07/28/2011 15:32

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3X	For Other TI	nan An Autho	orized Comr	mittee	(	Office Use Only	
NAME OF COMMITTEE (in full)	USE FEC MAIL OR TYPE OR F		Example:If ty over the lines				
Michigan Doctors Polit	ical Action Committee -	Michigan State N					
<u> </u>							
ADDRESS (number and stre	P.O. Box 769	<b>)</b>					
Check if different than previously reported. (ACC)	East Lansing	<u> </u>			MI L	48826	
2. FEC IDENTIFICATION	N NUMBER 🔻	CITY	A		STATE	ZIPCODE 🛕	
C00001180			THIS X	NEW (N) <b>OR</b>	AME (A)	NDED	
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports  April 15 Quarterly Re July 15 Quarterly Re October 15 Quarterly Re January 31 Quarterly Re X July 31 Mid- Report(Non- Year Only) (I	Report Due Or  port(Q1)  port(Q2)  port(Q3)  port(YE)  Year election MY)  Report  (c) 12  PF  Re  (d) 30  Pc	Apr 20 Ap	Primary	ion (12C)	Aug 20 Sep 20 Oct 20 General (12 Special (12	Year On Dec 20 (Non-Ele Year On) O (M10) Jan 31 ( CG) in the State of	(M12 ection ily) (YE) (12R)
Termination (TER)	Report Re	eport for the:	on			in the State of	
5. Covering Period	01 01	2011	throu	gh 0 6	30	2011	
I certify that I have examine Type or Print Name of Trea Signature of Treasurer		_	ledge and belief		and complete.	28 2011	
NOTE : Submission of false	e, erroneous, or incomp	lete information r	nay subject the	person signing thi	is Report to the p	enalties of 2 U.S.C 437g	<b>1</b> -
Office Use						FEC FORM 3X	

FE6AN026

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Michigan Doctors Political Action Committee - Michigan State Medical Society D D <sup>®</sup>D 0 1 0 1 2011 0.6 3 0 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2011<sup>°</sup> 35857.23 January 1 (b) Cash on Hand at 35857.23 Begining of Reporting Period ..... 43095.00 43095.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 78952.23 78952.23 6(a) and 6(c) for Column B) ..... 23775.00 23775.00 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 55177.23 55177.23 (subtract Line 7 from Line 6(d)) ..... Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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. 06/2004) Page 3

Write or Type Committee Name

Michigan Doctors Political Action Committee - Michigan State Medical Society

м м 0 1 0 1 м°м 06 30 2 0 1 1 2011 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 23400.00 23400.00 (i) Itemized (use Schedule A) ...... 19695.00 19695.00 (ii) Unitemized ..... (iii) TOTAL (add 43095.00 43095.00 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 43095.00 43095.00 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 43095.00 43095.00 12, 13, 14, 15, 16, 17, and 18(c)) ...... 20. Total Federal Receipts 43095.00 43095.00 (subtract Line 18(c) from Line 19) .....

FE6AN026

### DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
Committees	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	23775.00	23775.00
I. Independent Expenditure (use Schedule E)	0.00	0.00
Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
5. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
8. 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 28(a), (b), and (c))	0.00	0.00
	0.00	0.00
O. Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C 431(20))     (a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	23775.00	23775.00
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	23775.00	23775.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

	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)	43095.00	43095.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
5.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	43095.00	43095.00
6.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
7.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 53 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
0	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Com	mittee - Mic	chigan State Medical Society	,
Α.	Full Name (Last, First, Middle Initial) MD Anthony A. Adeleye			Date of Receipt
	Mailing Address 20905 Greenfield Rd Suite 702			01 03 7 2011
	City Southfield	State MI	Zip Code 48075-5348	Transaction ID: SA11AI.16876
	FEC ID number of contributing federal political committee.	C	40073-3340	Amount of Each Receipt this Period  300.00
	Name of Employer Millennium Med Center, P C.	Occupatio Physicial		Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
— В.	Full Name (Last, First, Middle Initial) Doctor Shafi J. Ahmed			Date of Receipt
	Mailing Address G4007 W Court St Suite B			03 / 09 / Y Y Y Y Y Y
	City Flint	State MI	Zip Code 48532	Transaction ID: SA11AI.16879
	FEC ID number of contributing federal political committee.	C	+0002	Amount of Each Receipt this Period 500.00
	Name of Employer Self	Occupatio Physicia		
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
_ C.	Full Name (Last, First, Middle Initial) Doctor Robert Lewis Alexander			Date of Receipt
	Mailing Address 20905 Greenfield			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.16883
	Southfield  FEC ID number of contributing federal political committee.	C	48075	Amount of Each Receipt this Period  300.00
	Name of Employer Self	Occupatio Physicia		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			1100.00
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 53 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to ommittee - Michigan State Medical Society	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Doctor David S. Balle Mailing Address 18050 Mack Ave  City Grosse Pointe  FEC ID number of contributing federal political committee.	State Zip Code MI 48230-6121	Date of Receipt  M M M / D D / Y Y Y Y Y  O 1
Name of Employer Grosse Pointe Dermatology Association Receipt For:  Primary General Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date   300.00	
Full Name (Last, First, Middle Initial) Doctor John G. Bizon  Mailing Address 3600 Capital Ave SV Suite 204  City  Battle Creek	State Zip Code	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Brookside ENT Hearing Services Receipt For:  Primary General Other (specify)	Occupation PHYSICIAN Aggregate Year-to-Date  300.00	Amount of Each Receipt this Period  300.00
Full Name (Last, First, Middle Initial) Doctor Cathy O. Blight  Mailing Address One Hurley Plaza Dept of Pathology  City Flint  FEC ID number of contributing federal political committee.  Name of Employer Pathology Associates, PC  Receipt For: Primary General	State Zip Code MI 48503-5902  C  Occupation PHYSICIAN  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  O 2
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	)	1100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 53 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Col	mmittee - Mic	chigan State Medical Society	,
	Full Name (Last, First, Middle Initial) Doctor Lee A. Bricker			Date of Receipt
	Mailing Address 1000 Oakland Dr			04 / 19 / 2011
	City Kalamazoo	State MI	Zip Code 49008	Transaction ID: SA11AI.16898
	FEC ID number of contributing federal political committee.	C	49000	Amount of Each Receipt this Period  250.00
	Name of Employer Self	Occupation Physicia		
	Receipt For:  Primary  General  Other (specify) ▼	_ ' - '	e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Doctor Edward Christopher Bush			Date of Receipt
	Mailing Address 14241 Pennsylvania	Ave.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.16903
	Riverview	MI	48193	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupatio Physicia		
	Receipt For:	<del>, ' '                                 </del>	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
_	Full Name (Last, First, Middle Initial) Doctor Bruce E. Carl			Date of Receipt
	Mailing Address 64580 Van Dyke Suite D			0 1 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.16908
	Washington FEC ID number of contributing federal political committee.	C	48095-2857	Amount of Each Receipt this Period  300.00
	Name of Employer Garfield Family Practice Associates, P	Occupation PHYSIC		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)	1		850.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the led Summary Page	FOR LINE NUMBER: PAGE 9 / 53 (check only one)    X   11a
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Con	e name and address of a	any political committee to	o solicit contributions from such committee.
Z	Full Name (Last, First, Middle Initial)	- Wildingan C	nate Medical Godlery	
۱.	Doctor Michael D. Chafty  Mailing Address 7920 Kirkland Court			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City	· ·	Code	Transaction ID: SA11AI.16910
	Portage	MI 490	)24	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer Kalamazoo Anesthesiology, PC	Occupation PHYSICIAN		
	Receipt For:	Aggregate Year-to-	Date ▼	
	Primary General Other (specify) ▼	0 0 0 0	300.00	
_	Full Name (Last, First, Middle Initial) Doctor R. Paul Clodfelder			Date of Receipt
	Mailing Address 4854 N. Quail Crest D	r. SE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		Code	Transaction ID: SA11AI.16918
	Grand Rapids	MI 495	546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		225.00
	Name of Employer Retired	Occupation PHYSICIAN		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-	Date ▼ 225.00	]
_	Full Name (Last, First, Middle Initial) Doctor Donald P. Condit			Date of Receipt
	Mailing Address 1000 E Paris Ave SE Suite 115			05 / 02 / 2011
	City		Code	Transaction ID: SA11AI.16921
	Grand Rapids	MI 495	546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-	Date ▼ 300.00	
		•		825.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 53 (check only one)    X   11a
or fo	or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and ad	dress of any political committee to	
	Michigan Doctors Political Action Co	mmittee - Mic	chigan State Medical Society	,
	Full Name (Last, First, Middle Initial) Barbara Davis			Date of Receipt
	Mailing Address 6575 Sunburst Dr			06 28 2011
(	City	State	Zip Code	Transaction ID: SA11AI.16927
-	Portage	MI	49024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		225.00
_	Name of Employer Advanced Radiology Servic- es, PC	Occupatio PHYSIC		
I	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 225.00	1
	Full Name (Last, First, Middle Initial) Doctor Robert B. Davis	0 0	0 0 0 0 0 0 0 0	Date of Receipt
Ī	Mailing Address 524 S Park St			06 06 2011
	City	State	Zip Code	Transaction ID: SA11AI.16929
-	Kalamazoo	MI	49007-5179	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		225.00
-	Name of Employer Self	Occupatio Physicia		
I	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		225.00	
	Full Name (Last, First, Middle Initial) Doctor Dean Donald Downs			Date of Receipt
ı	Mailing Address 3333 Evergreen Dr N	E		0 6 2 2 2 0 1 1
(	City	State	Zip Code	Transaction ID: SA11AI.16941
_	Grand Rapids	MI	49525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
_	Name of Employer Self	Occupatio Physicia	n	
!	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	IBTOTAL of Receipts This Page (optional)	1		700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 53 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Com			
Full Name (Last, First, Middle Initial)  Doctor Mark D. Dykowski  Mailing Address 35046 Woodward Ave Suite 100			Date of Receipt  0 2
City	State	Zip Code	Transaction ID: SA11AI.16944
<u>Birmingham</u>	MI	48009-0932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Generations OB-GYN Centers	Occupatio Physicial		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Doctor Kenneth Elmassian  Mailing Address 405 W Greenlawn Ave			Date of Receipt
Suite 106			03 11 2011
City	State	Zip Code	Transaction ID: SA11AI.16950
<u>Lansing</u>	MI	48910	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer SELF	Occupatio PHYSICI		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Doctor Todd Emery			Date of Receipt
Mailing Address 3333 Evergreen Dr NE			0 6 2 2 2 1 1
City	State	Zip Code	Transaction ID: SA11AI.16952
Grand Rapids	MI	49525	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Self	Occupatio Physicia	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)			900.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 53 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Com	e name and add	dress of any political committee t	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Doctor Paul O. Farr  Mailing Address 310 Lafayette Street S Suite 400  City Grand Rapids  FEC ID number of contributing federal political committee.  Name of Employer Grand River Gastroenterology, PC Receipt For:	State MI  C  Occupation PHYSICI		Date of Receipt  O 1  O 3
Primary General Other (specify)	99 19 11	300.00	
Doctor Jerome H. Finkel  Mailing Address 133 S Main St Suite D  City  Mount Clemens  FEC ID number of contributing federal political committee.  Name of Employer Internal Medicine Associates of Mt. Cl  Receipt For:  Primary General  Other (specify)	State MI  C  Occupation Physician Aggregate		Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Doctor Christopher M. Flynn  Mailing Address 175 College St PO Box 1695  City  Battle Creek  FEC ID number of contributing federal political committee.  Name of Employer Regional Pathology Consultants, PC  Receipt For: Primary General Other (specify)	State MI  C  Occupation Physician  Aggregate		Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)			1025.00

