

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

TROTT FOR CONGRESS, INC.

ADDRESS (number and street) 2085 E. WEST MAPLE ROAD

A-101

Check if different than previously reported. (ACC)

COMMERCE

MI

48390

2. FEC IDENTIFICATION NUMBER ▼

C C00548941

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

MI

11

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on MM / DD / YYYY in the State of

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

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

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY
07 / 17 / 2014 through 09 / 30 / 2014

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

Type or Print Name of Treasurer THOMAS J. MCCARTHY

Signature of Treasurer THOMAS J. MCCARTHY

[Electronically Filed]

Date

MM / DD / YYYY
10 / 15 / 2014

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
TROTT FOR CONGRESS, INC.

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	1189529.33	4365156.12
(b) Total Contribution Refunds (from Line 20(d))	0.00	2400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1189529.33	4362756.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	936329.09	3340691.24
(b) Total Offsets to Operating Expenditures (from Line 14).....	1750.00	1798.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	934579.09	3338893.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1273862.88	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	284849.87	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

TROTT FOR CONGRESS, INC.

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	70924.33	1027599.48
(ii) Unitemized.....	1105.00	1105.00
(iii) TOTAL of contributions from individuals ▶	72029.33	1028704.48
(b) Political Party Committees.....	1000.00	1000.00
(c) Other Political Committees (such as PACs).....	116500.00	162050.00
(d) The Candidate.....	1000000.00	3173401.64
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1189529.33	4365156.12
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	250000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	250000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	1750.00	1798.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1191279.33	4616954.12

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	936329.09	3340691.24
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	2400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2400.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	936329.09	3343091.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1018912.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1191279.33
25. SUBTOTAL (add Line 23 and Line 24).....	2210191.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	936329.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1273862.88

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MR. BRADLEY S ADAMS

Mailing Address 523 HUPP CROSS ROAD

City State Zip Code
BLOOMFIELD HILLS MI 48301

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TALMER BANK & TRUST INVESTOR RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11A1.7422

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
RANDALL L ALBERT

Mailing Address 3216 BELLFLOWER CT.

City State Zip Code
ANN ARBOR MI 48103

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UNIVERSITY OF MICHIGAN CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11A1.7461

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
CRAIG ALBRIGHT

Mailing Address 3540 WILLIAMSBURG LANE

City State Zip Code
WASHINGTON DC 20008

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BSA THE SOFTWARE ALLIANCE VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11A1.7316

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JENNIFER ANDERSON

Mailing Address 144 MANCHESTER LANE UNIT 3210

City WATERFORD State MI Zip Code 48327

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

Name of Employer TROTT & TROTT, P.C. Occupation ACCOUNTING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **90.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7456

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
THOMAS BALAMES

Mailing Address 225 E. BROWN STREET
UNIT 300

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer ACCELERATED ASSETS Occupation FINANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7310

Amount of Each Receipt this Period
1900.00

C. Full Name (Last, First, Middle Initial)
MR. TIMOTHY A BASSETT

Mailing Address 5741 CLEARVIEW DR

City TROY State MI Zip Code 48098

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

Name of Employer TALMER BANK + TRUST Occupation WEALTH MANAGEMENT ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7440

Amount of Each Receipt this Period
100.00

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

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

2025.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MICHELLE BECKER

Mailing Address 315 WASHINGTON

City State Zip Code
GROSSE POINTE MI 48238

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA11A1.7360

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MR. REED M BENET

Mailing Address 271 EUCLID AVENUE

City State Zip Code
BIRMINGHAM MI 48009

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

Name of Employer Occupation
VVUSA BUSINESS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7463

Amount of Each Receipt this Period
5.00

C. Full Name (Last, First, Middle Initial)
MR. GREGORY R BIXBY

Mailing Address 34134 FAIRFAX COURT

City State Zip Code
LIVONIA MI 48152

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

Name of Employer Occupation
TALMER BANK & TRUST CID

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7412

Amount of Each Receipt this Period
250.00

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

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

2855.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MR. PIERRE BOUTROS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 285 HAWTHORNE STREET		Transaction ID : SA11AI.7358	
City BIRMINGHAM	State MI	Zip Code 48009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer MILLS PHARMACY	Occupation PHARMACIST		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00		

Full Name (Last, First, Middle Initial) B. MR. STEPHEN C BROWNELL		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 306 PROVENCAL ROAD		Transaction ID : SA11AI.7448	
City GROSSE POINTE FARMS	State MI	Zip Code 48236	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer THE KIRLIN COMPANY	Occupation V.P.		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) C. RONALD M. CAMERON		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2014	
Mailing Address P.O. BOX 21440		Transaction ID : SA11AI.7566	
City LITTLE ROCK	State AR	Zip Code 72221	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	6200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MR. DAVID CARROLL

Mailing Address 1050 WOODWARD AVE

City State Zip Code
DETROIT MI 48226

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

Name of Employer Occupation
QUICKEN LOANS VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.7378

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
WILLIAM J CLARK

Mailing Address 2575 HATHON

City State Zip Code
WATERFORD MI 48329

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

Name of Employer Occupation
COLDWELL BANKER WEIR MANUEL REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7322

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
GEORGE S. CORONA

Mailing Address 2653 TOWER HILL LANE

City State Zip Code
ROCHESTER HILLS MI 48306

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

Name of Employer Occupation
KELLY SERVICES EXECUTIVE VP & COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.7594

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER C. COX

Mailing Address 2205 WINDSOR ROAD

City State Zip Code
ALEXANDRIA VA 22307

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

Name of Employer Occupation
NAVIGATORS GLOBAL LLC PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7614

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
THOMAS W CRANMER

Mailing Address 4739 SANDPIPER LANE

City State Zip Code
WEST BLOOMFIELD MI 48323

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

Name of Employer Occupation
MILLER CANFIELD ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11A1.7357

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
THOMAS W CUNNINGTON

Mailing Address PO BOX 347

City State Zip Code
BLOOMFIELD HILLS MI 48303

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

Name of Employer Occupation
WARD WILLISTON OIL CO. CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11A1.7572

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MS. LINDA L DEWEY

Mailing Address 1437 COVENTRY LANE

City PORT HURON State MI Zip Code 48060

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

Name of Employer TALMER BANK & TRUST Occupation BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7402

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS. HELENE S DIMITROFF

Mailing Address 42721 FAULKNER DRIVE

City NOVI State AL Zip Code 48377

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

Name of Employer TALMER BANK & TRUST Occupation MORTGAGE BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7426

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MRS. BERNIDETT R DIXON

Mailing Address 47026 MARBURG WAY DR.

City MACOMB State MI Zip Code 48044

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

Name of Employer 36TH DISTRICT COURT Occupation COURT OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7309

Amount of Each Receipt this Period
100.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
LINDA DRESNER

Mailing Address 970 SHIRLEY RD

City State Zip Code
BIRMINGHAM MI 48009

FEC ID number of contributing federal political committee.

Name of Employer Occupation
LINDA DRESNER INC. OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11A1.7568

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MS. MARIA F DUBIEL

Mailing Address 11357 EMBASSY COURT

City State Zip Code
SHELBY TOWNSHIP MI 48315

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TALMER BANK & TRUST SAG MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11A1.7436

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. TIM DUNN

Mailing Address 16830 RYAN RD

City State Zip Code
LIVONIA MI 48154-6232

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TALMER BANK & TRUST BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11A1.7452

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 150

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MRS. ROSE MARIE ENGMAN

Mailing Address 205 WOODBERRY DR.

