code 48363

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4199

Amount of Each Receipt this Period
 500.00
 donation

C. Full Name (Last, First, Middle Initial)
Gene D'Agostini

Mailing Address 38700 Van dyke ste 200

City sterling heights State MI Zip Code 48312

FEC ID number of contributing federal political committee. **C**

Name of Employer titian group Occupation real estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period
 500.00
 donation

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Flynn for Congr

A. Full Name (Last, First, Middle Initial)
michael dinello

Mailing Address 12870 honey locust dr

City shelby township State MI Zip Code 48315

FEC ID number of contributing federal political committee. **C**

Name of Employer vanguard Occupation owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4177

Amount of Each Receipt this Period
 500.00

donation

B. Full Name (Last, First, Middle Initial)
john dinoto

Mailing Address 48455 diana ct

City shelby township State MI Zip Code 48315

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation builder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period
 500.00

donation

C. Full Name (Last, First, Middle Initial)
Tony J Gallo

Mailing Address 6303 26 mile road

City washington State MI Zip Code 48094

FEC ID number of contributing federal political committee. **C**

Name of Employer gallow companies Occupation owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 01 / 2015

Transaction ID : SA11AI.4204

Amount of Each Receipt this Period
 500.00

donation

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Flynn for Congr

Full Name (Last, First, Middle Initial) robert huth		Date of Receipt MM / DD / YYYY 04 / 22 / 2015
Mailing Address 19500 hall road		Transaction ID : SA11AI.4179
City clinton township	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer kirk and huth	Occupation attorney	donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) suzanne huth		Date of Receipt MM / DD / YYYY 04 / 22 / 2015
Mailing Address 2486 hawthorne		Transaction ID : SA11AI.4180
City shelby township	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer kirk and huth	Occupation adimin	donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Greg Iacobelli		Date of Receipt MM / DD / YYYY 06 / 05 / 2015
Mailing Address 53639 Christy Drive		Transaction ID : SA11AI.4226
City Chesterfield	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Acadia Homes	Occupation Owner	contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 OF 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Flynn for Congr

A. Full Name (Last, First, Middle Initial)
mark kassab

Mailing Address 31550 nw hwy
ste 220

City State Zip Code
farmington MI 48334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
m. shapiro real estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 24 / 2015

Transaction ID : SA11AI.4181

Amount of Each Receipt this Period
 1500.00
 donation

B. Full Name (Last, First, Middle Initial)
fazal khan

Mailing Address 43279 schoenherr

City State Zip Code
sterling heights MI 48313

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
fazal khan and assoc engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period
 1500.00
 donation

C. Full Name (Last, First, Middle Initial)
bob kirk

Mailing Address 19500 hall road

City State Zip Code
clinton township MI 48038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
kirk and huth attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4184

Amount of Each Receipt this Period
 750.00
 donation

SUBTOTAL of Receipts This Page (optional).....

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

3750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 23
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Flynn for Congr

A. Full Name (Last, First, Middle Initial)
cathy kirk

Mailing Address 37539 hidden valley ct

City clinton township State MI Zip Code 48036

FEC ID number of contributing federal political committee. **C**

Name of Employer automotive Occupation sr account manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
 500.00

donation

B. Full Name (Last, First, Middle Initial)
frank lalama

Mailing Address 56841 copperfield dr

City shelby township State MI Zip Code 48316

FEC ID number of contributing federal political committee. **C**

Name of Employer vanguard Occupation owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4185

Amount of Each Receipt this Period
 500.00

donation

C. Full Name (Last, First, Middle Initial)
craig lange

Mailing Address 19500 hall road

City clinton township State MI Zip Code 48038

FEC ID number of contributing federal political committee. **C**

Name of Employer kirk and huth Occupation attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4186

Amount of Each Receipt this Period
 500.00

donation

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 10 OF 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Flynn for Congr

A. Full Name (Last, First, Middle Initial)
anthony lombardo

Mailing Address 56075 ken charles

City State Zip Code
shelby township MI 48316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
lombardo homes owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4187

Amount of Each Receipt this Period
500.00

donation

B. Full Name (Last, First, Middle Initial)
gene lovell

Mailing Address 24300 little mack

City State Zip Code
st clar shores MI 48080

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
first state bank president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4188

Amount of Each Receipt this Period
500.00

donation

C. Full Name (Last, First, Middle Initial)
joe oram

Mailing Address 4585 arline

City State Zip Code
west bloomfield MI 48323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
outdoor signs owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4190

Amount of Each Receipt this Period
500.00

donation

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 11 OF 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Flynn for Congr