	EDULE A (FEC Form 3X)  IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 53 (check only one)    X   11a
or for o	cormation copied from such Reports and commercial purposes, other than using the OF COMMITTEE (In Full) chigan Doctors Political Action Co	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>Doc</u>	Name (Last, First, Middle Initial) stor Gregory J. Forzley			Date of Receipt
	ling Address 200 Jefferson Ave SE		7:n Oada	03 11 2011
City Gr:	and Rapids	State MI	Zip Code 49503	Transaction ID: SA11AI.16960  Amount of Each Receipt this Period
FE	C ID number of contributing eral political committee.	C	10000	300.00
Nar Sel	me of Employer f	Occupation Physician		
Red	ceipt For:  Primary General  Other (specify) ▼	<del>- '                                   </del>	Year-to-Date ▼ 300.00	
	Name (Last, First, Middle Initial) tor James D. Grant			Date of Receipt
Mai	ling Address 1719 W Big Beaver F	Rd		03 / D D / Y Y Y Y Y 1 1 1 2 0 1 1
City		State	Zip Code	Transaction ID: SA11AI.16971
	OV  C ID number of contributing eral political committee.	C	48084	Amount of Each Receipt this Period  300.00
Sou	ne of Employer uth Oakland Anesthesiol- st Associa	Occupation PHYSICI.		
	ceipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
	Name (Last, First, Middle Initial)			Date of Receipt
	ling Address 3333 Evergreen Drive	e N.E.		06 22 2011
City	and Rapids	State MI	Zip Code 49525	Transaction ID: SA11AI.16972
FE	C ID number of contributing eral political committee.	C	49020	Amount of Each Receipt this Period  225.00
Nar Sel	ne of Employer f	Occupation Physician		
Rec	ceipt For:  Primary  General  Other (specify) ▼	<del>-, '                                   </del>	Year-to-Date ▼ 225.00	
SUBT	OTAL of Receipts This Page (optional)			825.00

City Grand Rapids MI 49506  FEC ID number of contributing federal political committee.  Name of Employer Self  Primary Other (specify) ▼  Full Name (Last, First, Middle Initial) Doctor Ronald N. Horowitz  Mailing Address Lansing  FEC ID number of contributing federal political committee.  Full Name (Last, First, Middle Initial) City State Lansing  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Hosp. Box 30480  City State Lansing  FEC ID number of contributing federal political committee.  Name of Employer Capital Pathology, PC Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Doctor William A. Howard Mailing Address 224 Circle Dr  City State Zip Code Transaction ID: SA11Al. 16982 Amount of Each Receipt this Peric  Date of Receipt  Transaction ID: SA11Al. 16982  Amount of Each Receipt Tiss Peric  Date of Receipt  Transaction ID: SA11Al. 16983  Transaction ID: SA11Al. 16983  Amount of Each Receipt Tiss Peric  Transaction ID: SA11Al. 16983  Amount of Each Receipt Tiss Peric  Transaction ID: SA11Al. 16983  Amount of Each Receipt Tiss Peric  Transaction ID: SA11Al. 16983  Amount of Each Receipt Tiss Peric	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 53 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Full Name (Last, First, Middle Initial) Doctor Gregory S. Hondorp  Maling Address 2931 Pioneer Club Rd SE  City State Zip Code Grand Rapids MI 49506  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Hosp. Box 30480  City State Zip Code Physician  Receipt For: Primary General Other (specify) ▼  State Zip Code Physician  Aggregate Year-to-Date ▼  Transaction ID: SA11A1.16981  Amount of Each Receipt this Peric  Solo.  Date of Receipt  Date of Receipt  Date of Receipt  Date of Receipt  Transaction ID: SA11A1.16982  Amount of Each Receipt this Peric  Solo.  Date of Receipt  Transaction ID: SA11A1.16982  Amount of Each Receipt this Peric  Primary General  Date of Receipt  Date of Receipt  Transaction ID: SA11A1.16982  Amount of Each Receipt this Peric  Date of Receipt  Transaction ID: SA11A1.16982  Amount of Each Receipt this Peric  Primary General  Date of Receipt  Transaction ID: SA11A1.16982  Amount of Each Receipt this Peric  Date of Receipt  Transaction ID: SA11A1.16982  Amount of Each Receipt this Peric  Date of Receipt  Date of Receipt  Transaction ID: SA11A1.16982  Amount of Each Receipt this Peric  Date of Receipt  Transaction ID: SA11A1.16983  Amount of Each Receipt this Peric  Date of Receipt  Transaction ID: SA11A1.16983  Amount of Each Receipt this Peric  Date of Receipt  Transaction ID: SA11A1.16983  Amount of Each Receipt this Peric  Date of Receipt  Transaction ID: SA11A1.16983  Amount of Each Receipt this Peric  Date of Receipt  Transaction ID: SA11A1.16983  Amount of Each Receipt this Peric  Date of Receipt  Transaction ID: SA11A1.16983  Transaction ID: SA11A1.16982  Transaction ID: SA11A1.1698	or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Date of Receipt  Mailing Address 2931 Pioneer Club Rd SE  City State Zip Code Grand Rapids MI 49506  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Hosp. Box 30480  City State Zip Code Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Doctor Ronald N. Horowitz  Mailing Address 1215 E Michigan Ave Sparrow Hosp. Box 30480  City State Zip Code Lansing Hecelop I For: Primary General Aggregate Year-to-Date ▼  Receipt For: Primary General Aggregate Year-to-Date ▼  Poccupation Physician  FEC ID number of contributing federal political committee.  C Date of Receipt  Date of Receipt  Transaction ID: SA11AI.16982  Amount of Each Receipt this Peric Sala Sala Sala Sala Sala Sala Sala Sal	Michigan Doctors Political Action Co.	mmittee - Michigan State Medical Society	
City State Zip Code Grand Rapids MI 49506  FEC ID number of contributing federal political committee.    Name of Employer Self   Occupation   Physician	Doctor Gregory S. Hondorp		<b>⊣</b>
Grand Rapids  MI 49506  FEC ID number of contributing federal political committee.  Name of Employer Self State Zip Code Physician  Receipt For: Primary General Occupation Physician  Aggregate Year-to-Date ▼  Transaction ID: SA11AI.16982  Amount of Each Receipt this Peric  Solo.  Date of Receipt  Transaction ID: SA11AI.16982  Amount of Each Receipt this Peric  Solo.  Date of Receipt  Transaction ID: SA11AI.16982  Amount of Each Receipt this Peric  Solo.  Transaction ID: SA11AI.16982  Amount of Each Receipt this Peric  Solo.  Solo.  Date of Receipt  Transaction ID: SA11AI.16982  Amount of Each Receipt this Peric  Solo.  Solo.  Transaction ID: SA11AI.16982  Amount of Each Receipt this Peric  Solo.  So			06 22 2011
FEC ID number of contributing federal political committee.  Name of Employer Self Primary General Other (specify) ▼			
Receipt For:	FEC ID number of contributing		500.00
Primary General Other (specify) ▼ 500.00  Full Name (Last, First, Middle Initial) Doctor Ronald N. Horowitz  Mailing Address 1215 E Michigan Ave Sparrow Hosp. Box 30480  City State Zip Code Lansing MI 48912-1811  FEC ID number of contributing federal political committee.  Name of Employer Capital Pathology, PC Primary General Other (specify) ▼ 225.00  Full Name (Last, First, Middle Initial) Doctor William A. Howard  Mailing Address 224 Circle Dr  City State Zip Code Transaction ID: SA11Al. 16982  Amount of Each Receipt this Peric 225.00  Date of Receipt  Transaction ID: SA11Al. 16983  Amount of Each Receipt Tole 1 225.00  Date of Receipt  Transaction ID: SA11Al. 16983  Amount of Each Receipt Tole 1 28 20 0 1 28 20 0 1 28 20 0 1 28 20 0 1 28 1 20 0 1 28 1 20 0 1 28 1 20 0 1 28 1 20 0 1 28 1 20 0 1 28 1 20 0 1 2 25 0 1 2	Name of Employer Self	·	
Mailing Address 1215 E Michigan Ave Sparrow Hosp. Box 30480  City State Zip Code MI 48912-1811  FEC ID number of contributing federal political committee.  Name of Employer Capital Pathology, PC Primary General Other (specify) ▼ 225.00  Fill Name (Last, First, Middle Initial) Doctor William A. Howard Mailing Address 224 Circle Dr  City State Zip Code Physician Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) Doctor William A. Howard Mailing Address 224 Circle Dr  City State Zip Code Transaction ID: SA11Al.16983 Amount of Each Receipt Transaction ID: SA11Al.16983 Amo	Primary General		
Sparrow Hosp. Box 30480  City State Zip Code Lansing MI 48912-1811  FEC ID number of contributing federal political committee.  Name of Employer Capital Pathology, PC  Primary General Other (specify) ▼  City State Zip Code Physician  Aggregate Year-to-Date ▼  Transaction ID: SA11AI.16982  Amount of Each Receipt this Peric  225.  Date of Receipt  Mailing Address 224 Circle Dr  City State Zip Code Transaction ID: SA11AI.16983  Traverse City State Zip Code Transaction ID: SA11AI.16983  Amount of Each Receipt  M M J 28 / 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Doctor Ronald N. Horowitz		Date of Receipt
Lansing MI 48912-1811  Amount of Each Receipt this Peric C			
FEC ID number of contributing federal political committee.    Name of Employer Capital Pathology, PC	•	'	Transaction ID: SA11AI.16982
Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Doctor William A. Howard  Mailing Address 224 Circle Dr  City State Zip Code Transaction ID: SA11AI.16983  Traverse City MI 49684  FEC ID number of contributing federal political committee.  Name of Employer Milliken Medical  Receipt For: Primary General  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: SA11AI.16983  Amount of Each Receipt this Perice  225.	FEC ID number of contributing		Amount of Each Receipt this Period 225.00
Primary General Other (specify) ▼	Name of Employer Capital Pathology, PC	·	
Doctor William A. Howard  Mailing Address 224 Circle Dr  City State Zip Code  Traverse City MI 49684  FEC ID number of contributing federal political committee.  Name of Employer Milliken Medical  Receipt For:  Primary General  Date of Receipt  M M	Primary General		
City State Zip Code  Traverse City MI 49684  FEC ID number of contributing federal political committee.  Name of Employer Milliken Medical  Receipt For:  Primary General  O 1 28 20 Transaction ID: SA11AI.16983  Amount of Each Receipt this Period 225.			Date of Receipt
Traverse City  MI 49684  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C 225.  Name of Employer Milliken Medical  PHYSICIAN  Receipt For:  Primary General  Aggregate Year-to-Date ▼	Mailing Address 224 Circle Dr		
FEC ID number of contributing federal political committee.  Name of Employer Milliken Medical  Receipt For: Primary General  C  Occupation PHYSICIAN  Aggregate Year-to-Date   225.00	•		Transaction ID: SA11Al.16983
Milliken Medical  PHYSICIAN  Receipt For:  Primary  General  Aggregate Year-to-Date  235.00	FEC ID number of contributing		Amount of Each Receipt this Period  225.00
Primary General	Name of Employer Milliken Medical		
	Primary General		
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		950.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 53 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Com	mittee - Michigan State Medical Society	
Full Name (Last, First, Middle Initial)  Doctor John H Huntington		Date of Receipt
Mailing Address 3333 Evergreen Dr NE		06 22 2011
City Grand Rapids	State Zip Code MI 49525-9756	Transaction ID: SA11AI.16986  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C +55E5 5756	300.00
Name of Employer Self	Occupation Physician	
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Doctor Edward G. Jankowski		Date of Receipt
Mailing Address 20867 Mack Ave Suite 2		05 02 7 2011
City	State Zip Code	Transaction ID: SA11AI.16991
Grosse Pointe Wood	MI 48236-1356	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Self	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  Doctor Daniel G. Judge		Date of Receipt
Mailing Address 31 N Saint Joseph Ave	)	M M / D D / Y Y Y Y Y Y O D D / 2011
City	State Zip Code	Transaction ID: SA11AI.16994
Niles  FEC ID number of contributing federal political committee.	MI 49120	Amount of Each Receipt this Period  225.00
Name of Employer Eden Anesthesia Services, PC	Occupation Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	-
Other (specify) ▼	225.00	
SUBTOTAL of Receipts This Page (optional)		825.00
TOTAL This Period (last page this line number	·	

ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 16 / 53   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the such as	Statements may he name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Co	ommittee - Mic	higan State Medical Society	
Full Name (Last, First, Middle Initial) Doctor William L. Kestenberg			Date of Receipt
Mailing Address 5777 W Maple Rd Suite 200			M M / D D / Y Y Y Y Y Y Y 2 0 1 1
City West Bloomfield	State MI	Zip Code 48322-2271	Transaction ID: SA11AI.17001  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	TOOLE LET I	225.00
Name of Employer Self	Occupatio Physicia		
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Doctor CASSANDRA M. KLYMAN			Date of Receipt
Mailing Address 3060 Chickering Lan	е		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bloomfield Hills	State MI	Zip Code 48302-1408	Transaction ID: SA11AI.17003
FEC ID number of contributing federal political committee.	C	40302-1400	Amount of Each Receipt this Period  300.00
Name of Employer Self	Occupatio Physicia		
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Doctor David M. Krhovsky			Date of Receipt
Mailing Address 3333 Evergreen Dr N	JE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.17008
Grand Rapids  FEC ID number of contributing federal political committee.	C	49525	Amount of Each Receipt this Period 950.00
Name of Employer Self	Occupatio Physicia		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 950.00	
SUBTOTAL of Receipts This Page (optional)			1475.00

CHEDULE A (FEC Form 3X FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 53 (check only one)    X   11a
ny information copied from such Reports an r for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pet the name and address of any political committee	
	ommittee - Michigan State Medical Soci	əty
Full Name (Last, First, Middle Initial) Doctor Scott M. Kuhnert		Date of Receipt
Mailing Address 405 W Greenlawn A Suite 106	ve	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code	Transaction ID: SA11AI.17010
Lansing	MI 48910	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Self	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Doctor Nita M. Kulkarni		Date of Receipt
Mailing Address 1170 Charter Dr Suite F		05 02 7 2011
City	State Zip Code	Transaction ID: SA11AI.17012
Flint	MI 48532	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Srinras Mukkamala, MD, PLC	Occupation Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	300.00	<u>;                                    </u>
Full Name (Last, First, Middle Initial) Doctor Adrian S. Lineberger, III		Date of Receipt
Mailing Address 3333 Evergreen Dr	NE	06 22 7 2011
City	State Zip Code	Transaction ID: SA11Al.17017
Grand Rapids	MI 49525-9756	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Anesthesia Medical Consul- tants	Occupation Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	300.00	
SUBTOTAL of Receipts This Page (optional	1	900.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 53 (check only one)    X   11a
or fo	information copied from such Reports and Si r commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	IAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Com	mittee - Mic	chigan State Medical Society	
. <u>c</u>	ull Name (Last, First, Middle Initial) Octor H. Michael Marsh, MD, MBBS			Date of Receipt
	Mailing Address 4201 Saint Antoine Suite 3J			03 11 2011
	ity Detroit	State MI	Zip Code 48201	Transaction ID: SA11AI.17027  Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	С		300.00
N	lame of Employer Self	Occupation Physicia		
R	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
<u>D</u>	full Name (Last, First, Middle Initial)			Date of Receipt
N _	Mailing Address 901 E. Mount Hope			03 / 31 / 2011
	City .	State	Zip Code	Transaction ID: SA11AI.17030
F	ansing EC ID number of contributing ederal political committee.	C	48910	Amount of Each Receipt this Period  300.00
N L	lame of Employer ansing Hernia Center	Occupation Physicia		
R	deceipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	ull Name (Last, First, Middle Initial)			Date of Receipt
_	Mailing Address 200 W Michigan Ave Suite 103			0 1 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Battle Creek	State MI	Zip Code 49017	Transaction ID: SA11AI.17032  Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C		225.00
N S	lame of Employer elf	Occupation Physicia		
R	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 225.00	
				825.00

П	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	NA - 4	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 53 (check only one)    X   11a
O	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Com	e name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial)  Doctor Daniel B. Michael  Mailing Address 29275 Northwestern H	lwy		Date of Receipt
	Suite 100 City	State	Zip Code	03 11 2011
	Southfield	MI	48034	Transaction ID: SA11AI.17033  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physicia		
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Doctor James C. Mitchiner  Mailing Address 1265 Barrister Rd	1		Date of Receipt  0 3 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11Al.17035
	Ann Arbor	MI	48105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation Physicia		
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
С.	Full Name (Last, First, Middle Initial) Doctor Harold K. Moores, III  Mailing Address 22499 200th Ave			Date of Receipt    M
	City	State	Zip Code	Transaction ID: SA11AI.17039
	Tustin	MI	49688	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		225.00
	Name of Employer Self	Occupation Physicia	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 225.00	
	SUBTOTAL of Receipts This Page (optional)	•		1025.00
Ι,	FOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 20 / 53   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Co	ommittee - Mic	higan State Medical Society	
Full Name (Last, First, Middle Initial)  Doctor Donald B. Muenk			Date of Receipt
Mailing Address 29753 Hoover Rd, S Suite A	Ste A		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Warren</u>	State MI	Zip Code 48093	Transaction ID: SA11AI.17040  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Cataract Eye Consultants of Michigan	Occupation Physician		
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Doctor Srinivas B. Mukkamala			Date of Receipt
Mailing Address 1170 Charter Drive Ste F			M M / D D / Y Y Y Y Y O D D / 2011
City <u>Flint</u>	State MI	Zip Code 48532-2714	Transaction ID: SA11AI.17041  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Srinivas Mukkamala, MD	Occupation Physician		
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Doctor Kenneth H. Musson			Date of Receipt
Mailing Address 929 Business Park I	Dr		M M / D D / Y Y Y Y Y O D D / 2 D 1 1
City Traverse City	State MI	Zip Code 49686-8683	Transaction ID: SA11AI.17042  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Grand Traverse Ophthalmol- ogy	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	]
SUBTOTAL of Receipts This Page (optional	)		900.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 53 (check only one)    X
A C	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Con	nmittee - Mic	chigan State Medical Society	,
Α.	Full Name (Last, First, Middle Initial) Doctor Bassam H. Nasr			Date of Receipt
	Mailing Address 1231 Pine Grove Average Suite 2A			03 / 11 / 2011
	City Port Huron	State MI	Zip Code 48060-3500	Transaction ID: SA11AI.17044  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40000-3300	500.00
	Name of Employer Physician HealthCare Netw- ork	Occupation Physicia		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial)  Doctor Steven E. Newman  Mailing Address 25811 W 12 Mile Roa	ıd		Date of Receipt
	City	State	Zip Code	0 3 1 1 2 0 1 1 Transaction ID: SA11Al.17046
	<u>Southfield</u>	MI	48034	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Detroit Institute of PMR	Occupation Physicia		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
_ >.	Full Name (Last, First, Middle Initial) Doctor Brian M. Nolan			Date of Receipt
	Mailing Address 1 Hurley Plaza 3B West			03 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Flint	State MI	Zip Code 48503	Transaction ID: SA11AI.17047  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Hurley Medical Center	Occupation Physicia		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional) .	1		1100.00
	TOTAL This Period (last page this line number	r only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 53 (check only one)    X
0	ny information copied from such Reports and Star for commercial purposes, other than using the n			
	Michigan Doctors Political Action Comn	nittee - Mic	higan State Medical Society	
	Full Name (Last, First, Middle Initial) Doctor Earl M. Norman			Date of Receipt
	Mailing Address 1000 Oakland Dr  Dept of Surgery			06 29 2011
	City	State	Zip Code	Transaction ID: SA11AI.17048
	Kalamazoo	MI	49008-1284	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
_	Full Name (Last, First, Middle Initial) Doctor Peggyann Nowak			Date of Receipt
	Mailing Address 6900 Orchard Lake Rd Suite 314			03 / 11 / 2011
	City West Bloomfield	State	Zip Code	Transaction ID: SA11AI.17049
	West Bloomfield  FEC ID number of contributing federal political committee.	C	48322	Amount of Each Receipt this Period  300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Doctor Michael D. Olgren			Date of Receipt
	Mailing Address 200 Jefferson Ave SE PO Box 3578			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: SA11Al.17054
	Grand Rapids	MI	49501	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Grand River Emergency Med- ical Group, P	Occupation Physician	1	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			900.00

SCHEDULE A (FEC FITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 53 (check only one)    X   11a
or for commercial purposes, other	than using the name and ac	ly not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In F Michigan Doctors Politica	•	chigan State Medical Society	/
Full Name (Last, First, Middle Doctor Harry T. Pall  Mailing Address 602 Jacks			Date of Receipt
		7: 0.1	04 19 2011
City Petoskey	State MI	Zip Code 49770	Transaction ID: SA11AI.17062  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		375.00
Name of Employer Northern Anesthesia Prividers PC	Occupation Physicia		
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Doctor Joel L. Pelavin			Date of Receipt
Mailing Address 29750 Ha	rper Ave		05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11Al.17067
Saint Clair Shores FEC ID number of contributing federal political committee.	C	48082-2607	Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Physicia		
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Doctor Craig J. Pell	nitial)		Date of Receipt
Mailing Address 3333 Eve	green Dr NE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Grand Rapids	State MI	Zip Code 49525	Transaction ID: SA11AI.17068  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		43323	225.00
Name of Employer Self	Occupation Physicial		
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Pa	ge (optional)		900.00
TOTAL This Period (last page th	is line number only)		