City State Zip Code
 BLOOMFIELD HILLS MI 48304

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 FABRIZIO & BROOK, PC PRESIDENT / CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : SA11A1.7333

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. PATRICK ERVIN

Mailing Address 6230 OAK HILL ROAD

City State Zip Code
 ORTONVILLE MI 48462

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 TALMER BANK & TRUST MORTGAGE DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : SA11A1.7428

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. DENNIS FESKORN

Mailing Address 38824 GLENMAR LN

City State Zip Code
 HARRISON TOWNSHIP MI 48045

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 TALMER BANK & TRUST FINANCIAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : SA11A1.7420

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MRS. MELANIE FOSTER		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 2561 MEADOW WOODS DRIVE		Transaction ID : SA11AI.7393	
City EAST LANSING	State MI	Amount of Each Receipt this Period 1000.00	
Zip Code 48823			
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation MANAGER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. STANLEY D FRANKEL		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 2301 W BIG BEAVER RD SUITE 900		Transaction ID : SA11AI.7586	
City TROY	State MI	Amount of Each Receipt this Period 1000.00	
Zip Code 48084			
FEC ID number of contributing federal political committee. C			
Name of Employer FRANKEL ASSOCIATES, INC.	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. DON GILLIS		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 6 NORWICH		Transaction ID : SA11AI.7340	
City PLEASANT RIDGE	State MI	Amount of Each Receipt this Period 100.00	
Zip Code 48069			
FEC ID number of contributing federal political committee. C			
Name of Employer KEMP KLEIN	Occupation LAWYER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00		

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
GEHAN GIRGIS

Mailing Address 1233 COPPERWOOD DRIVE

City State Zip Code
BLOOMFIELD HILLS MI 48302

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

Name of Employer Occupation
RIVER SQUARE FAMILY DENTISTRY DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11A1.7582

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. PAUL A GLANTZ

Mailing Address 303 GRAY WOODS LN.

City State Zip Code
LAKE ANGELUS MI 48326-1240

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

Name of Employer Occupation
PROCTOR FINANCIAL, INC. BUSINESSMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7376

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DAVID STEWART GREEN

Mailing Address 921 BRISTOW DRIVE

City State Zip Code
ROCHESTER HILLS MI 48307

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

Name of Employer Occupation
BUTZEL LONG LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11A1.7318

Amount of Each Receipt this Period
100.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MS. JULIE M GUST

Mailing Address 1255 RUGBY CIRCLE

City State Zip Code
BLOOMFIELD HILLS MI 48302

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

Name of Employer Occupation
TALMER BANK & TRUST BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7404

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
SAMIR W. HANNA

Mailing Address 962 DOWLING ROAD

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11A1.7563

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
SAMIR W. HANNA

Mailing Address 962 DOWLING ROAD

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11A1.7564

Amount of Each Receipt this Period
500.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JAY HANSEN

Mailing Address 5920 SNOWSHOE CIRCLE

City State Zip Code
BLOOMFIELD HILLS MI 48301

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

Name of Employer Occupation
O2 INVESTMENT PARTNERS PRIVATE EQUITY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 06 / 2014

Transaction ID : SA11A1.7371

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA A. HARRELL

Mailing Address 1936 KIRKTON DR.

City State Zip Code
TROY MI 48083

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

Name of Employer Occupation
GENESIS DRUG TEST SERVICES CLERICAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
20.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7337

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
DOREEN HOFFMAN ULLOA

Mailing Address 2435 MOORS CT

City State Zip Code
ANN ARBOR MI 48108

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

Name of Employer Occupation
TROTT RECOVERY SERVICES, PLLC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7457

Amount of Each Receipt this Period
250.00

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

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

1770.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT HOTCHKISS

Mailing Address **2757 HEATHFIELD ROAD**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48301**

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

Name of Employer **TROTT & TROTT, P.C.** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7454

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN R HOWARD

Mailing Address **32720 BRANDINGHAM**

City **FRANKLIN** State **MI** Zip Code **48025**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7364

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
SCOTT R. JACOBSON

Mailing Address **455 ASPEN**

City **BIRMINGHAM** State **MI** Zip Code **48009**

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

Name of Employer **SELF** Occupation **REAL ESTATE INVESTMENT & DEVELOPME**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 21 / 2014

Transaction ID : SA11A1.7017

Amount of Each Receipt this Period
2500.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DONALD KEGLEY JR.		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2014	
Mailing Address 1257 WATER CLIFF		Transaction ID : SA11A1.7328	
City BLOOMFIELD HILLS	State MI	Zip Code 48302	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer CUNNINGHAM-LIMP COMPANY	Occupation REAL ESTATE DEVELOPMENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4700.00		

Full Name (Last, First, Middle Initial) B. DONALD KEGLEY JR.		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 1257 WATER CLIFF		Transaction ID : SA11A1.7327	
City BLOOMFIELD HILLS	State MI	Zip Code 48302	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer CUNNINGHAM-LIMP COMPANY	Occupation REAL ESTATE DEVELOPMENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4900.00		

Full Name (Last, First, Middle Initial) C. MS. SHEREE KESLER		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 2868 DORCHESTER RD		Transaction ID : SA11A1.7430	
City BIRMINGHAM	State MI	Zip Code 48009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer TALMER BANK & TRUST	Occupation MORTGAGE QC MANAGER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DONALD KING

Mailing Address 33889 PONDVIEW CIRCLE

City State Zip Code
LIVONIA MI 48152

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

Name of Employer Occupation
TROTT & TROTT, P.C. ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
75.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7455

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
EDAN KING

Mailing Address 855 RIDGEWOOD RD

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer Occupation
MICHIGAN FIDELITY ACCEPTANCE CORPOR COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11A1.7600

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DARIA KNIGHT

Mailing Address 1290 LAKE ANGELUS SHORES

City State Zip Code
LAKE ANGELUS MI 48326

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

Name of Employer Occupation
ADVOMAS SECRETARY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11A1.7312

Amount of Each Receipt this Period
2600.00

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

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

3125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MR. WALTER B. KNIGHT

Mailing Address 1290 LAKE ANGELUS SHORES

City LAKE ANGELUS State MI Zip Code 48326

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

Name of Employer KNIGHT & FIRTH Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11A1.7342

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
LAURA R. KOPACK

Mailing Address 9905 AUBURNDALE STREET

City LIVONIA State MI Zip Code 48150

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

Name of Employer MCA DETROIT Occupation DIRECTOR OF GOVERNMENT AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11A1.7348

Amount of Each Receipt this Period
650.00

C. Full Name (Last, First, Middle Initial)
LAURA R. KOPACK

Mailing Address 9905 AUBURNDALE STREET

City LIVONIA State MI Zip Code 48150

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

Name of Employer MCA DETROIT Occupation DIRECTOR OF GOVERNMENT AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7347

Amount of Each Receipt this Period
150.00

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

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

3400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MS. SANDRA D KUOHN

Mailing Address 2301 W BIG BEAVER RD
SUITE 525

City State Zip Code
TROY MI 48084

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

Name of Employer Occupation
TALMER BANK & TRUST CHIEF HR OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : SA11A1.7410

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. ERIC A LADWIG

Mailing Address 17080 CARRIAGE WAY

City State Zip Code
NORTHVILLE MI 48168

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

Name of Employer Occupation
THE UPS STORE # 3011 SMALL BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : SA11A1.7450

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID B. LANDRY

Mailing Address 45471 KIMBERLY COURT

City State Zip Code
NOVI MI 48374

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

Name of Employer Occupation
LANDRY, MAZZEO & DEMBINSKI PC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 08 2014

Transaction ID : SA11A1.7344

Amount of Each Receipt this Period
100.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MR. BERRY F LAWS III