A. Full Name (Last, First, Middle Initial)
anthony penna

Mailing Address 37351 willow lane

City clinton township State MI Zip Code 48036

FEC ID number of contributing federal political committee. **C**

Name of Employer moore and penna Occupation attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4191

Amount of Each Receipt this Period
 500.00
 donation

B. Full Name (Last, First, Middle Initial)
phil ruggeri

Mailing Address 55764 st regus

City shelby township State MI Zip Code 48315

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4192

Amount of Each Receipt this Period
 500.00
 donation

C. Full Name (Last, First, Middle Initial)
bill scalabrino

Mailing Address 47786 vandyke

City shelby township State MI Zip Code 48317

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation builder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4193

Amount of Each Receipt this Period
 500.00
 donation

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 12 OF 23
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Flynn for Congr

A. Full Name (Last, First, Middle Initial)
larry scott

Mailing Address 12900 hall road

City State Zip Code
sterling heights MI 48313

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
oreilly rancillio attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period
500.00

donation

B. Full Name (Last, First, Middle Initial)
meridith shanle

Mailing Address 66 stanton lane

City State Zip Code
grosse pointe MI 48236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
mfci president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period
500.00

donation

C. Full Name (Last, First, Middle Initial)
shant shirineian

Mailing Address 23670 ryan

City State Zip Code
warren MI 48091

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self auto body repair

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4196

Amount of Each Receipt this Period
1000.00

donation

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 23
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Flynn for Congr

A. Full Name (Last, First, Middle Initial)
shant shirineian

Mailing Address 23670 ryan

City warren State MI Zip Code 48091

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation auto body repair

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 30 / 2015

Transaction ID : SA11AI.4202

Amount of Each Receipt this Period
500.00
donation

B. Full Name (Last, First, Middle Initial)
edita torres

Mailing Address 5865 jackelyn

City washington State MI Zip Code 48094

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4197

Amount of Each Receipt this Period
500.00
donation

C. Full Name (Last, First, Middle Initial)
Paul Viar

Mailing Address 53134 alyssa ct.

City shelby township State MI Zip Code 48315

FEC ID number of contributing federal political committee. **C**

Name of Employer charter township of shelby Occupation trustee

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4198

Amount of Each Receipt this Period
1000.00
donation

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

17000.00

**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 14 OF 23			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Flynn for Congr

Full Name (Last, First, Middle Initial) A. Barbara Bulic		Date of Disbursement MM / DD / YYYY 04 / 01 / 2015
Mailing Address PO Box 182515		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4162
City Shelby Township	State MI	
Purpose of Disbursement consulting fees	Category/ Type 001	
Candidate Name Flynn for Congr		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 10		

Full Name (Last, First, Middle Initial) B. Barbara Bulic		Date of Disbursement MM / DD / YYYY 04 / 24 / 2015
Mailing Address PO Box 182515		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4173
City Shelby Township	State MI	
Purpose of Disbursement consulting	Category/ Type 001	
Candidate Name Flynn for Congr		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 10		

Full Name (Last, First, Middle Initial) c. Barbara Bulic		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address PO Box 182515		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4223
City Shelby Township	State MI	
Purpose of Disbursement consulting fees	Category/ Type 001	
Candidate Name Flynn for Congr		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 10		

SUBTOTAL of Disbursements This Page (optional).....	6000.00
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 15 OF 23			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Flynn for Congr

A. c and g newspapers

Full Name (Last, First, Middle Initial)
Mailing Address 13650 e. 11 mile

City warren State MI Zip Code 48089

Purpose of Disbursement newspaper ads

Candidate Name Flynn for Congr

Office Sought: House Senate President
State: MI District: 10

Disbursement For: 2016 Primary General Other (specify)

Date of Disbursement 06 / 26 / 2015

Amount of Each Disbursement this Period 1405.00

Transaction ID : SB17.4245

B. Michelle Condne

Full Name (Last, First, Middle Initial)
Mailing Address 28750 Apollo Dr

City Chesterfield State MI Zip Code 48047

Purpose of Disbursement contract labor

Candidate Name Flynn for Congr

Office Sought: House Senate President
State: MI District: 10

Disbursement For: 2016 Primary General Other (specify)

Date of Disbursement 04 / 23 / 2015

Amount of Each Disbursement this Period 500.00

Transaction ID : SB17.4172

c. Michelle Condne

Full Name (Last, First, Middle Initial)
Mailing Address 28750 Apollo Dr

City Chesterfield State MI Zip Code 48047

Purpose of Disbursement contract office staff

Candidate Name Flynn for Congr

Office Sought: House Senate President
State: MI District: 10

Disbursement For: 2016 Primary General Other (specify)