SCHEDULE A (FEC FOITEMIZED RECEIPTS  Any information copied from such B	Use separate schedule(s) for each category of the Detailed Summary Page eports and Statements may not be sold or used by any positive schedule for the sold or used by any positive schedule.	FOR LINE NUMBER: PAGE 24 / 53 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  erson for the purpose of soliciting contributions
or for commercial purposes, other the	nan using the name and address of any political committe	e to solicit contributions from such committee.
Full Name (Last, First, Middle Ini Doctor Venkat K. Rao  Mailing Address 3500 Calkir Suite B  City	<u>'</u>	Date of Receipt  0 3 1 0 2 0 1 1  Transaction ID: SA11AI.17074
Flint FEC ID number of contributing federal political committee.	MI 48532	Amount of Each Receipt this Period 300.00
Name of Employer Chest and Sleep Medical Consultants Receipt For:  Primary General Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date   300.00	1
Full Name (Last, First, Middle Ini Doctor James E. Richard Mailing Address 2508 S Ced	,	Date of Receipt  O 1  O 4
City	State Zip Code	Transaction ID: SA11AI.17078
Lansing FEC ID number of contributing federal political committee.	MI 48910	Amount of Each Receipt this Period 300.00
Name of Employer Cap-Lab Pathologists Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Ini Doctor Raymond R. Rudoni Mailing Address 401 S Balle	, 	Date of Receipt  0 5 0 2 2 0 1 1
City	State Zip Code	Transaction ID: SA11AI.17087
FIInt  FEC ID number of contributing federal political committee.	MI 48532	Amount of Each Receipt this Period 500.00
Name of Employer MI College of Emergency Physicians Receipt For:	Occupation Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page	e (optional)	1100.00
TOTAL This Period (last page this	line number only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 53 (check only one)    X
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Com	e name and add	dress of any political committee to	o solicit contributions from such committee.
<u>/</u> \.	Full Name (Last, First, Middle Initial) Doctor Mark C. Rummel  Mailing Address 1815 Henson Ave			Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
	City <u>Kalamazoo</u>	State MI	Zip Code 49048-1510	Transaction ID: SA11AI.17088  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Advanced Vascular Surgery, PC Receipt For:  Primary General Other (specify) ▼	Occupatio Physician Aggregate		
3.	Full Name (Last, First, Middle Initial) Doctor Aaron W. Sable  Mailing Address 13850 E 12 Mile Rd	1		Date of Receipt  0 2 1 7 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.17091
	Warren FEC ID number of contributing federal political committee.	C	48088-3730	Amount of Each Receipt this Period  300.00
	Name of Employer MI Acad. of Physical Medicine & Rehab. Receipt For:  Primary General Other (specify) ▼	Occupatio Physicial Aggregate		
	Full Name (Last, First, Middle Initial) Doctor Michael A. Sandler Mailing Address 1 Ford Place	<u> </u>		Date of Receipt
	Room 4B	State	Zip Code	0 1 1 8 2 0 1 1 Transaction ID: SA11AI.17094
	Detroit  FEC ID number of contributing federal political committee.	C	48202	Amount of Each Receipt this Period 300.00
	Name of Employer Self	Occupatio Physicial		
	Receipt For: Primary General Other (specify)	, ' · · ·	e Year-to-Date ▼ 300.00	
5	SUBTOTAL of Receipts This Page (optional)	1	<b>)</b>	900.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 53 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee ommittee - Michigan State Medical Societ	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Doctor Caroline G. M. Scott  Mailing Address 2429 Trautner Drive	)	Date of Receipt
City Saginaw FEC ID number of contributing federal political committee.	State Zip Code MI 48604-9596  C	Transaction ID: SA11AI.17097  Amount of Each Receipt this Period  300.00
Name of Employer Phoenix Family Physicians  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial) Doctor Raouf R. Seifeldin Mailing Address 461 W. Huron St		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City Pontiac  FEC ID number of contributing federal political committee.	State Zip Code MI 48341	Transaction ID: SA11AI.17098  Amount of Each Receipt this Period  225.00
Name of Employer Self  Receipt For:  Primary  General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  225.00	
Full Name (Last, First, Middle Initial) Doctor James F. Selwa Mailing Address 4201 Saint Antoine		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Suite 8D  City  Detroit  FEC ID number of contributing federal political committee.	State Zip Code MI 48201	Transaction ID: SA11AI.17100  Amount of Each Receipt this Period  300.00
Name of Employer Self  Receipt For:  Primary General Other (specify)	Occupation Physician  Aggregate Year-to-Date ▼  300.00	
SUBTOTAL of Receipts This Page (optional	]  )	825.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 53 (check only one)    X
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Michigan Doctors Political Action Con	nmittee - Mic	higan State Medical Society	,
۱.	Full Name (Last, First, Middle Initial) Doctor George H. Shade, Jr			Date of Receipt
	Mailing Address 4201 Saint Antoine Suite 2B			05 02 7 2011
	City	State MI	Zip Code	Transaction ID: SA11AI.17101
	Detroit  FEC ID number of contributing federal political committee.	C	48201	Amount of Each Receipt this Period 300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify)	<del>, ' ' '                               </del>	Year-to-Date ▼ 300.00	
 3.	Full Name (Last, First, Middle Initial) NARINDER SHERMA	1		Date of Receipt
	Mailing Address 14151 Greenfield			05 02 2011
	City	State	Zip Code	Transaction ID: SA11AI.17104
	Detroit	MI	48227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	<del>, ' '                                 </del>	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
- :.	Full Name (Last, First, Middle Initial) Doctor Richard A. Stark			Date of Receipt
	Mailing Address 900 Peeler St PO Box 4095			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: SA11AI.17115
	Kalamazoo FEC ID number of contributing federal political committee.	C	49008-2380	Amount of Each Receipt this Period  225.00
	Name of Employer Kalamazoo Anesthesiology	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	
Г		1		825.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 53 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Cor	Statements may not be sold or used by any perse name and address of any political committee to mmittee - Michigan State Medical Society	
Full Name (Last, First, Middle Initial) Doctor Kevin T. Stone  Mailing Address 1301 Mercy Dr  City Muskegon  FEC ID number of contributing federal political committee.  Name of Employer West Shore Urology, PLC  Receipt For: Primary General Other (specify)	State Zip Code MI 49444-1896  C  Occupation Physician  Aggregate Year-to-Date  300.00	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Doctor Daniel S. Thomas  Mailing Address 3333 Evergreen Drive  City  Grand Rapids  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 49525  C  Occupation Physician  Aggregate Year-to-Date  300.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: SA11AI.17124  Amount of Each Receipt this Period  300.00
Full Name (Last, First, Middle Initial) Doctor James H. Timmons  Mailing Address 5352 Beckley Rd Suite C  City Battle Creek  FEC ID number of contributing federal political committee.  Name of Employer Radiology Consultants, PLC  Receipt For: Primary General Other (specify)	State Zip Code MI 49015  C  Occupation Physician  Aggregate Year-to-Date  300.00	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	,	900.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 53 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any persithe name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Doctor J. Robert VanTimmeren Mailing Address 3333 Evergreen Dr	NE	Date of Receipt
City Grand Rapids FEC ID number of contributing	State Zip Code MI 49525-9756	Transaction ID: SA11AI.17135  Amount of Each Receipt this Period
federal political committee.  Name of Employer Self  Receipt For:	Occupation Physician Aggregate Year-to-Date	225.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	225.00	
Doctor John Charles Vassallo  Mailing Address 3399 E Grand Rivel Suite 204  City	r State Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Howell FEC ID number of contributing federal political committee.	MI 48843	Amount of Each Receipt this Period 225.00
Name of Employer Self  Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date ▼	1
Other (specify) ▼  Full Name (Last, First, Middle Initial)  MD Thomas D. Villalobos	225.00	Date of Receipt
Mailing Address 3333 Evergreen Dr		06 22 2011
City Grand Rapids  FEC ID number of contributing federal political committee.	State Zip Code MI 49525	Transaction ID: SA11AI.17139  Amount of Each Receipt this Period  250.00
Name of Employer Self	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optiona	1)	700.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 53 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A C	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Com	e name and add	dress of any political committee to	o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Doctor Jeffrey B. Walker			Date of Receipt
	Mailing Address 3333 Evergreen Dr NE			0 6 2 2 2 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.17140
	Grand Rapids  FEC ID number of contributing federal political committee.	C	49525-9756	Amount of Each Receipt this Period 250.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary  General  Other (specify)	<del>, ' ' '                               </del>	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Doctor Donald G. Weston, III  Mailing Address 3333 Evergreen Dr NE			Date of Receipt  0 6 2 2 2 2 1 1
	City	State	Zip Code	Transaction ID: SA11AI.17147
	Grand Rapids	MI	49525-9756	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify)	<del>, ' ' '                               </del>	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Doctor Gregory C. Zandstra  Mailing Address 3333 Evergreen Dr NE			Date of Receipt  0 6 2 2 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.17160
	Grand Rapids FEC ID number of contributing federal political committee.	C	49525	Amount of Each Receipt this Period  300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	, , , , , , , , , , , , , , , , , , , ,	Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)	•		800.00

Farmington Hills M FEC ID number of contributing			FOR LINE NUMBER: PAGE 31 / 53									
		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)  X 11a 11b 11c 12  13 14 15 16 17									
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.									
` '	nmittee - Mic	higan State Medical Society										
Doctor John J. Zappia  Mailing Address 30055 Northwestern F Suite 101	Hwy State	Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y									
•	MI C Occupatio	48334 n	Amount of Each Receipt this Period  225.00									
Receipt For:  Primary  General  Other (specify)	Physicial Aggregate	n e Year-to-Date ▼ 225.00										

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	225.00
TOTAL This Period (last page this line number only)	<b>•</b>	23400.00

ITEMIZED DISBURGEMENTS		Use separate schedule(s)				= NUMBER: PAGE 32 / 53 lly one)						
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	Х	23 28b	$\square$	24 28c	25 29	2 3
	y Information copied from such Reports and Stater for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Commit	e and address of any politica	al com	nmit	tee to s							
	Full Name (Last, First, Middle Initial) Barb Byrum for State Representative  Mailing Address 4523 STONE ROAD					Date	of D	isburs	_	323.1 t	6793 <sup>2</sup> 0 1	1 Y
	City Onondaga	State Zip Code MI 49264				Amou	unt o	f Each	n Dist	ursem	ent this	
	Purpose of Disbursement Political Contribution Candidate Name Barb Byrum		C	01 ateg Typ	ory/			•		•	100.0	•
	· · · · · · · · · · · · · · · · · · ·	ement For: 2012 Primary X General Other (specify)	1	- 71-								
	Full Name (Last, First, Middle Initial) Bob Genetski for State Rep  Mailing Address P O Box 1242						isburs		323.1 t	6740 Ž 0 Ĭ	1 Y	
	City Holland Purpose of Disbursement Political Contribution Candidate Name	State Zip Code MI 49422	-	01	1 Jory/	Amou	unt o	f Each	n Disk	oursem	ent this	
	Bob Genetski	ement For: 2012 Primary X General Other (specify)		Тур	•	_						
	Full Name (Last, First, Middle Initial) Bolger Restore Michigan Fund					Date	of D	isburs	emen	323.1 t		V
	Mailing Address PO Box 638					0 2	М	<sup>D</sup> 2	28	/ L	ž 0 ĭ	1 '
	City Marshall	State Zip Code MI 49068				Amou	unt o	f Each	n Dist	ursem	ent this	Period
	Purpose of Disbursement Donations Candidate Name		C	01 ateg	ory/	<u> </u>			•		1000.0	0
	Office Sought: House Disburs Senate President State: District:	ement For: 2012 Primary X General Other (specify)	1	, r								
	UBTOTAL of Disbursements This Page (optional)										225.0	<u> </u>

ITE	CHEDULE B (FEC Form 3.	USE SEDA	arate schedule(s)		NUMBER: PAGE 33 / 53
	EMIZED DISBURSEMENT	<b>S</b> for each	category of the Summary Page	(check only	7 one)
	r Information copied from such Reports are commercial purposes, other than using			d by any person f	or the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Michigan Doctors Political Action C				
	Full Name (Last, First, Middle Initial) Bruce Caswell for Senate				Transaction ID: SB23.16828 Date of Disbursement
Ī	Mailing Address 8940 E. Bacon R	oad			$\begin{bmatrix}\begin{smallmatrix}M&A&M\\O&A&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\O&G\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&1\end{smallmatrix}\end{bmatrix}$
	City Hillsdale	State MI	Zip Code 49242		Amount of Each Disbursement this Period
1	Purpose of Disbursement Political Contribution			011	250.00
	Candidate Name Bruce Caswell	Diah	0010	Category/ Type	
	Senate President	Disbursement For:  Primary  Other (spe	2012 X General ecify) ▼		
ı	State: District:  Full Name (Last, First, Middle Initial)  Chuck Moss for State Representati	ve			Transaction ID: SB23.16741 Date of Disbursement
Ī	Mailing Address 1184 Dorchester				$\begin{bmatrix}\begin{smallmatrix}M&M\\0&2&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&2&B\\2&8\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&1&1\end{smallmatrix}\end{bmatrix}$
	City Birmingham	State MI	Zip Code 48009		Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution			011	500.00
	Candidate Name			Category/ Type	
	Chuck Moss				
( (	Office Sought: House Senate President	Disbursement For: Primary Other (spe	2012 X General		
;	Office Sought: House Senate	Primary Other (spe	X General		Transaction ID: SB23.16743 Date of Disbursement
;	Office Sought:  Senate President State:  District:  Full Name (Last, First, Middle Initial)	Primary Other (spe	X General		
; ;	Office Sought:  Senate President State: District:  Full Name (Last, First, Middle Initial) Chuck Moss for State Representati	Primary Other (spe	X General		Date of Disbursement  M 2 M / D 2 B / Y Y Y O Y 1 1  Amount of Each Disbursement this Period
	Office Sought:  Senate  President  State:  District:  Full Name (Last, First, Middle Initial)  Chuck Moss for State Representati  Mailing Address  1184 Dorchester  City  Birmingham  Purpose of Disbursement  Political Contribution	Other (specified Dr. State	X General ecify) ▼  Zip Code	011	Date of Disbursement  O 2 M / D 2 B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Office Sought:    House   Senate   President     State: District:	Other (specified by the specified by the	X General ecify) ▼  Zip Code 48009	011 Category/ Type	Date of Disbursement  M 2 M / D 2 B / Y 2 0 1 1 Y  Amount of Each Disbursement this Period
	Office Sought:    House   Senate   President     State: District:	Other (specified Dr. State	X General ecify)   Zip Code 48009	Category/	Date of Disbursement  O 2 M / D 2 B / Y 2 0 1 1  Amount of Each Disbursement this Period