Mailing Address 1044 MAIN STREET, SUITE 900

City KANSAS CITY State MO Zip Code 64105

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7362

Amount of Each Receipt this Period
 150.00

B. Full Name (Last, First, Middle Initial)
MR. EDWARD C. LEVY JR

Mailing Address 970 SHIRLEY RD

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer EDWARD LEVY CO. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.7332

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
STEVEN H. LEWIS

Mailing Address 1015 WADDINGTON

City BLOOMFIELD HILLS State MI Zip Code 48301

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.7560

Amount of Each Receipt this Period
 250.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
LANDON K. MACKIE

Mailing Address 2269 SANDY CREEK DR

City FRISCO State TX Zip Code 75254

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

Name of Employer MACKIE WOLF ZIENTZ & MANN, P.C. Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11A1.7346

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL R MAHER

Mailing Address 502 W. 4TH STREET

City ROYAL OAK State MI Zip Code 48067

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

Name of Employer TALMER BANK & TRUST Occupation EMD & CFO MORTGAGE BANKING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7416

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MS. BARBARA J MAHONE

Mailing Address PO BOX 460

City BIRMINGHAM State MI Zip Code 48012

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7384

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) DAVID MARDIGIAN		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 35980 WOODWARD AVENUE SUITE 210		Transaction ID : SA11AI.7352	
City BLOOMFIELD HILLS	State MI	Zip Code 48304	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer MCM MANAGEMENT CORP.	Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) ROBERT G MARDIGIAN		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 180 RAVINE		Transaction ID : SA11AI.7351	
City BIRMINGHAM	State MI	Zip Code 48009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer MCM DEMO	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) TIMOTHY J MCBRIDE		Date of Receipt M M / D D / Y Y Y Y 07 / 22 / 2014	
Mailing Address 5016 UPTON STREET, NW		Transaction ID : SA11AI.7325	
City WASHINGTON	State DC	Zip Code 20016	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer COVIDIEN	Occupation BUSINESSMAN		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
KEVIN R MCCARTHY

Mailing Address 1915 TOWNSEND PLACE

City EL CAJON State CA Zip Code 92019

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

Name of Employer MCCARTHY HOLTHUS Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7350

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
MRS. SUZANNE M. MCDONALD

Mailing Address 580 HARMON ST

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11A1.7391

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MS. CAROLYN MEIER

Mailing Address 22062 ABINGTON DR

City FARMINGTON HILLS State MI Zip Code 48335

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

Name of Employer TALMER BANK & TRUST Occupation BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7400

Amount of Each Receipt this Period
 25.00

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

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

1525.00

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

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

FOR LINE NUMBER: PAGE 27 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
PAUL MITCHELL III

Mailing Address 1760 GLENCAIRN DR

City State Zip Code
SAGINAW MI 48609

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11A1.7574

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
JOHN C. MORRIS III

Mailing Address 2705 OAK DRIVE

City State Zip Code
MONROE LA 71201

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

Name of Employer Occupation
INFORMATION REQUESTED LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7605

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
THOMAS R. MORRIS

Mailing Address 28011 WEYMOUTH

City State Zip Code
FARMINGTON HILLS MI 48334

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

Name of Employer Occupation
SILVERMAN & MORRIS, P.L.L.C. ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11A1.7396

Amount of Each Receipt this Period
100.00

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

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

5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MR. THOMAS E NESTOR

Mailing Address 4001 MEADOWLANE

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer Occupation
TALMER BANK & TRUST EMD- RETAIL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7418

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS. KRISTINE M NEYMANOWSKI

Mailing Address 85 PINEVIEW DR.

City State Zip Code
LAPEER MI 48446

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

Name of Employer Occupation
COMERICA BANK FORECLOSURE/REO MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7323

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT ROYAL NIX II

Mailing Address 18276 ARSELOT DR

City State Zip Code
NORTHVILLE MI 48168

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

Name of Employer Occupation
RETIRED LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11A1.7382

Amount of Each Receipt this Period
300.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MR. J DOUGLAS NORTH

Mailing Address 6900 OAKHILLS DRIVE

City State Zip Code
BLOOMFIELD HILLS MI 48301

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

Name of Employer Occupation
NORTH BROTHERS FORD, INC. AUTO DEALER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.7370

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JOE O'CONNOR

Mailing Address 803 W BIG BEAVER

City State Zip Code
TROY MI 48084

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

Name of Employer Occupation
KALPA EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.7339

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM G OLDFORD

Mailing Address 850 BIRKDALE DRIVE

City State Zip Code
ST. CLAIR MI 48079

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

Name of Employer Occupation
TALMER BANK & TRUST TRUST MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.7438

Amount of Each Receipt this Period
150.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DONALD R PADALIS

Mailing Address 26431 PLEASANT VALLEY RD

City State Zip Code
FARMINGTON HILLS MI 48331

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

Name of Employer Occupation
THE INTEGRUN GROUP SMALL BUSINESS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
40.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7446

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MR. ERIN PALMER

Mailing Address 43032 EMERSON WAY

City State Zip Code
NOVI MI 48377

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

Name of Employer Occupation
TALMER BANK & TRUST DIRECTOR OF MORTGAGE OPERATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7414

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. SANFORD H PASER

Mailing Address 27301 WILLOWGREEN CT.

City State Zip Code
FRANKLIN MI 48025

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

Name of Employer Occupation
SELF ATTORNEY/INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7389

Amount of Each Receipt this Period
50.00

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

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

340.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BRUCE PATTERSON

Mailing Address 42479 REDFERN STREET

City CANTON State MI Zip Code 48187

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7386

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JAMES L. PITTS

Mailing Address 901 7TH STREET NW SUITE 200

City WASHINGTON State DC Zip Code 20001

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7613

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CHRISTINE PROVOST

Mailing Address 952 BROOKWOOD ST

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7588

Amount of Each Receipt this Period
500.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DAVID PROVOST

Mailing Address 2301 W. BIG BEAVER ROAD

City State Zip Code
TROY MI 48084

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

Name of Employer Occupation
TALMER BANK AND TRUST PRESIDENT/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7441

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ANDREW RICHNER

Mailing Address 718 BERKSHIRE ROAD

City State Zip Code
GROSSE POINTE PARK MI 48230

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

Name of Employer Occupation
CLARK HILL ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
686.33

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11A1.7319

Amount of Each Receipt this Period
186.33

IN-KIND: CATERING SERVICES

C. Full Name (Last, First, Middle Initial)
ANDREW RICHNER

Mailing Address 718 BERKSHIRE ROAD

City State Zip Code
GROSSE POINTE PARK MI 48230

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

Name of Employer Occupation
CLARK HILL ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1686.33

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11A1.7320

Amount of Each Receipt this Period
1000.00

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

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

1686.33

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL D RIESER

Mailing Address 1625 GRANDVIEW DR

City State Zip Code
ROCHESTER HILLS MI 48306

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TALMER BANK & TRUST MTG BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11A1.7432

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
PAUL ROBERTSON

Mailing Address 779 S. BATES STREET

City State Zip Code
BIRMINGHAM MI 48009

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ROBERTSON BROTHERS BUILDER/DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11A1.7385

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
STUART SANDLER

Mailing Address 2420 MULBERRY COURT

City State Zip Code
ANN ARBOR MI 48104

FEC ID number of contributing federal political committee.