Date of Disbursement 06 / 01 / 2015

Amount of Each Disbursement this Period 350.00

Transaction ID : SB17.4224

SUBTOTAL of Disbursements This Page (optional) 2255.00

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 16 OF 23			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Flynn for Congr

Full Name (Last, First, Middle Initial) A. Michelle Condne		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 28750 Apollo Dr		Amount of Each Disbursement this Period 471.88 Transaction ID : SB17.4236
City Chesterfield	State MI	
Purpose of Disbursement contract office staff		Category/ Type
Candidate Name Flynn for Congr		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

Full Name (Last, First, Middle Initial) B. kmart		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 7601 23 mile road		Amount of Each Disbursement this Period 408.94 Transaction ID : SB17.4210
City shelby township	State MI	
Purpose of Disbursement office supplies		Category/ Type 001
Candidate Name Flynn for Congr		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

Full Name (Last, First, Middle Initial) c. Lasercom		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2015
Mailing Address 2230 Elliott		Amount of Each Disbursement this Period 8028.20 Transaction ID : SB17.4168
City Troy	State MI	
Purpose of Disbursement mailing expense		Category/ Type 004
Candidate Name Flynn for Congr		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

SUBTOTAL of Disbursements This Page (optional).....	8909.02
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 17 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Flynn for Congr

Full Name (Last, First, Middle Initial) A. Lasercom		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2015
Mailing Address 2230 Elliott		Amount of Each Disbursement this Period 8028.26
City Troy	State MI	
Purpose of Disbursement campaign mailing	Category/ Type 004	
Candidate Name		Transaction ID : SB17.4201
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Macomb Daily		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 19176 Hall Rd		Amount of Each Disbursement this Period 2128.00
City clinton township	State MI	
Purpose of Disbursement newspaper ad	Category/ Type 004	
Candidate Name Flynn for Congr		Transaction ID : SB17.4221
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

Full Name (Last, First, Middle Initial) c. Mystar Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 4276 Four Seasons Court		Amount of Each Disbursement this Period 500.00
City Shelby Township	State MI	
Purpose of Disbursement IT support	Category/ Type 001	
Candidate Name Flynn for Congr		Transaction ID : SB17.4161
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

SUBTOTAL of Disbursements This Page (optional).....	10656.26
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 OF 23			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Flynn for Congr

Full Name (Last, First, Middle Initial) A. sign outfitters		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 4176 6th street		Amount of Each Disbursement this Period 370.59 Transaction ID : SB17.4239
City wyandotte	State MI	
Purpose of Disbursement yard signs		Category/ Type 004
Candidate Name Flynn for Congr		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

Full Name (Last, First, Middle Initial) B. us post office		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 22 mile road		Amount of Each Disbursement this Period 441.00 Transaction ID : SB17.4246
City shelby township	State MI	
Purpose of Disbursement stamps		Category/ Type
Candidate Name Flynn for Congr		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

Full Name (Last, First, Middle Initial) c. victory phones		Date of Disbursement MM / DD / YYYY 05 / 12 / 2015
Mailing Address 190 monroe ave		Amount of Each Disbursement this Period 620.00 Transaction ID : SB17.4209
City grand rapids	State MI	
Purpose of Disbursement polling		Category/ Type 005
Candidate Name Flynn for Congr		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

SUBTOTAL of Disbursements This Page (optional).....	1431.59
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 19 OF 23			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Flynn for Congr

Full Name (Last, First, Middle Initial) A. villa penna		Date of Disbursement MM / DD / YYYY 04 / 21 / 2015
Mailing Address 43985 hayes		Amount of Each Disbursement this Period 780.00 Transaction ID : SB17.4171
City sterling heights	State MI	
Purpose of Disbursement catering	Category/ Type 003	
Candidate Name Flynn for Congr	Disbursement For: 2016	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 10		

Full Name (Last, First, Middle Initial) B. Younique Cards		Date of Disbursement MM / DD / YYYY 04 / 01 / 2015
Mailing Address 42816 Wilsharon		Amount of Each Disbursement this Period 1698.88 Transaction ID : SB17.4155
City Sterling Heights	State MI	
Purpose of Disbursement printing	Category/ Type 004	
Candidate Name Flynn for Congr	Disbursement For: 2016	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 10		