		Use separate schedule(s	s)		)K LINE ieck only		H:			PAG	iE 34/	53
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	X	23 28b	$\mathbf{\square}$	24 28c	25 29	2 3
	y Information copied from such Reports and State for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Commit	e and address of any politic	al com	nmitt	ee to sol							S
<u>L</u>	Full Name (Last, First, Middle Initial) Cindy Denby for State Representative  Mailing Address 9787 Amanda Drive								ement	_	6847 Ž 0 Ť	1 Y
	City Fowlerville	State Zip Code MI 48836				Amou	ınt of	Each		ursem	ent this	
	Purpose of Disbursement Political Contribution Candidate Name Cindy Denby for State Representative	40030	C	01 ateg Typ	ory/			•		0	200.00	Ò
	Office Sought:  X House Senate President State: MI District: 47	ement For: 2012 Primary X General Other (specify)	1	71-								
	Full Name (Last, First, Middle Initial) Citizens for John Gleason  Mailing Address 2617 Macomber							sburs	: SB ement		6795 Ž 0 Ĭ	1 Y
	City Flint Purpose of Disbursement Political Contribution Candidate Name	State Zip Code MI 48503	_	01 ateg		Amou	int of	f Each	i Disbi	ursem	350.00	
	John Gleason  Office Sought: House Senate President  State: District:	ement For: 2012 Primary X General Other (specify) ▼		Тур	e							
	Full Name (Last, First, Middle Initial) Citizens for John Gleason					Trans Date	of Di	sburs	ement			
	Mailing Address 2617 Macomber					0 <sup>M</sup> 6	М	<sup>′</sup> □ C	6	Y	ž 0 1	1
	City Flint	State Zip Code MI 48503				Amou	int of	Each	Disbu	-	ent this	
	Purpose of Disbursement Political Contribution Candidate Name John Gleason		C	01 ateg	ory/			•		•	1000.00	)
	Office Sought: House Disburs Senate President	ement For: 2012 Primary X General Other (specify)	<u> </u>	Тур	e							
	State: District:											

	Use separate schedule(s	()		neck on	: NUMBE lv one)	-n.		l	FAGL	35 / 5	) <u>o</u>
 EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		È	21b 27	22 28a	Х	23 28b	<u> </u>	4 8c	25 29	2 3
y Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Commit	ne and address of any politica	al com	nmit	tee to so							•
Full Name (Last, First, Middle Initial) Citizens for John Walsh Mailing Address 35041 Pembroke						of D	sburs	: SB ement		856 2 0 1 1	Y
City Livonia	State Zip Code MI 48152				Amou	unt o	f Each	Disbu		nt this F	-
Purpose of Disbursement Political Contribution Candidate Name John Walsh				jory/	L.	•				300.00	
	ement For: 2012 Primary X General Other (specify)		Тур	e	_						
Full Name (Last, First, Middle Initial) Citizens Supporting Mike Nofs  Mailing Address PO Box 219						sburs	SB ement		796 Ž 0 Ť 1	Y	
City Battle Creek Purpose of Disbursement Political Contribution	State Zip Code MI 49017	Īг	01	1	Amou	unt o	f Each	Disbu		nt this F	
Candidate Name Mike Nofs  Office Sought: House Senate President  State: District:	ement For: 2012 Primary X General Other (specify)	1	ateg Typ	jory/ ee	-						
Full Name (Last, First, Middle Initial) Committee to Elect Jase Bolger							-	: SB ement			V
Mailing Address PO Box 638					0 4			) 1 ′	Ľ.	ž 0 1 1	
City Marshall	State Zip Code MI 49068				Amoi	unt o	f Each	Disbu		nt this F	
Purpose of Disbursement Political Contribution  Candidate Name Jase Bolger			01 ateg Typ	jory/	L.		0			500.00	
Office Sought:    House   Disburs	ement For: 2012 Primary X General Other (specify)	•			-						
UBTOTAL of Disbursements This Page (optional)							•		0.5	500.00	

			-		arate schedule(s)			R LINE eck only						iL :		
ITE	EMIZED DISBUR	SEMENT	S 		category of the Summary Page			21b 27	22 28a	Х	23 28b	$ldsymbol{\sqcup}$	24 28c		25 29	26 30
or fo	Information copied from sor commercial purposes, on NAME OF COMMITTEE (Michigan Doctors Politics)	ther than using (In Full)	the name	and addre	ss of any political	comr	nitte	ee to sol								
$\angle$					gan claic mea											
· (	Full Name (Last, First, Mic Committee to Elect Jir	nmy Womad							Date of 0 5		sburs				0 ) 1 1	Y
ľ	Mailing Address 2130	) W McNicho	ls Rd						0.5	_		4		2 (	1 1	
	City Detroit			State VII	Zip Code 48221				Amou	nt of	Each	Disb	ursen	nent i	this Pe	eriod
F	Purpose of Disbursement Political Contribution						011			_	•			30	0.00	
	Candidate Name James Womack						tego Type	ory/ e								
	Sei	use nate esident		nent For: Primary Other (spe	2012 X General ecify)											
	Full Name (Last, First, Mic								Trans	acti	on ID:	SF	323 1	674	2	
(	Committee to Elect Le	sia Liss							Date of	of Di	sburs	emen		-		v .
Ī	Mailing Address 1747	72 Haverhill							0 <sup>M</sup> 2	M	<sup>D</sup> 2	8 8	/ L	ž	) 1 1	Y
	City Warren			State VII	Zip Code 48092				Amou	nt of	Each	Disb	ursen			eriod
	Purpose of Disbursement Political Contribution					(	011			-	-		_	10	0.00	_
	Candidate Name Lesia Liss						tego ype	ory/								
	Sei	use nate esident t:		ment For: Primary Other (spe	2012 X General ecify) <b>V</b>											
	Full Name (Last, First, Mic Committee to Elect Ri	,	nc						Trans Date of	of Di	sburs	emen				
1	Mailing Address 3626	67 Canyon D	rive						0 <sup>M</sup> 4	M	D C	1	/ L	ž	) 1 1	Y
	City Westland			State VII	Zip Code 48186				Amou	nt of	Each	Disb	ursen	-		eriod
	Purpose of Disbursement Political Contribution						011							15	0.00	
	Candidate Name Richard LeBlanc						tego Type	ory/								
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	State: Distric	t:														
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
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NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Commi	tee - Michigan State Med	lical Society	
Full Name (Last, First, Middle Initial) Committee to Elect Virgil Smith			Transaction ID: SB23.16729 Date of Disbursement
Mailing Address 19450 GLOUCESTER			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & A \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & I & I \end{bmatrix}$
City Detroit	State Zip Code MI 48203		Amount of Each Disbursement this Period
Purpose of Disbursement Pol. Contrib.  Candidate Name		011	400.00
Virgil Smith		Category/ Type	
Senate President	ement For: 2012 Primary X General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB23.16875
Common Sense Leadership Fund			Date of Disbursement
Mailing Address 19980 Mayfield			$ \begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} \begin{bmatrix} D & D & D \\ 0 & 6 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
City Livonia	State Zip Code MI 48152		Amount of Each Disbursement this Perio
Purpose of Disbursement Donations		012	500.00
Candidate Name		Category/ Type	
Office Sought:  Senate  President  State:  Disburs	ement For: 2012 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) CTE Anthony G Forlini for State Rep			Transaction ID: SB23.16807 Date of Disbursement
Mailing Address 38273 Chart			03
City Harrison Township	State Zip Code MI 48045		Amount of Each Disbursement this Perio
Purpose of Disbursement Political Contribution		011	150.00
Candidate Name Anthony G Forline		Category/ Type	
Senate President	ement For: 2012 Primary X General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional		<b>&gt;</b>	1050.00

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	Michigan Doctors Political Action Commit	ee - Michigan State Med	iicai	500	ciety							
	Full Name (Last, First, Middle Initial) CTE Ben Glardon for State Representative Mailing Address PO Box 1746	9					of D	sburs	_	323.1 t	6731 Ž 0 Ť	1 Y
	City Owosso	State Zip Code MI 48867				Amou	unt o	f Each	Disb	ursem	ent this	Period
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	Full Name (Last, First, Middle Initial) CTE Deb Shaughnessy  Mailing Address 956 Chads Way							sburs	_	323.1 t	6745 Ž 0 Ĭ	1 Y
	City Charlotte Purpose of Disbursement	State Zip Code MI 48813		0		Amou	unt o	f Each	) Disb	ursem	ent this	
	Political Contribution  Candidate Name  Deb L Shaughnessy		Ca	01 ateg Typ	ory/							
	Office Sought:  X House Senate President State: MI District: 71	ement For: 2012 Primary X General Other (specify)	I									
	Full Name (Last, First, Middle Initial) CTE Gail Haines						of D	sburs	emen	323.1 t		
	Mailing Address PO Box 301085					o <sup>™</sup> 2	М	<sup>D</sup> 2	28	/ L	ž 0 1	1 Y
	City Waterford	State Zip Code MI 48330				Amou	unt o	f Each	Disb	ursem	ent this	
	Purpose of Disbursement Political Contribution		-	01 <sup>-</sup>		<u>L.</u>				•	500.0	0
	Candidate Name Gail Haines			ateg Typ								
	Office Sought: House Disburs Senate President State: District:	ement For: 2012 Primary X General Other (specify)	•									
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	y Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Commi	ne and address	of any political	com	mitte	ee to so							
	Full Name (Last, First, Middle Initial) CTE Jack Bradenburg					-			n ID:		23.16	350	
	Mailing Address 37596 Hurron Pointe D	rive						M /	burse 1	D / 8	Υ	ž 0 ž 1	Y
	City Harrison Township		Zip Code 48045				Amou	nt of	Each I	Disbui		nt this F	-
	Purpose of Disbursement Political Contribution Candidate Name			_	011		L.				1(	00.00	
	Jack Bradenburg	sement For:	2012		tego Type								
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	State: District:  Full Name (Last, First, Middle Initial)  CTE Ken Goike								on ID:		23.16	751	
	Mailing Address 22420 32 Mile Road						0 <sup>M</sup> 2	M /	<sup>D</sup> 2	8 /	Y 2	ž 0 1 1	Y
	City Ray		Zip Code 48096				Amou	nt of	Each	Disbui		nt this F	
	Purpose of Disbursement Political Contribution Candidate Name				011 itego			•				175.00	•
	Kenneth F Goike				Гуре	•							
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	Senate President	Primary	X General				Date	of Dis	on ID: sburse				
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Full Name (Last, First, Middle Initial) CTE Maureen Stapleton  Mailing Address 1300 E. Lafayette			Transaction ID: SB23.16830 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Detroit	State Zip Code MI 48207		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution  Candidate Name Maureen L Stapleton		011 Category/ Type	123.00
Office Sought: House Senate President State: District:	rsement For: 2012 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) CTE Peter Lund State Representative			Transaction ID: SB23.16805 Date of Disbursement
Mailing Address 6881 Muirfield			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}^{Y}$
City Shelby Township	State Zip Code MI 48316		Amount of Each Disbursement this Perio
Purpose of Disbursement Political Contribution Candidate Name Peter Lund		011 Category/ Type	500.00
Office Sought: House Disbu Senate President State: MI District:	rsement For: 2012 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) CTE Peter MacGregor			Transaction ID: SB23.16759 Date of Disbursement
Mailing Address 8209 Vista Royale Lar	ne		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 & M \end{smallmatrix} & / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}^{Y} \end{bmatrix}$
City Rockford	State Zip Code MI 49341		Amount of Each Disbursement this Period
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Peter L MacGregor  Office Sought: House Disbute Senate President	rsement For: 2012 Primary X General Other (specify)	Туре	
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SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 41 / 53
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NAME OF COMMITTEE (In Full)			
Michigan Doctors Political Action Committ	ee - Michigan State Medica	l Society	
Full Name (Last, First, Middle Initial) CTE Peter MacGregor			Transaction ID: SB23.16862 Date of Disbursement
Mailing Address 8209 Vista Royale Lane			06 7 06 7 2011
City Rockford	State Zip Code MI 49341		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution		011	150.00
Candidate Name Peter F MacGregor		Category/ Type	
Senate President	ment For: 2012 Primary X General Other (specify)		
State: MI District: 73			
Full Name (Last, First, Middle Initial) CTE Steve Bieda			<b>Transaction ID:</b> SB23.16797 Date of Disbursement
Mailing Address PO Box 1311			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Warren	State Zip Code MI 48090		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution		011	200.00
Candidate Name Steven M Bieda		Category/ Type	
Office Sought:  House  Disburse  X Senate  President	ment For: 2012 Primary X General Other (specify)		
State: MI District: 09	•		
Full Name (Last, First, Middle Initial) CTE Tom Hooker			Transaction ID: SB23.16820 Date of Disbursement
Mailing Address PO Box 454			04
City Byron Center	State Zip Code MI 49315		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution		011	175.00
Candidate Name Thomas B Hooker		Category/ Type	
Senate President	ment For: 2012 Primary X General Other (specify)		
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SUBTOTAL of Disbursements This Page (optional)		<u>Þ</u>	525.00