Name of Employer Occupation
DECIDER STRATEGIES CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11A1.7329

Amount of Each Receipt this Period

 TO BE REFUNDED

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

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

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

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

FOR LINE NUMBER: PAGE 34 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MR. THOMAS L SCHELLENBERG

Mailing Address 5454 CHIPPEWA DR

City State Zip Code
CROSS VILLAGE MI 49723

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

Name of Employer Occupation
METZLER LOCRICCHIO SERRA & CO P.C. TAX ATTORNEY/CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7354

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
MR. CONRAD P SCHWARTZ

Mailing Address 30144 BUCKINGHAM

City State Zip Code
LIVONIA MI 48154

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7366

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
ROY C. SGROI

Mailing Address 12414 WHITE TAIL COURT

City State Zip Code
PLYMOUTH MI 48170-2875

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7387

Amount of Each Receipt this Period
250.00

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

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

2300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MR. THOMAS C SHAFER

Mailing Address 47 BRIARWOOD PLACE

City State Zip Code
GROSSE POINTE FARMS MI 48236

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

Name of Employer Occupation
TALMER BANK & TRUST PRESIDENT & COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7434

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MS. MICHELLE SHEPLEY

Mailing Address 5775 MCINTYRE RD

City State Zip Code
CLYDE MI 48049

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

Name of Employer Occupation
TALMER BANK & TRUST BUSINESS DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7406

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. RANDY SHEPLEY

Mailing Address 5775 MCINTYRE RD

City State Zip Code
CLYDE MI 48049

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

Name of Employer Occupation
R SHEPLEY FLOOR SERVICES OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.7380

Amount of Each Receipt this Period
50.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MICHAEL SITKAUSKAS

Mailing Address 20216 ELLEN DRIVE

City Livonia State MI Zip Code 48152

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

Name of Employer UNEMPLOYED Occupation UNEMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 21 / 2014

Transaction ID : SA11A1.7459

Amount of Each Receipt this Period
 10.00

B. Full Name (Last, First, Middle Initial)
MICHAEL SITKAUSKAS

Mailing Address 20216 ELLEN DRIVE

City Livonia State MI Zip Code 48152

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

Name of Employer UNEMPLOYED Occupation UNEMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7460

Amount of Each Receipt this Period
 10.00

C. Full Name (Last, First, Middle Initial)
MR. BRIAN SZMYTKE

Mailing Address 9980 JOY RD

City Plymouth State MI Zip Code 48170

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

Name of Employer MICHIGAN REPUBLICAN PARTY Occupation FIELD DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7356

Amount of Each Receipt this Period
 10.00

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

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

30.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. JOANNE TEMPLE		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 47753 RIVER WOODS DRIVE		Transaction ID : SA11AI.7335	
City CANTON	State MI	Zip Code 48188	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer FORD MOTOR COMPANY	Occupation ENGINEER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

Full Name (Last, First, Middle Initial) B. STEPHEN TEMPLETON		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 777 WILLIAMSBURY		Transaction ID : SA11AI.7444	
City BLOOMFIELD HILLS	State MI	Zip Code 48301	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer TEMPLETON BUILDING, INC.	Occupation BUILDER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2550.00		

Full Name (Last, First, Middle Initial) C. MR. JAMES A THIENEL		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 5161 SHORELINE BLVD		Transaction ID : SA11AI.7314	
City WATERFORD	State MI	Zip Code 48329	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer BERKLEY APPLIANCE	Occupation APPLIANCE SERVICE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00		

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MR. BRADLEY L THOMPSON II

Mailing Address 2001 W LAFAYETTE BLVD

City State Zip Code
DETROIT MI 48216-1852

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

Name of Employer Occupation
DETROIT LEGAL NEWS CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11AI.7330

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MS. MICHELE A THOMPSON

Mailing Address 30182 DORCHESTER AVENUE

City State Zip Code
MADISON HEIGHTS MI 48071

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

Name of Employer Occupation
TALMER BANK & TRUST MANAGING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.7424

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. GARY TORGOW

Mailing Address 14661 LUDLOW ST

City State Zip Code
OAK PARK MI 48237

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

Name of Employer Occupation
TALMER BANK & TRUST CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.7408

Amount of Each Receipt this Period
500.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MALKA TORGOW		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 14661 LUDLOW ST		Transaction ID : SA11A1.7570
City OAK PARK	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	Election Cycle-to-Date 500.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. MS. CHRISTINE R TOSKI		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 7243 ARDSLEY LN		Transaction ID : SA11A1.7398
City CLARKSTON	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer TALMER BANK & TRUST	Occupation BANKER	Election Cycle-to-Date 200.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. MARK VALENTE III		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 7055 LEESTONE STREET		Transaction ID : SA11A1.7601
City SPRINGFIELD	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2388.00
Name of Employer VALENTE & ASSOCIATES	Occupation CONSULTANT	Election Cycle-to-Date 3388.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	3088.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. JOHN A. VOSO JR.		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address 8749 EATON DRIVE		Transaction ID : SA11A1.7373	
City SAGAMORE HILLS	State OH	Zip Code 44067	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer OLD REPUBLIC NATIONAL TILE INSURANCE	Occupation AGENCY RELATIONSHIP MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00		

Full Name (Last, First, Middle Initial) B. MR. MICHAEL WARD		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 4625 4TH STREET SOUTH		Transaction ID : SA11A1.7443	
City ARLINGTON	State VA	Zip Code 22204	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer TECHNET	Occupation VICE PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. JIM WERPETINSKI		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 4332 RENEE DR		Transaction ID : SA11A1.7368	
City TROY	State MI	Zip Code 48085	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 30.00		

SUBTOTAL of Receipts This Page (optional).....	730.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 41 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JILL P WILKINSON

Mailing Address 690 KIMBERLY

City State Zip Code
BIRMINGHAM MI 48009

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

Name of Employer Occupation
WILKINSON EYE CENTER CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7464

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
RANDE K. YEAGER

Mailing Address 427 FIELDSTONE DRIVE

City State Zip Code
VENICE FL 34292

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

Name of Employer Occupation
OLD REPUBLICTITLE.COM CEO/CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7374

Amount of Each Receipt this Period
100.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

600.00

70924.33

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 150	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11B.7550

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.7512

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7472

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 800 TENTH STREET, NW
TWO CITYCENTER, SUITE 400

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11C.7502

Amount of Each Receipt this Period
 2000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PAC (ASHA PAC)

Mailing Address **2200 RESEARCH BOULEVARD**

City **ROCKVILLE** State **MD** Zip Code **20850**

FEC ID number of contributing federal political committee. **C C00210666**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7489

Amount of Each Receipt this Period
 _____ **2000.00**

B. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address **440 FIRST STREET NW
SUITE 200**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00010421**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7518

Amount of Each Receipt this Period
 _____ **5000.00**

C. Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address **2300 WILSON BLVD.
SUITE 300**

City **ARLINGTON** State **VA** Zip Code **22201**

FEC ID number of contributing federal political committee. **C C00082917**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7522

Amount of Each Receipt this Period
 _____ **1000.00**

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

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

_____ **8000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

Mailing Address 1625 PRINCE STREET
SUITE 225

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7520

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
BLESSINGS OF LIBERTY PAC - BOL PAC

Mailing Address 38 EXECUTIVE PARK, SUITE 390

City State Zip Code
IRVINE CA 92614

FEC ID number of contributing federal political committee. **C** C00564658

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7491

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
BLUE CROSS BLUE SHIELD OF MICHIGAN PAC

Mailing Address 232 S. CAPITOL
MC L10A

City State Zip Code
LANSING MI 48933

FEC ID number of contributing federal political committee. **C** C00084061

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7492

Amount of Each Receipt this Period
2000.00

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

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

9000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
BROOKE HOLDINGS LLC AND JACKSON NATIONAL LIFE INSURANCE COMPANY SEPARATE SEGREGATED FUND (

A. Mailing Address 1 CORPORATE WAY

City State Zip Code
LANSING MI 48951

FEC ID number of contributing federal political committee. **C** C00254953

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7539

Amount of Each Receipt this Period
 2000.00

Full Name (Last, First, Middle Initial)
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAAC)