Full Name (Last, First, Middle Initial) c. Younique Cards		Date of Disbursement MM / DD / YYYY 04 / 09 / 2015
Mailing Address 42816 Wilsharon		Amount of Each Disbursement this Period 635.00 Transaction ID : SB17.4163
City Sterling Heights	State MI	
Purpose of Disbursement printing	Category/ Type 004	
Candidate Name Flynn for Congr	Disbursement For: 2016	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 10		

SUBTOTAL of Disbursements This Page (optional).....	3113.88
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 20 OF 23		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Flynn for Congrss

Full Name (Last, First, Middle Initial) A. Younique Cards		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2015
Mailing Address 42816 Wilsharon		Amount of Each Disbursement this Period 169.45 Transaction ID : SB17.4166
City Sterling Heights	State MI	
Zip Code 48314	Purpose of Disbursement printing	Category/ Type 004
Candidate Name Flynn for Congrss	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MI District: 10	

Full Name (Last, First, Middle Initial) B. Younique Cards		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 42816 Wilsharon		Amount of Each Disbursement this Period 55.04 Transaction ID : SB17.4169
City Sterling Heights	State MI	
Zip Code 48314	Purpose of Disbursement printing	Category/ Type 004
Candidate Name Flynn for Congrss	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MI District: 10	

Full Name (Last, First, Middle Initial) c. Younique Cards		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2015
Mailing Address 42816 Wilsharon		Amount of Each Disbursement this Period 106.42 Transaction ID : SB17.4170
City Sterling Heights	State MI	
Zip Code 48314	Purpose of Disbursement printing	Category/ Type 004
Candidate Name Flynn for Congrss	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MI District: 10	

SUBTOTAL of Disbursements This Page (optional).....	330.91
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 21 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Flynn for Congrss

Full Name (Last, First, Middle Initial) A. Younique Cards		Date of Disbursement MM / DD / YYYY 04 / 28 / 2015
Mailing Address 42816 Wilsharon		Amount of Each Disbursement this Period 1730.02 Transaction ID : SB17.4200
City Sterling Heights	State MI	
Purpose of Disbursement printing	Category/ Type 004	
Candidate Name Flynn for Congrss	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

Full Name (Last, First, Middle Initial) B. Younique Cards		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 42816 Wilsharon		Amount of Each Disbursement this Period 56.72 Transaction ID : SB17.4237
City Sterling Heights	State MI	
Purpose of Disbursement event invites	Category/ Type 003	
Candidate Name Flynn for Congrss	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

Full Name (Last, First, Middle Initial) c. Younique Cards		Date of Disbursement MM / DD / YYYY 06 / 23 / 2015
Mailing Address 42816 Wilsharon		Amount of Each Disbursement this Period 51.50 Transaction ID : SB17.4240
City Sterling Heights	State MI	
Purpose of Disbursement printing	Category/ Type 004	
Candidate Name Flynn for Congrss	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 10	

SUBTOTAL of Disbursements This Page (optional).....	1838.24
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 22 OF 23		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Flynn for Congrss

A. Younique Cards

Full Name (Last, First, Middle Initial)
Mailing Address 42816 Wilsharon

City Sterling Heights State MI Zip Code 48314

Purpose of Disbursement printing

Candidate Name **Flynn for Congrss**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: MI District: 10

Date of Disbursement: 06 / 25 / 2015

Amount of Each Disbursement this Period: 56.72

Transaction ID : SB17.4241

Category/Type: 004

B. Younique Cards

Full Name (Last, First, Middle Initial)
Mailing Address 42816 Wilsharon

City Sterling Heights State MI Zip Code 48314

Purpose of Disbursement printing

Candidate Name **Flynn for Congrss**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: MI District: 10

Date of Disbursement: 06 / 26 / 2015

Amount of Each Disbursement this Period: 49.92

Transaction ID : SB17.4242

Category/Type:

c. Younique Cards

Full Name (Last, First, Middle Initial)
Mailing Address 42816 Wilsharon

City Sterling Heights State MI Zip Code 48314

Purpose of Disbursement printing

Candidate Name **Flynn for Congrss**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: MI District: 10

Date of Disbursement: 06 / 26 / 2015

Amount of Each Disbursement this Period: 204.90

Transaction ID : SB17.4247

Category/Type:

SUBTOTAL of Disbursements This Page (optional) 311.54

TOTAL This Period (last page this line number only) 34846.44

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4101**
Flynn for Congrss

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2016
Michael Flynn Primary
 Mailing Address General
 PO Box 182152 Other (specify) ▼

City State ZIP Code
 Shelby Township MI 48318

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 25 / Y 2015 Y	M / D / Y 1/1/2018 Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text" value="25000.00"/>
TOTALS This Period (last page in this line only).....	<input type="text" value="25000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.