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Michigan Doctors Politic	al Action Com	mittee - Michi	gan State Med	ical	Soc	ciety							
Full Name (Last, First, Middle Dave Agema for State Remailing Address PO Bo	ep						Date o		sburse	SB23 ement	_	63 0 1 1	Y
City Jenison		State MI	Zip Code 49429				Amou	nt of	Each	Disburs	emen	t this P	erio
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Dave Agema  Office Sought: Hous	e Disb	ursement For:	2012		ateg Typ	-							
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Mailing Address PO Bo	x 1075						0 <sup>M</sup> 2	M /	1	<sup>D</sup> /	ž	0 1 1	Y
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
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Michigan Doctors Political Action Comm	tee - Michigan State Med	ical Society	
Full Name (Last, First, Middle Initial) Friends of Darwin L. Booher  Mailing Address PO Box 971			Transaction ID: SB23.16764 Date of Disbursement  0 2 M / D 2 8 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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City Evart	State Zip Code MI 49631		
Purpose of Disbursement Political Contribution		011	250.00
Candidate Name Darwin L. Booher		Category/ Type	
Senate President	ement For: 2012 Primary X General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB23.16851
Friends of Kate Segal			Date of Disbursement
Mailing Address 108 Pinehurst Lane			04
City Battle Creek	State Zip Code MI 49015		Amount of Each Disbursement this Perio
Purpose of Disbursement Political Contribution		011	500.00
Candidate Name Kate Segal		Category/ Type	
Office Sought:  House Senate President State:  Disbur	ement For: 2012 Primary X General Other (specify)	,	
Full Name (Last, First, Middle Initial) Friends of Ken Horn			Transaction ID: SB23.16852 Date of Disbursement
Mailing Address 516 S Main St			04
City Frankenmuth	State Zip Code MI 48734		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution		011	200.00
Candidate Name Ken Horn		Category/ Type	
Office Sought:  X House Senate President State: MI District: 94	ement For: 2012 Primary X General Other (specify)	71	
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SUBTOTAL of Disbursements This Page (optional		<b></b>	950.00

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NAME OF COMMITTEE (In Full)	To and address of any political con			
Michigan Doctors Political Action Commi	ttee - Michigan State Medical	Society		
Full Name (Last, First, Middle Initial)			Transaction ID: SB23.16776	
Friends of Lisa Posthumus Lyons			Date of Disbursement  O 3	Y
Mailing Address 12020 100th St			03 7 0 1 7 2 0 1	1
City Alto	State Zip Code MI 49302		Amount of Each Disbursement this	
Purpose of Disbursement Political Contribution		011	250.0	0
Candidate Name Lisa Posthumus Lyons	C	Category/ Type		
Office Sought:  X House Senate President State: MI District: 86	ement For: 2012 Primary X General Other (specify)			
Full Name (Last, First, Middle Initial) Friends of Rashida Tlaib			Transaction ID: SB23.16813 Date of Disbursement	
Mailing Address PO Box 9380			03 / 016 / 201	1 Y
City Detroit	State Zip Code MI 48209		Amount of Each Disbursement this	
Purpose of Disbursement Political Contribution		011	150.0	0
Candidate Name Rashida Tlaib	C	Category/ Type		
Office Sought: House Senate President State: District:	sement For: 2012 Primary X General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Friends of Roger Kahn			Transaction ID: SB23.16769 Date of Disbursement	
Mailing Address PO BOX 1627			02 7 28 7 201	1
City Saginaw	State         Zip Code           MI         49605-1627		Amount of Each Disbursement this	
Purpose of Disbursement Political Contribution		011	1000.0	Ü
Candidate Name Roger Kahn	C	Category/ Type		
Office Sought:  X House Senate President State: MI District: 32	sement For: 2012 Primary X General Other (specify) ▼			
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or for commercial purposes, other than using the name and address of NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Committee - Michigar Full Name (Last, First, Middle Initial) Friends of Sean McCann  Mailing Address PO Box 50811  City State Z Kalamazoo MI 4  Purpose of Disbursement Political Contribution  Candidate Name Sean A McCann  Office Sought: X House Senate Primary Other (specify State: MI District: 60  Full Name (Last, First, Middle Initial) Friends of Wayne Schmidt  Mailing Address PO Box 25  City State Z Traverse City MI 4  Purpose of Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought: X House State Z Traverse City MI 4  Purpose of Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought: X House Disbursement For: Primary Other (specify State: MI District:  Full Name (Last, First, Middle Initial)  Geoff Hansen for Senate  Mailing Address PO Box 167	of any political of any	011 Category/ Type  011 Category/	Transaction ID: SB23.16835 Date of Disbursement  M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Committee - Michigan  Full Name (Last, First, Middle Initial) Friends of Sean McCann  Mailing Address PO Box 50811  City State Z Kalamazoo MI 4  Purpose of Disbursement Political Contribution  Candidate Name Sean A McCann  Office Sought: X House Primary President State: MI District: 60  Full Name (Last, First, Middle Initial) Friends of Wayne Schmidt  Mailing Address PO Box 25  City State Z Traverse City MI 4  Purpose of Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought: X House Senate Primary President Office Sought: X House Primary President State: MI District:  Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address PO Box 167	Zip Code 49008  2012  X General  Y Zip Code 49685	011 Category/ Type  011 Category/	Transaction ID: SB23.16835 Date of Disbursement  M M M / D D D / Y Z D T T  Amount of Each Disbursement this Period  Transaction ID: SB23.16799 Date of Disbursement  M M M / D D D / Y Z D T T  Amount of Each Disbursement this Period
Friends of Sean McCann  Mailing Address PO Box 50811  City State Z MI 2  Purpose of Disbursement Political Contribution  Candidate Name Sean A McCann  Office Sought: X House Senate Primary Other (specify Priends of Wayne Schmidt  Mailing Address PO Box 25  City Traverse City MI 2  Purpose of Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought: X House State Z MI 2  City Traverse City MI 2  Purpose of Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought: X House Senate Primary Other (specify Other Senate Other Senate MI)  Full Name (Last, First, Middle Initial)  Geoff Hansen for Senate  Mailing Address PO Box 167	2012 X General fy) ▼  Zip Code 49685	Category/ Type  011 Category/	Date of Disbursement  M M M / D D D / Y Y Y O Y Y  Amount of Each Disbursement this Period  Transaction ID: SB23.16799  Date of Disbursement  M M M / D D D / Y Y Y O Y 1  Amount of Each Disbursement this Period
City Kalamazoo MI 4  Purpose of Disbursement Political Contribution  Candidate Name Sean A McCann  Office Sought: X House President State: MI District: 60  Full Name (Last, First, Middle Initial) Friends of Wayne Schmidt  Mailing Address PO Box 25  City State Z MI 4  Purpose of Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought: X House Senate Primary Other (specify MI 4  Office Sought: Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought: X House Primary Other (specify Other (specif	2012 X General fy) ▼  Zip Code 49685	Category/ Type  011 Category/	Amount of Each Disbursement this Period  Transaction ID: SB23.16799 Date of Disbursement  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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Political Contribution  Candidate Name Sean A McCann  Office Sought: X House Senate Primary President State: MI District: 60  Full Name (Last, First, Middle Initial) Friends of Wayne Schmidt  Mailing Address PO Box 25  City State Z MI  Purpose of Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought: X House Senate Primary President State: MI District:  Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address PO Box 167	X General fy)   Zip Code 49685	Category/ Type  011 Category/	Transaction ID: SB23.16799 Date of Disbursement  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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Senate President State: MI District: 60  Full Name (Last, First, Middle Initial) Friends of Wayne Schmidt  Mailing Address PO Box 25  City Traverse City Purpose of Disbursement Political Contribution Candidate Name Wayne Schmidt  Office Sought:  X House Senate President State: MI District:  Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address PO Box 167	X General fy)   Zip Code 49685	Category/	Date of Disbursement  M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Friends of Wayne Schmidt  Mailing Address PO Box 25  City State Z Traverse City MI 2  Purpose of Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought: X House Senate Primary President State: MI District:  Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address PO Box 167	2012	Category/	Date of Disbursement  O 3
City State Z Traverse City MI 2  Purpose of Disbursement Political Contribution Candidate Name Wayne Schmidt  Office Sought: X House Senate President State: MI District:  Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address PO Box 167	2012	Category/	Date of Disbursement  O 3
City Traverse City  Purpose of Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought:  Senate President State: MI  District:  Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address  PO Box 167	2012	Category/	Amount of Each Disbursement this Period
Traverse City  Purpose of Disbursement Political Contribution  Candidate Name Wayne Schmidt  Office Sought:  Senate President State: MI  District:  Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address  PO Box 167	2012	Category/	
Political Contribution  Candidate Name Wayne Schmidt  Office Sought: X House Senate Primary President State: MI District:  Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address PO Box 167		Category/	125.00
Wayne Schmidt  Office Sought:  X House Senate President State: MI  District:  Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address  PO Box 167		, ,	
Senate President State: MI District:  Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address PO Box 167			
Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address PO Box 167	(y) <b>V</b>		
			Transaction ID: SB23.16800 Date of Disbursement
City State 7			03 03 7 2011
	Zip Code 49420		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution		011	250.00
Candidate Name Goeff Hansen		Category/ Type	
Office Sought: House Disbursement For: Senate Primary President Other (specify	2012 X General fy) ▼		
State: District:	•		