B. Mailing Address 1201 15TH STREET, NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7524

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
CMR POLITICAL ACTION COMMITTEE

C. Mailing Address PO BOX 2485

City State Zip Code
SPRINGFIELD VA 22152

FEC ID number of contributing federal political committee. **C** C00469429

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11C.7494

Amount of Each Receipt this Period
 2500.00

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

7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
CMS ENERGY CORPORATION EMPLOYEES FOR BETTER GOVERNMENT- FEDERAL

Mailing Address ONE ENERGY PLAZA
EP8-253

City JACKSON State MI Zip Code 49201

FEC ID number of contributing federal political committee. **C** C00075473

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.7508

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
COLLINS FOR CONGRESS

Mailing Address PO BOX 1295

City GAINESVILLE State GA Zip Code 30503

FEC ID number of contributing federal political committee. **C** C00502039

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.7303

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11C.7496

Amount of Each Receipt this Period
5000.00

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

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

10500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DELTA AIR LINES POLITICAL ACTION COMMITTEE

Mailing Address 1212 NEW YORK AVENUE NW
SUITE 200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00104802**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7526

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DTE ENERGY CO. PAC - FEDERAL

Mailing Address ONE ENERGY PLAZA
ROOM 1583 WCB

City DETROIT State MI Zip Code 48226

FEC ID number of contributing federal political committee. **C C00081547**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7528

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
DYKEMA GOSSETT FEDERAL PAC

Mailing Address 201 TOWNSEND STREET
SUITE 900

City LANSING State MI Zip Code 48933

FEC ID number of contributing federal political committee. **C C00342113**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7530

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DYKEMA GOSSETT FEDERAL PAC

Mailing Address 201 TOWNSEND STREET
SUITE 900

City LANSING State MI Zip Code 48933

FEC ID number of contributing federal political committee. **C** C00342113

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7531

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
FLAGSTAR BANK FEDERAL PAC

Mailing Address 5151 CORPORATE DR. E-183-3

City TROY State MI Zip Code 48098

FEC ID number of contributing federal political committee. **C** C00455733

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7474

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
FORD MOTOR COMPANY CIVIC ACTION FUND

Mailing Address PO BOX 75000

City DETROIT State MI Zip Code 48275

FEC ID number of contributing federal political committee. **C** C00046474

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11C.7498

Amount of Each Receipt this Period
2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
FORGING INDUSTRY ASSOCIATION POLITICAL ACTION COMMITTEE (FORGINGPAC)

Mailing Address 1111 SUPERIOR AVE
SUITE 615

City State Zip Code
CLEVELAND OH 44114

FEC ID number of contributing federal political committee. **C** C00470252

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7541

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
FREEDOM PROJECT; THE

Mailing Address 320 1ST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.7486

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
FREEDOM PROJECT; THE

Mailing Address 320 1ST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.7487

Amount of Each Receipt this Period
5000.00

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

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

11000.00

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

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

FOR LINE NUMBER: PAGE 51 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Mailing Address 2941 FAIRVIEW PARK DR.
SUITE 100

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7543

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 400

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00076810**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7545

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
GUTHRIE FOR CONGRESS

Mailing Address PO BOX 9639

City State Zip Code
BOWLING GREEN KY 42102

FEC ID number of contributing federal political committee. **C C00445023**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7299

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Mailing Address 1900 K STREET NW
SUITE 700

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7603

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
KEVIN MCCARTHY FOR CONGRESS

Mailing Address PO BOX 12667

City BAKERSFIELD State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** C00420935

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11C.7301

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14TH STREET, NW
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7476

Amount of Each Receipt this Period
2500.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
LEAD YOUR NATION NOW PAC (LYNN PAC)

Mailing Address P.O. BOX 1872

City State Zip Code
TOPEKA KS 66601

FEC ID number of contributing federal political committee. **C** C00491043

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7607

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC

Mailing Address P.O. BOX 10134

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11C.7500

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

Mailing Address 7373 W. SAGINAW HIGHWAY
P.O. BOX 30960

City State Zip Code
LANSING MI 48917

FEC ID number of contributing federal political committee. **C** C00096362

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7478

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MORE CONSERVATIVES PAC (MCPAC)

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00540187

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.7548

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 DAINGERFIELD ROAD

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7480

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL FEDERATION OF INDEPENDENT BUSINESS

Mailing Address 1201 F STREET NW

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C30001317

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7504

Amount of Each Receipt this Period
2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 11250 WAPLES MILL ROAD

City State Zip Code
FAIRFAX VA 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7482

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NEW PAC

Mailing Address P.O. BOX 7480

City State Zip Code
VISALIA CA 93290

FEC ID number of contributing federal political committee. **C** C00398750

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.7514

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PATRIOTS IN ACTION

Mailing Address 1005 CONGRESS AVE STE 910

City State Zip Code
AUSTIN TX 78701

FEC ID number of contributing federal political committee. **C** C00531590

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7484

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 56 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Mailing Address 317 MASSACHUSETTS AVENUE, NE
1ST FLOOR

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7516

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

Mailing Address 6363 OAK TREE BLVD.

City INDEPENDENCE State OH Zip Code 44131

FEC ID number of contributing federal political committee. **C** C00082271

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7533

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION INC.

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7535

Amount of Each Receipt this Period
5000.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
QUICKEN LOANS INC PAC

Mailing Address 101 S. WASHINGTON SQ.
SUITE 620

City LANSING State MI Zip Code 48933

FEC ID number of contributing federal political committee. **C** C00388827

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7537

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ROGERS FOR CONGRESS

Mailing Address PO BOX 581

City BRIGHTON State MI Zip Code 48116

FEC ID number of contributing federal political committee. **C** C00343863

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7307

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address PO BOX 23219

City JEFFERSON State LA Zip Code 70183

FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.7305

Amount of Each Receipt this Period
2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
THE DOW CHEMICAL COMPANY EMPLOYEES PAC (DOWPAC)

Mailing Address 2030 DOW CENTER

City MIDLAND State MI Zip Code 48674

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 9000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7506

Amount of Each Receipt this Period
 4000.00

B. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11C.7546

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC

Mailing Address 9800 FREDERICKSBURG ROAD

City SAN ANTONIO State TX Zip Code 78288

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7611

Amount of Each Receipt this Period
 1000.00

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

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

7500.00

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

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

FOR LINE NUMBER: PAGE 59 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)

Mailing Address 1300 I ST NW, STE 400 WEST
ATTN: TAYLOR CRAIG

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7609

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
VOICE FOR FREEDOM

Mailing Address 2700 CUMBERLAND PARKWAY, SUITE 150

City ATLANTA State GA Zip Code 30339

FEC ID number of contributing federal political committee. **C C00409805**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.7511

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Mailing Address 1325 G STREET, N.W. SUITE 1000

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00109306**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014

Transaction ID : SA11C.7509

Amount of Each Receipt this Period
1000.00

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

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

4500.00

116500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DAVID A. TROTT

Mailing Address 158 PARK LAKE DRIVE

City BIRMINGHAM State MI Zip Code 48009

FEC ID number of contributing federal political committee. **C H4MI11097**

Name of Employer TROTT & TROTT, P.C. Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3423401.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11D.7617

Amount of Each Receipt this Period
1000000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000000.00

1000000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ELENA N. BRENNAN

Mailing Address P.O. BOX 1128

City: **WALLED LAKE** State: **MI** Zip Code: **48390**

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

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA14.7470

Amount of Each Receipt this Period
 _____ **750.00**

VENDOR REFUND: PAYROLL

B. Full Name (Last, First, Middle Initial)
ZACHARY M. COMOS

Mailing Address P.O. BOX 1128

City: **WALLED LAKE** State: **MI** Zip Code: **48390**

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

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA14.7468

Amount of Each Receipt this Period
 _____ **500.00**

VENDOR REFUND: PAYROLL

C. Full Name (Last, First, Middle Initial)
KATHLEEN A. EVANS

Mailing Address P.O. BOX 1128

City: **WALLED LAKE** State: **MI** Zip Code: **48390**

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

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA14.7466

Amount of Each Receipt this Period
 _____ **500.00**

VENDOR REFUND: PAYROLL

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

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

_____ **1750.00**

_____ **1750.00**

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ACCENT FLORIST		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 4048 ROCHESTER RD		Amount of Each Disbursement this Period 2772.78
City TROY State MI Zip Code 48085	Purpose of Disbursement PIWOWAR REIMBURSEMENT - FLORAL EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.7675 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AIR CHARTER TEAM, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 4151 N. MULLBERRY DR. SUITE 250		Amount of Each Disbursement this Period 2694.18
City KANSAS CITY State MO Zip Code 64116	Purpose of Disbursement TRAVEL: AIR	
Candidate Name	Category/Type	Transaction ID : SB17.7225
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 78.60
City BATON ROUGE State LA Zip Code 70808	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	Transaction ID : SB17.7226
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2772.78
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 118.29 Transaction ID : SB17.7227
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 8.10 Transaction ID : SB17.7228
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 14.25 Transaction ID : SB17.7229
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	140.64
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 39.30
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Transaction ID : SB17.7230
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 258.90
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Transaction ID : SB17.7231
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 305.40
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Transaction ID : SB17.7232
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	603.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 381.48 Transaction ID : SB17.7233
City BATON ROUGE State LA Zip Code 70808	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 27.90 Transaction ID : SB17.7234
City BATON ROUGE State LA Zip Code 70808	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 208 S. AKARD STREET		Amount of Each Disbursement this Period 323.73 Transaction ID : SB17.7235
City DALLAS State TX Zip Code 75202	Purpose of Disbursement UTILITIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	381.48
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 208 S. AKARD STREET		Amount of Each Disbursement this Period 323.25 Transaction ID : SB17.7239
City DALLAS State TX Zip Code 75202	Purpose of Disbursement UTILITIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BILL BERTAKIS		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 2120 PARK CIRCLE		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.7130
City KEEGO HARBOUR State MI Zip Code 48320	Purpose of Disbursement PHOTOGRAPHY SERVICES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. BLOOMFIELD GOP WOMEN		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address C/O JOYCE MACLEISH 650 E. BIG BEAV #F		Amount of Each Disbursement this Period 27.00 Transaction ID : SB17.7640 [MEMO ITEM]
City TROY State MI Zip Code 48083	Purpose of Disbursement HUDSON REIMBURSEMENT - EVENT REGISTRATION FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	573.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. BLUE CROSS BLUE SHIELD		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 25 NORTH MICHIGAN AVENUE		Amount of Each Disbursement this Period 319.59
City CHICAGO State IL Zip Code 60601	Purpose of Disbursement PIWOWAR REIMBURSEMENT - INSURANCE	
Candidate Name		Transaction ID : SB17.7676 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BLUE CROSS BLUE SHIELD		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 25 NORTH MICHIGAN AVENUE		Amount of Each Disbursement this Period 319.59
City CHICAGO State IL Zip Code 60601	Purpose of Disbursement PIWOWAR REIMBURSEMENT - INSURANCE	
Candidate Name		Transaction ID : SB17.7677 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. BLUE CROSS BLUE SHIELD		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 25 NORTH MICHIGAN AVENUE		Amount of Each Disbursement this Period 300.00
City CHICAGO State IL Zip Code 60601	Purpose of Disbursement PIWOWAR REIMBURSEMENT - INSURANCE	
Candidate Name		Transaction ID : SB17.7678 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CHARLES L. BOGREN			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014		
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 2015.76		
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7167		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. CHARLES L. BOGREN			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014		
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 2015.76		
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7178		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. CHARLES L. BOGREN			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014		
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 149.68		
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7131		
Purpose of Disbursement TRAVEL: MILEAGE		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	4181.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CHARLES L. BOGREN		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 667.80 Transaction ID : SB17.7132
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHARLES L. BOGREN		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 881.00 Transaction ID : SB17.7133
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CHARLES L. BOGREN		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2015.77 Transaction ID : SB17.7189
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3564.77
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CHARLES L. BOGREN		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2015.76 Transaction ID : SB17.7200
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. CHARLES L. BOGREN		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2015.76 Transaction ID : SB17.7211
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. BOYS & GIRLS CLUB OF TROY		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 3670 JOHN R. ROAD		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7241
City TROY	State MI	
Zip Code 48083	Purpose of Disbursement EVENT REGISTRATION FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	4531.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ELENA N. BRENNAN		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.7168
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ELENA N. BRENNAN		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.7179
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ELENA N. BRENNAN		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 100.96 Transaction ID : SB17.7134
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1600.96
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ELENA N. BRENNAN		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7135
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ELENA N. BRENNAN		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.7190
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ELENA N. BRENNAN		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.7201
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ELENA N. BRENNAN			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 750.00	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7212	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. KATHERINE A. CAMPBELL			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 587.12	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7169	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. KATHERINE A. CAMPBELL			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 587.10	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7180	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1924.22
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. KATHERINE A. CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 587.12 Transaction ID : SB17.7191
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KATHERINE A. CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 873.90 Transaction ID : SB17.7202
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. KATHERINE A. CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 873.90 Transaction ID : SB17.7213
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2334.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. KATIE CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 97.60 Transaction ID : SB17.7136
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KATIE CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 456.37 Transaction ID : SB17.7137
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. KATIE CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 881.00 Transaction ID : SB17.7138
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1434.97
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. KATIE CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 31.68 Transaction ID : SB17.7139
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KATIE CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 75.25 Transaction ID : SB17.7140
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CANTON LIONS CLUB		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address PO BOX 1128		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.7243
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement ADVERTISING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	356.93
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014		
Mailing Address 1445-A MCLAUGHLIN AVENUE			Amount of Each Disbursement this Period 15.00		
City MCLEAN	State VA	Zip Code 22101	Transaction ID : SB17.7244		
Purpose of Disbursement BANK FEES		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014		
Mailing Address 1445-A MCLAUGHLIN AVENUE			Amount of Each Disbursement this Period 15.00		
City MCLEAN	State VA	Zip Code 22101	Transaction ID : SB17.7245		
Purpose of Disbursement BANK FEES		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014		
Mailing Address 1445-A MCLAUGHLIN AVENUE			Amount of Each Disbursement this Period 15.00		
City MCLEAN	State VA	Zip Code 22101	Transaction ID : SB17.7246		
Purpose of Disbursement BANK FEES		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 1445-A MCLAUGHLIN AVENUE		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.7247
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement BANK FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 1445-A MCLAUGHLIN AVENUE		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.7248
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement BANK FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 1445-A MCLAUGHLIN AVENUE		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.7249