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EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	X	23 28b		24 28c	25 29		26 30
y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Commit	e and address of any political	comi	mitt	ee to s								
 Full Name (Last, First, Middle Initial) Geoff Hansen for Senate  Mailing Address PO Box 167					-	of Di	sburs			6863 Ž 0	( 1 Y	
City Hart	State Zip Code MI 49420								oursem	nent thi	s Peri	od
Purpose of Disbursement Political Contribution  Candidate Name Goeff Hansen		Ca	011 itegi Typi	ory/			•			130.	00	
Office Sought:    House   Disburse     Senate   President     State: District:	ement For: 2012 Primary X General Other (specify)											
Full Name (Last, First, Middle Initial) Glenn Anderson for State Senate  Mailing Address 34300 Parkgrove Drive					_		sburs			6853 Ž 0	( 1 Y	
City Westland Purpose of Disbursement Political Contribution Candidate Name	State Zip Code MI 48185		011 iteg		Amo	unt of	f Each	n Disk	oursen	200.		od
Rep. Glenn Anderson  Office Sought: House Senate President  State: District:	ement For: 2012 Primary X General Other (specify)		Гур	•	_							
Full Name (Last, First, Middle Initial) Haveman House Fund					-		sburs	emer	323.1		/ * Y	
Mailing Address PO Box 457	01-1- 7'- 01-				0 3			) 3 D: 1		ž 0 -		
City Zeeland Purpose of Disbursement Political Contribution	State Zip Code MI 49464		0.1.4		Amor	unt o	Eacr	) Disk	oursen	nent thi 150.		od
Candidate Name Joe Haveman		Ca	011 iteg Type	ory/								
Office Sought: House Senate President State: District:	ement For: 2012 Primary X General Other (specify)											
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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 22 X 23 24 25 27 28a 28b 28c 29
				erson for the purpose of soliciting contributions ee to solicit contributions from such committee
$\rangle$	NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Con	nmittee - Michigan State Med	lical Soci	iety
<u>′</u>	Full Name (Last, First, Middle Initial) Hoon-Yong Hopgood for State Senate			Transaction ID: SB23.16781 Date of Disbursement
	Mailing Address 10815 Westlake			03
	City Taylor	State Zip Code MI 48180		Amount of Each Disbursement this Perio
	Purpose of Disbursement Political Contribution		011	200.00
	Candidate Name Hoon-Young Hopgood		Categor Type	
	Senate President	bursement For: 2012 Primary X General Other (specify) ▼		
	State: District: Full Name (Last, First, Middle Initial) Howard Walker for State Senate			Transaction ID: SB23.16785 Date of Disbursement
	Mailing Address PO Box 1508			03 / 01 / 2011
	City Traverse City	State Zip Code MI 49686		Amount of Each Disbursement this Perio
	Purpose of Disbursement Political Contribution		011	250.00
	Candidate Name Howard Walker		Categor Type	•
	Office Sought: House Dis Senate President State: District:	bursement For: 2012 Primary X General Other (specify) ▼		
	Full Name (Last, First, Middle Initial) Joan Bauer For State Rep			Transaction ID: SB23.16840 Date of Disbursement
	Mailing Address 3501 S Martin Luthe	r King Blvd		04  06  2011
	City Lansing	State Zip Code MI 48910		Amount of Each Disbursement this Perio
	Purpose of Disbursement Political Contribution		011	
	Candidate Name Joan E Bauer		Categor Type	
	Office Sought:  X House Senate President State: MI District: 68	bursement For: 2012 Primary X General Other (specify) ▼		
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	EMIZED DISBURSEMENTS	for each category of Detailed Summary	Page 21b	22 X 23 24 25 28 28a 28b 28c 29
	/ Information copied from such Reports and State or commercial purposes, other than using the nan			
$\rangle$	NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Commit	tee - Michigan State	e Medical Society	
,	Full Name (Last, First, Middle Initial) Joe Hune for State Senate			Transaction ID: SB23.16770 Date of Disbursement
	Mailing Address 4849 Hogback Road			02 0 2 0 1 1
	City Fowlerville	State Zip Cod MI 48836		Amount of Each Disbursement this Perio
	Purpose of Disbursement Political Contribution		011	1000.00
	Candidate Name Joe Hune		Category/ Type	
	Senate President	ement For: 201 Primary X Ge Other (specify)	eneral	
	State: District:  Full Name (Last, First, Middle Initial)  John Moolenaar for State Senate			Transaction ID: SB23.16772 Date of Disbursement
	Mailing Address PO Box 2244			M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Midland	State Zip Cod MI 48640		Amount of Each Disbursement this Perio
	Purpose of Disbursement Political Contribution		011	500.00
	Candidate Name John Moolenaar		Category/ Type	
		ement For: 201 Primary X Ge	12 eneral	
	Senate President State: District:	Other (specify)		
				Transaction ID: SB23.16815 Date of Disbursement
	President State: District: Full Name (Last, First, Middle Initial)			
	State: District: Full Name (Last, First, Middle Initial) John Proos for State Senate			Date of Disbursement  O 3 M / D 2 9 / Y 2 0 1 1 Y  Amount of Each Disbursement this Period
	President State: District:  Full Name (Last, First, Middle Initial) John Proos for State Senate  Mailing Address PO Box 271  City St. Joseph Purpose of Disbursement Political Contribution	Other (specify)   State Zip Cod	011	Date of Disbursement  O 3
	President State: District:  Full Name (Last, First, Middle Initial) John Proos for State Senate  Mailing Address PO Box 271  City St. Joseph  Purpose of Disbursement Political Contribution  Candidate Name John Proos	Other (specify)   State Zip Cod MI 49085	011 Category/ Type	Date of Disbursement  O 3 M / D 2 9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	President State: District:  Full Name (Last, First, Middle Initial) John Proos for State Senate  Mailing Address PO Box 271  City St. Joseph  Purpose of Disbursement Political Contribution  Candidate Name John Proos	Other (specify)   State Zip Cod MI 49085  ement For: 201	011 Category/ Type	Date of Disbursement  M 3 M / D 2 9 / Y 2 0 1 1 Y  Amount of Each Disbursement this Perior

ΙT	CHEDULE B (FEC FOIII 3X)	Use separate schedule	(S)	FOR LINE (check onl	NUMBER: PAGE 49/53
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam				
$\rangle$	NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Commit	•			
<u>/</u>	Full Name (Last, First, Middle Initial) Ken Yonker for State Representative				Transaction ID: SB23.16737 Date of Disbursement
	Mailing Address 8300 Patterson Ave.				02 14 7 2011
	City Caledonia	State Zip Code MI 49316			Amount of Each Disbursement this Perio
	Purpose of Disbursement Political Contribution		_	011	150.00
	Candidate Name Kenneth J Yonker		tegory/ - ype		
	Senate President	ement For: 2012 Primary X General Other (specify)	al		
	State: MI District: 72  Full Name (Last, First, Middle Initial)				Transaction ID: SB23.16858
	Kevin Cotter for State Representative  Mailing Address 2767 Eland Court			Date of Disbursement  O 5 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code			Amount of Each Disbursement this Perio
	Mt. Pleasant  Purpose of Disbursement  Political Contribution	MI 48858		011	300.00
	Candidate Name Kevin Cotter	Ca	tegory/ ype		
	Office Sought:    House   Disburse     Senate   President     State: District:	ement For: 2012 Primary X General Other (specify)	al		
	Full Name (Last, First, Middle Initial) Matt Huuki for State Representative	Transaction ID: SB23.16824 Date of Disbursement			
	Mailing Address 10005 D. D. J				
	Mailing Address 13895 Rova Road				
	City Atlantic Mine	State Zip Code MI 49905			Amount of Each Disbursement this Perio
	City Atlantic Mine Purpose of Disbursement Political Contribution			011	Amount of Each Disbursement this Perio
	City Atlantic Mine Purpose of Disbursement Political Contribution Candidate Name Matt E Huuki	MI 49905	Ca	011 tegory/ ype	
	City Atlantic Mine Purpose of Disbursement Political Contribution Candidate Name Matt E Huuki		Ca <sup>-</sup>	tegory/	

ΙT	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)		FOR LINE (check only	
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	y Information copied from such Reports and Stater for commercial purposes, other than using the name				
$\rangle$	NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Commit	ee - Michigan St	ate Medica	al Society	
	Full Name (Last, First, Middle Initial) Meekhof for Senate				Transaction ID: SB23.16859 Date of Disbursement
	Mailing Address 9128 Oak Creek Lane				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
	City West Olive	State Zip Co MI 4946			Amount of Each Disbursement this Perio
	Purpose of Disbursement Political Contribution Candidate Name			011	750.00
		ement For: 2	012	Category/ Type	
	Senate President		General		
	State: District:  Full Name (Last, First, Middle Initial)  Mike Callton for State Representative		Transaction ID: SB23.16814 Date of Disbursement		
	Mailing Address PO Box 676				0 3 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Nashville	State Zip Co MI 4907			Amount of Each Disbursement this Perio
	Purpose of Disbursement Political Contribution		011	500.00	
	Candidate Name Mike Callton			Category/ Type	
	Office Sought: House Disburs Senate President State: District:		012 General ,		
	Full Name (Last, First, Middle Initial) Moving Michigan Forward Fund	Transaction ID: SB23.16870 Date of Disbursement			
		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix}$			
	Mailing Address 4025 Timberland Drive				
	Mailing Address 4025 Timberland Drive  City Grand Rapids	State Zip Co MI 4950			Amount of Each Disbursement this Perio
	City Grand Rapids Purpose of Disbursement Donations		08	012	Amount of Each Disbursement this Perio
	City Grand Rapids Purpose of Disbursement Donations Candidate Name	MI 4950	08	012 Category/ Type	
	City Grand Rapids Purpose of Disbursement Donations Candidate Name	MI 4950	012 General	Category/	

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NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Commi	tee - Michigan State Medic	cal Society	
Full Name (Last, First, Middle Initial) Paul Opsommer for State Representative			Transaction ID: SB23.16774 Date of Disbursement
Mailing Address 315 E. Main			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Dewitt	State Zip Code MI 48820		Amount of Each Disbursement this Perio
Purpose of Disbursement Political Contribution Candidate Name		011	500.00
Paul E Opsommer	2010	Category/ Type	
Senate President	ement For: 2012 Primary X General Other (specify)		
State: MI District: 93  Full Name (Last, First, Middle Initial)  Payloy for Senate			Transaction ID: SB23.16842
Mailing Address 1577 South Allen Road		Date of Disbursement  O 4  O 6  Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City St Clair	State Zip Code MI 48079		Amount of Each Disbursement this Perio
Purpose of Disbursement Political Contribution	40079	011	250.00
Candidate Name Phillip J Pavlov		Category/ Type	
Office Sought:    House   Disbury	ement For: 2012 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial)  Rebekah Warren for State Representative	Transaction ID: SB23.16855 Date of Disbursement		
Mailing Address 234 Eighth Street		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix} $	
City Ann Arbor	State Zip Code MI 48103		Amount of Each Disbursement this Perio
Purpose of Disbursement Political Contribution		011	200.00
Candidate Name Rebekah Warren		Category/ Type	
Senate President	ement For: 2012 Primary X General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional			950.00

Grand Ledge MI 48837  Purpose of Disbursement Political Contribution  Candidate Name Rick Jones  Office Sought: House Senate Primary X General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Rick Olson - The Voice of the People  Mailing Address 525 Judd Road  MI 48837  250.00  Category/ Type  Other (specify) ▼  Transaction ID: SB23.16868  Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	TEMIZED DISBLIBSEMENTS	Use sep	arate schedule(s)		NUMBER: PAGE 52 / 53
NAME OF COMMITTEE (In Full)  NAME OF COMMITTEE (In Full)  NAME OF COMMITTEE (In Full)  NAME (Last, First, Middle Initial) Rick Jones for State Senate  Mailing Address PO Box 115  Chy State Zip Code MI 48837  Purpose of Disbursement Political Contribution Candidate Name Rick Jones  City State Zip Code MI 48176  Purpose of Disbursement Donations  City Saline Middle Initial) City State Zip Code MI 48176  Purpose of Disbursement Donations  City Senate Primary X General Other (specify) ▼  Transaction ID: SB23.16868 Date of Disbursement this Perior  Transaction ID: SB23.16868 Date				21b	22 X 23 24 25
NAME OF COMMITTEE (In Full)  Michigan Doctors Political Action Committee - Michigan State Medical Society  Full Name (Last, First, Middle Initial) Rick Jones for State Senate  Mailing Address PO Box 115  City State Zip Code Mil 48837  Purpose of Disbursement Political Contribution Candidate Name Rick Jones  Office Sought: House Senate Disbursement For: 2012 Rick Olson - The Voice of the People  Mailing Address 525 Judd Road  City State Zip Code Mil 48176  Rick Olson - The Voice of the People  Mailing Address 525 Judd Road  City State Disbursement Donations Candidate Name  Office Sought: House Senate Mil 48176  Purpose of Disbursement Donations Candidate Name  Office Sought: House Senate Mil 48176  Purpose of Disbursement Donations Candidate Name  Office Sought: House Senate Middle Initial) State: District:  Full Name (Last, First, Middle Initial) Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City Category' Type  Office Sought: House Senate Primary X General  Other (specify) ▼  Transaction ID: SB23.16803  Amount of Each Disbursement Beric 2012  Amount of Each Disbursement 1000.00  1000.00  Category' Type  Office Sought: House Senate Primary X General Prim					
Rick Jones for State Senate  Mailing Address PO Box 115  City State Zip Code MI 48837  Purpose of Disbursement Political Contribution Candidate Name Rick Jones  Office Sought: House Disbursement For: 2012 Senate President Other (specify) ▼  Full Name (Last, First, Middle Initial) Rick Olson - The Voice of the People  Mailing Address 525 Judd Road  City State Zip Code MI 48176  Purpose of Disbursement Donations Candidate Name  Office Sought: House Disbursement For: 2012 Senate Primary X General Disbursement Tormary X General Disbursement Donation Disbur	NAME OF COMMITTEE (In Full)				
City State: District:  Full Name (Last, First, Middle Initial) City State Zip Code Mil 48837  Purpose of Disbursement President State: District:  Full Name (Last, First, Middle Initial) Cardidate Name Candidate Name Flick Olson - The Voice of the People Mailing Address Candidate Name  City Saline  Office Sought: House Disbursement Donations Candidate Name  Office Sought: President Donations Candidate Name  District:  Full Name (Last, First, Middle Initial) Rick Olson - The Voice of the People Mailing Address  S25 Judd Road  City State Zip Code Mil 48176  Purpose of Disbursement Donations Candidate Name  District:  Full Name (Last, First, Middle Initial) State: District:  Full Name (Last, First, Middle Initial) State: District:  Full Name (Last, First, Middle Initial) States: District:  Full Name	Full Name (Last, First, Middle Initial)				Transaction ID: SB23.16803
City Grand Ledge MI 48837  Purpose of Disbursement Processing President State: District:  Full Name (Last, First, Middle Initial) Rick Olson - The Voice of the People  Mailing Address 525 Judd Road  City Senate President Donations  Candidate Name  City Senate Primary X General Other (specify) ▼  Transaction ID: SB23.16868 Date of Disbursement this Period Disbursement Donations  Candidate Name  Disbursement Donations  Candidate Name  Disbursement For: 2012 Primary X General Disbursement this Period Disbursement Donations  Candidate Name  Disbursement Disburs	Rick Jones for State Senate				
Grand Ledge Purpose of Disbursement Political Contribution Candidate Name Rick Jones  Office Sought:  Full Name (Last, First, Middle Initial) Rick Olson - The Voice of the People  Mailing Address Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial) Rick Olson - The Voice of the People  Mailing Address  S25 Judd Road  City Saline Mil 48176  Purpose of Disbursement Donations  Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial) Category' Type  Office Sought:  Full Name (Last, First, Middle Initial) State:  District:  Amount of E	Mailing Address PO Box 115				03 03 2011
Political Contribution Candidate Name Rick Jones  Office Sought: House Senate Primary X General Other (specify) ▼  Full Name (Last, First, Middle Initial) Rick Olson - The Voice of the People  Mailing Address 525 Judd Road  City State Zip Code Mil 48176  Purpose of Disbursement Donations Candidate Name  Office Sought: House President Primary X General Other (specify) ▼  Transaction ID: SB23.16868 Date of Disbursement Donation Disbursement For: 2012 Category/ Type  Amount of Each Disbursement this Perior Disbursement For: 2012 Senate Primary X General Other (specify) ▼  Transaction ID: SB23.16872  Amount of Each Disbursement this Perior Disbursement For: 2012 Category/ Type  Transaction ID: SB23.16872  Date of Disbursement ID: SB23.1688  Amount of Each Disbursement ID: SB23.16872  Date of Disbursement ID: SB23.1688  Date of					Amount of Each Disbursement this Period
Rick Jones  Office Sought: House President Primary X General Other (specify) ▼  Full Name (Last, First, Middle Initial) Rick Olson - The Voice of the People  Mailing Address 525 Judd Road  City State Zip Code MI 48176  Purpose of Disbursement Donations  Candidate Name  Office Sought: House Senate Primary X General Other (specify) ▼  State Zip Code MI 48176  Amount of Each Disbursement this Perior Type  Office Sought: House Senate Primary X General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) State: District:  Full Name (Last, First, Middle Initial) State: Disbursement For: 2012 Senate Primary X General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) States: Disbursement For: 2012 Senate Primary X General Other (specify) ▼  City State Zip Code Mil 48906  Amount of Each Disbursement this Perior Type  Office Sought: House Senate Primary X General Other (specify) ▼  Office Sought: House Senate Primary X General Other (specify) ▼  Office Sought: House Senate Primary X General Other (specify) ▼  Office Sought: House Senate Primary X General Other (specify) ▼  Office Sought: House Senate Primary X General Other (specify) ▼				011	250.00
Senate Primary X General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Rick Olson - The Voice of the People  Mailing Address 525 Judd Road  City Saline MI 48176  Purpose of Disbursement Donations Candidate Name  Office Sought: House President Other (specify) ▼  State Zip Code MI 48176  Primary X General Other (specify) ▼  Transaction ID: SB23.16868 Date of Disbursement In Mil 48176  Donation Office Sought: House President Other (specify) ▼  Transaction ID: SB23.16872 Date of Disbursement This Period In Mil 48906  Transaction ID: SB23.16872 Date of Disbursement In Mil 48906  Amount of Each Disbursement In Mil 48906  Transaction ID: SB23.16872 Date of Disbursement In Mil 48906  Amount of Each Disbursement In Mil 48906  Transaction ID: SB23.16872 Date of Disbursement In Mil 48906  Office Sought: House Disbursement In Mil 48906  Purpose of Disbursement In Mil 48906  Purpose of Disbursement In Donation Ocandidate Name  Office Sought: House Disbursement For: 2012 Category/ Type  Office Sought: House Primary X General Other (specify) ▼  Other (specify) ▼  Category/ Type					
Full Name (Last, First, Middle Initial) Rick Olson - The Voice of the People  Mailing Address 525 Judd Road  City State Zip Code MI 48176  Purpose of Disbursement Donations Candidate Name  Office Sought: House Senate Primary X General Other (specify) ▼  Transaction ID: SB23.16868 Date of Disbursement this Period Amount of Each Disbursement this Period Senate Primary X General Other (specify) ▼  Transaction ID: SB23.16868 Date of Disbursement this Period Amount of Each Disbursement this Period Senate Primary X General Other (specify) ▼  Transaction ID: SB23.16872 Date of Disbursement  District:  Full Name (Last, First, Middle Initial) Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City State Zip Code Aleason MI 48906  Purpose of Disbursement Donation  Candidate Name  Office Sought: House Senate Primary X General Other (specify) ▼  Office Sought: Primary X General Other (specify) ▼  Office Sought: Primary X General Other (specify) ▼	Senate	Primary	X General		
Rick Olson - The Voice of the People  Mailing Address 525 Judd Road  City State Zip Code MI 48176  Purpose of Disbursement Donations  Candidate Name  Office Sought: House Primary X General City State Zip Code MI 48906  City State Zip Code MI 48176  Primary X General City State Disbursement Disbursement Disbursement District:  Full Name (Last, First, Middle Initial)  City State Zip Code Mailing Address 1731 Blue Grass Road  City State Zip Code Lansing MI 48906  Purpose of Disbursement Donation  Candidate Name  Office Sought: House Senate Primary X General City Amount of Each Disbursement Tore Zity Amount of Each Disbursement Disbursement Tore Zity Amount of Each Disburs	State: District:		• • • • • • • • • • • • • • • • • • •		
City State Zip Code MI 48176  Purpose of Disbursement Donations  Candidate Name  Office Sought: House Senate Primary X General Other (specify) ▼  Full Name (Last, First, Middle Initial) Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City State Zip Code Lansing MI 48906  Purpose of Disbursement Donation  Candidate Name  Office Sought: House Disbursement For: 2012  Category/ Type  Transaction ID: SB23.16872  Date of Disbursement  M					
Saline MI 48176  Purpose of Disbursement Donations  Candidate Name  Office Sought: House Senate Primary X General Other (specify) ▼  Full Name (Last, First, Middle Initial) Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City State Zip Code Lansing MI 48906  Purpose of Disbursement Donation Candidate Name  Office Sought: House Senate Primary X General Other (specify) ▼  Transaction ID: SB23.16872 Date of Disbursement  Office Sought: Amount of Each Disbursement this Period  Transaction ID: SB23.16872 Date of Disbursement  Office Sought: Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary X General Other (specify) ▼  Other (specify) ▼  Other (specify) ▼	Mailing Address 525 Judd Road				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & 2 \end{smallmatrix} 0 \overset{Y}{1} \overset{Y}{1} \end{bmatrix}$
Purpose of Disbursement Donations  Candidate Name  Office Sought: House Senate Primary X General President State: District:  Full Name (Last, First, Middle Initial) Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City State Zip Code Lansing MI 48906  Purpose of Disbursement Donation Candidate Name  Office Sought: House Senate Primary X General  Other (specify) ▼  Transaction ID: SB23.16872 Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Period  1000.00  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary X General Other (specify) ▼  Other (specify) ▼  Other (specify) ▼  Other (specify) ▼					Amount of Each Disbursement this Period
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Full Name (Last, First, Middle Initial) Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City State Zip Code Lansing MI 48906  Purpose of Disbursement Donation Candidate Name  Office Sought: House Senate Primary X General President  Transaction ID: SB23.16872 Date of Disbursement  M 4 M / D D D / Y 2 0 1 1 Y  Amount of Each Disbursement this Period  1000.00	Senate President	Primary	X General		
Stamas Leadership PAC  Mailing Address 1731 Blue Grass Road  City State Zip Code Lansing MI 48906  Purpose of Disbursement Donation  Candidate Name  Disbursement For: 2012 Senate Primary X General President  Date of Disbursement  M 4 M / D 0 1 / Y 2 0 1 1 Y  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: 2012  Senate Primary X General Other (specify)  Other (specify)					Transaction ID: SR23 16872
City State Zip Code Lansing MI 48906  Purpose of Disbursement Donation Candidate Name  Disbursement For: Senate President  Disbursement For: Senate Primary  Code Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Other (specify)					Date of Disbursement
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Office Sought:    House	Candidate Name			Category/	
		ement For:	2012	**	
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	Senate President	Primary Other (spe	ecify) 🔻		1400.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		R LINE NUMBE	R:	PAGE	E 53 / 53			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 22 27 28a	X 23 28b	24 28c	25 2 29 3			
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full) Michigan Doctors Political Action Committee									
Full Name (Last, First, Middle Initial)  Tom Casperson for State Rep.				saction ID: of Disbursem		28			
Mailing Address PO Box 84			0 <sup>M</sup> 2	$ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix}  \begin{bmatrix} D & D \\ 0 & 1 \end{bmatrix}  \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$					
	itate Zip Code MI 49829		Amou	unt of Each D					
Purpose of Disbursement Pol. Contrib.		011	<u>ا ا</u> ا		2	50.00			
Candidate Name Tom Casperson  Office Sought: House Disburser	nent For: 2012	Categoi Type	ry/						
Senate President	Primary X General Other (specify)								
State: District:  Full Name (Last, First, Middle Initial)  Vincent Gregory for Senate				saction ID: of Disbursem		89			
Mailing Address 29501 Red Leaf Drive			0 <sup>M</sup> 3	M M / D D / Y Y Y					
•	itate Zip Code MI 48076		Amou	unt of Each D	isbursemen	t this Period			
Purpose of Disbursement Political Contribution		011			2	00.00			
Candidate Name Vincent Gregory		Categor Type	ry/						
	nent For: 2012 Primary X General Other (specify)								
Full Name (Last, First, Middle Initial) Whitmer Leadership Fund	Full Name (Last, First, Middle Initial)					67			
Mailing Address 1456 Meadowbrook Lane	Mailing Address 1456 Meadowbrook Lane					0 1 1 Y			
	itate Zip Code MI 48901		Amou	unt of Each D					
Purpose of Disbursement Contribution Candidate Name	Contribution				2	50.00			
Office Sought: House Disburser	nent For: 2012	Categor Type							
Senate	Primary X General Other (specify) ▼								
SUBTOTAL of Disbursements This Page (optional)			<b>.</b> [.		70	00.00			
TOTAL This Period (last page this line number only).			<u> </u>		2377	75.00			