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement BANK FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CHRISTIAN COALITION OF MICHIGAN		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 211111 HAGGERTY RD		Amount of Each Disbursement this Period 150.00
City NOVI	State MI	
Zip Code 48375	Purpose of Disbursement TIETZ REIMBURSEMENT - EVENT REGISTRATION FEE	Transaction ID : SB17.7673
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. CLARK HILL P.L.C.		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 601 PENNSYLVANIA AVE NW NORTH BUILDING, SUITE 1000		Amount of Each Disbursement this Period 13184.50
City WASHINGTON	State DC	
Zip Code 20004	Purpose of Disbursement LEGAL CONSULTING	Transaction ID : SB17.7250
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CLARK HILL P.L.C.		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 601 PENNSYLVANIA AVE NW NORTH BUILDING, SUITE 1000		Amount of Each Disbursement this Period 4367.00
City WASHINGTON	State DC	
Zip Code 20004	Purpose of Disbursement LEGAL CONSULTING	Transaction ID : SB17.7251
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	17551.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CLARK HILL P.L.C.		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 601 PENNSYLVANIA AVE NW NORTH BUILDING, SUITE 1000		Amount of Each Disbursement this Period 1241.45 Transaction ID : SB17.7252
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement LEGAL CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. COMBAT DATA		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 13262 BLAISDELL DRIVE		Amount of Each Disbursement this Period 2200.00 Transaction ID : SB17.7253
City DEWITT State MI Zip Code 48820	Purpose of Disbursement DATA MANAGEMENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. COMBAT DATA		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 13262 BLAISDELL DRIVE		Amount of Each Disbursement this Period 2200.00 Transaction ID : SB17.7254
City DEWITT State MI Zip Code 48820	Purpose of Disbursement DATA MANAGEMENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5641.45
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COMMERCE PLACE		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 2071 E. WEST MAPLE ROAD		Amount of Each Disbursement this Period 4200.00 Transaction ID : SB17.7255
City COMMERCE TOWNSHIP	State MI Zip Code 48390	
Purpose of Disbursement RENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. COMMERCE PLACE		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 2071 E. WEST MAPLE ROAD		Amount of Each Disbursement this Period 2100.00 Transaction ID : SB17.7256
City COMMERCE TOWNSHIP	State MI Zip Code 48390	
Purpose of Disbursement RENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ZACH COMOS		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 115.60 Transaction ID : SB17.7141
City WALLED LAKE	State MI Zip Code 48390	
Purpose of Disbursement TRAVEL: MILEAGE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6415.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ZACH COMOS		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7142
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ZACHARY M. COMOS		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7170
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ZACHARY M. COMOS		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7181
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ZACHARY M. COMOS			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014		
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 500.00		
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7192		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. ZACHARY M. COMOS			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014		
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 500.00		
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7203		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. ZACHARY M. COMOS			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014		
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 500.00		
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7214		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CONNECTIVIST MEDIA		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 544 E. OGDEN AVENUE SUITE 700-161		Amount of Each Disbursement this Period 2199.00 Transaction ID : SB17.7257
City MILWAUKEE State WI Zip Code 53202	Purpose of Disbursement WEB DEVELOPMENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CONSUMERS ENERGY		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address PO BOX 740786		Amount of Each Disbursement this Period 11.65 Transaction ID : SB17.7258
City CINCINNATI State OH Zip Code 45274	Purpose of Disbursement UTILITIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CONSUMERS ENERGY		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address PO BOX 740786		Amount of Each Disbursement this Period 13.88 Transaction ID : SB17.7259
City CINCINNATI State OH Zip Code 45274	Purpose of Disbursement UTILITIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2224.53
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 3000 COMMERCE CROSSING		Amount of Each Disbursement this Period 149.85
City COMMERCE	State MI	
Zip Code 48382	Purpose of Disbursement RONDO REIMBURSEMENT - MEETING EXPENSE: MEALS	Transaction ID : SB17.7653
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2014
Mailing Address 3000 COMMERCE CROSSING		Amount of Each Disbursement this Period 176.31
City COMMERCE	State MI	
Zip Code 48382	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7679
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 3000 COMMERCE CROSSING		Amount of Each Disbursement this Period 127.59
City COMMERCE	State MI	
Zip Code 48382	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7680
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 57.05
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name	Category/Type	Transaction ID : SB17.7260
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 4637.44
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL TAXES	
Candidate Name	Category/Type	Transaction ID : SB17.7261
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 57.05
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name	Category/Type	Transaction ID : SB17.7262
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4751.54
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 4464.94 Transaction ID : SB17.7263
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 51.55 Transaction ID : SB17.7264
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 1680.35 Transaction ID : SB17.7265
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6196.84
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 57.05 Transaction ID : SB17.7266
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 4464.41 Transaction ID : SB17.7267
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 69.15 Transaction ID : SB17.7268
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4590.61
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 40.55 Transaction ID : SB17.7269
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 4942.48 Transaction ID : SB17.7270
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 60.15 Transaction ID : SB17.7271
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5043.18
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 91 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 5181.52
City FARMINGTON HILLS	State MI Zip Code 48335	
Purpose of Disbursement PAYROLL TAXES	Category/Type	Transaction ID : SB17.7272
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CVS		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2014
Mailing Address 22240 NOVI RD		Amount of Each Disbursement this Period 4.69
City NOVI	State MI Zip Code 48375	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Category/Type	Transaction ID : SB17.7682
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. SARAH E. DAVIS		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00
City WALLED LAKE	State MI Zip Code 48390	
Purpose of Disbursement PAYROLL	Category/Type	Transaction ID : SB17.7171
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5681.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. SARAH E. DAVIS		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7182
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SARAH E. DAVIS		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7143
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SARAH E. DAVIS		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7193
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. SARAH E. DAVIS		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7204
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SARAH E. DAVIS		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7215
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. DECIDER STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 2420 MULBERRY CT		Amount of Each Disbursement this Period 23702.00 Transaction ID : SB17.7273
City ANN ARBOR	State MI	
Zip Code 48104	Purpose of Disbursement STRATEGY CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	24702.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DECIDER STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014	
Mailing Address 2420 MULBERRY CT			Amount of Each Disbursement this Period 15000.00	
City ANN ARBOR	State MI	Zip Code 48104	Transaction ID : SB17.7274	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. DOBSKI'S RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014	
Mailing Address 6565 COOLEY LAKE RD			Amount of Each Disbursement this Period 260.00	
City WATERFORD	State MI	Zip Code 48327	Transaction ID : SB17.7659	
Purpose of Disbursement TIETZ REIMBURSEMENT - MEETING EXPENSE: MEALS		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. DOC'S SPORT RETREAT			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014	
Mailing Address 19265 VICTOR PKWY			Amount of Each Disbursement this Period 212.66	
City LIVONIA	State MI	Zip Code 48152	Transaction ID : SB17.7623	
Purpose of Disbursement BOGREN REIMBURSEMENT - OFFICE SUPPLIES		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DOLLAR TREE STORES, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 2425 HAGGERTY HIGHWAY		Amount of Each Disbursement this Period 7.42
City COMMERCE TOWNSHIP	State MI	
Zip Code 48390	Purpose of Disbursement CAMPBELL REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7631
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. DOLLAR TREE STORES, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 2425 HAGGERTY HIGHWAY		Amount of Each Disbursement this Period 43.46
City COMMERCE TOWNSHIP	State MI	
Zip Code 48390	Purpose of Disbursement CAMPBELL REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7632
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. DOWNTOWN PUBLICATIONS		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 124 W MAPLE RD		Amount of Each Disbursement this Period 371.00
City BIRMINGHAM	State MI	
Zip Code 48009	Purpose of Disbursement PIWOWAR REIMBURSEMENT - PRINT ADVERTISING	Transaction ID : SB17.7683
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7172
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7183
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 229.60 Transaction ID : SB17.7126
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: FUEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1229.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7127
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: FUEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7194
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7205
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 98 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7216
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. DROPBOX		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 760 MARKET ST		Amount of Each Disbursement this Period 99.00 Transaction ID : SB17.7685 [MEMO ITEM]
City SAN FRANCISCO	State CA	
Zip Code 94102	Purpose of Disbursement PIWOWAR REIMBURSEMENT - SOFTWARE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. DRURY INN & SUITES		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 575 WEST BIG BEAVER RD		Amount of Each Disbursement this Period 181.27 Transaction ID : SB17.7667 [MEMO ITEM]
City TROY	State MI	
Zip Code 48084	Purpose of Disbursement TIETZ REIMBURSEMENT - TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DTE ENERGY		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address P.O. BOX 740786		Amount of Each Disbursement this Period 4,567,890.12 184.90
City CINCINNATI	State OH	
Zip Code 45274	Purpose of Disbursement UTILITIES	Transaction ID : SB17.7275
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DTE ENERGY		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address P.O. BOX 740786		Amount of Each Disbursement this Period 4,567,890.12 239.58
City CINCINNATI	State OH	
Zip Code 45274	Purpose of Disbursement UTILITIES	Transaction ID : SB17.7276
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EFAX PLUS SERVICE		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 6922 HOLLYWOOD BLVD 5TH FLOOR		Amount of Each Disbursement this Period 4,567,890.12 16.95
City LOS ANGELES	State CA	
Zip Code 90028	Purpose of Disbursement PIWOWAR REIMBURSEMENT - SOFTWARE	Transaction ID : SB17.7686
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	424.48
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. EFAZ PLUS SERVICE		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2014
Mailing Address 6922 HOLLYWOOD BLVD 5TH FLOOR		Amount of Each Disbursement this Period 16.95
City LOS ANGELES	State CA Zip Code 90028	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - SOFTWARE		Transaction ID : SB17.7687
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. KATHLEEN A. EVANS		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00
City WALLED LAKE	State MI Zip Code 48390	
Purpose of Disbursement PAYROLL		Transaction ID : SB17.7173
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) C. KATHLEEN A. EVANS		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00
City WALLED LAKE	State MI Zip Code 48390	
Purpose of Disbursement PAYROLL		Transaction ID : SB17.7184
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. KATHLEEN A. EVANS		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7195
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KATHLEEN A. EVANS		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7206
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. KATHLEEN A. EVANS		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7217
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. KATY EVANS		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 45915 WHITE PINES DRIVE		Amount of Each Disbursement this Period 307.88 Transaction ID : SB17.7145
City NOVI	State MI	
Zip Code 48374	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KATY EVANS		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 45915 WHITE PINES DRIVE		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7146
City NOVI	State MI	
Zip Code 48374	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FARMINGTON HILLS POLICE BENEVOLENT ASSOCIATION		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address P.O. BOX 255		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.7278
City FARMINGTON	State MI	
Zip Code 48322	Purpose of Disbursement EVENT REGISTRATION FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1057.88
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FEDEX		M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 14.12
City SOUTHFIELD	State MI Zip Code 48034	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES		Transaction ID : SB17.7688
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. FEDEX		M M / D D / Y Y Y Y 06 / 28 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 26.44
City SOUTHFIELD	State MI Zip Code 48034	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES		Transaction ID : SB17.7689
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. FEDEX		M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.37
City SOUTHFIELD	State MI Zip Code 48034	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES		Transaction ID : SB17.7690
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 0.94
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.7691 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.06
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.7692 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.37
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.7693 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FEDEX		M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 14.12
City SOUTHFIELD	State MI Zip Code 48034	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES		Transaction ID : SB17.7694
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. FEDEX		M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.06
City SOUTHFIELD	State MI Zip Code 48034	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES		Transaction ID : SB17.7695
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. FEDEX		M M / D D / Y Y Y Y 08 / 02 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.37
City SOUTHFIELD	State MI Zip Code 48034	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES		Transaction ID : SB17.7696
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FEDEX		M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 13.77
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES	
Candidate Name		Transaction ID : SB17.7697
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. FEDEX		M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.06
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES	
Candidate Name		Transaction ID : SB17.7698
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. FEDEX		M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 36.62
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES	
Candidate Name		Transaction ID : SB17.7699
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.37
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.7700 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 08 / 25 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.03
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement PIWOWAR REIMBURSEMENT - DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.7701 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FLOWER LOFT		Date of Disbursement MM / DD / YYYY 07 / 29 / 2014
Mailing Address 24484 W 10 MILE RD		Amount of Each Disbursement this Period 122.91
City SOUTHFIELD State MI Zip Code 48033	Purpose of Disbursement PIWOWAR REIMBURSEMENT - FLOARAL EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.7703 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. G. SUBU'S LEATHER BOTTLE		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 20300 FRAMINGHAM RD		Amount of Each Disbursement this Period 400.00
City LIVONIA State MI Zip Code 48152	Purpose of Disbursement TIETZ REIMBURSEMENT - MEETING EXPENSE: MEALS	
Candidate Name		Transaction ID : SB17.7665 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. GARDEN CITY LOCK & KEY		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 6731 MIDDLEBELT RD		Amount of Each Disbursement this Period 35.00
City GARDEN CITY State MI Zip Code 48135	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE EQUIPEMENT PURCHASE	
Candidate Name		Transaction ID : SB17.7705 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. GAZETTE NEWSPAPERS		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address PO BOX 482		Amount of Each Disbursement this Period 600.00
City TROY State MI Zip Code 48099	Purpose of Disbursement PIWOWAR REIMBURSEMENT - PRINT ADVERTISING	
Candidate Name		Transaction ID : SB17.7707 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. HENRY GEM BIS		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 796.94 Transaction ID : SB17.7174
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. HENRY GEM BIS		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 409.25 Transaction ID : SB17.7185
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. HENRY GEM BIS		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 440.50 Transaction ID : SB17.7129
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1646.69
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. HENRY GEM BIS			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 409.25	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7196	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. HENRY GEM BIS			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 559.45	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7207	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. HENRY GEM BIS			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 559.44	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7218	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1528.14
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. GREAT DANE MARKETING SERVICES		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 5833 BINGHAM DRIVE		Amount of Each Disbursement this Period 6250.00 Transaction ID : SB17.7279
City TROY State MI Zip Code 48085	Purpose of Disbursement MARKETING CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. GREAT DANE MARKETING SERVICES		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 5833 BINGHAM DRIVE		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.7280
City TROY State MI Zip Code 48085	Purpose of Disbursement MARKETING CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. GREAT DANE MARKETING SERVICES		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 5833 BINGHAM DRIVE		Amount of Each Disbursement this Period 6250.00 Transaction ID : SB17.7281
City TROY State MI Zip Code 48085	Purpose of Disbursement MARKETING CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	14000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. GUERNSEY FARMS DAIRY		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2014
Mailing Address 21300 NOVI RD		Amount of Each Disbursement this Period 40.95
City NORTHVILLE State MI Zip Code 48167	Purpose of Disbursement PIWOWAR REIMBURSEMENT - MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.7709 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 128.96
City WALLED LAKE State MI Zip Code 48390	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	
Candidate Name	Category/Type	Transaction ID : SB17.7147
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1151.77
City WALLED LAKE State MI Zip Code 48390	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	Transaction ID : SB17.7175
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1280.73
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 252.28 Transaction ID : SB17.7148
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1151.79 Transaction ID : SB17.7186
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 881.00 Transaction ID : SB17.7149
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2285.07
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. TROY W. HUDSON		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 4115.77 Transaction ID : SB17.7197
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TROY W. HUDSON		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1491.54 Transaction ID : SB17.7208
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TROY W. HUDSON		Date of Disbursement MM / DD / YYYY 09 / 19 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1491.56 Transaction ID : SB17.7219
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4134.87
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. IMPACT MEDIA		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 23715 NILAN DR		Amount of Each Disbursement this Period 296.80
City NOVI	State MI	
Zip Code 48375	Purpose of Disbursement PIWOWAR REIMBURSEMENT - COMMUNICATIONS CONSULTING	Transaction ID : SB17.7710
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. IMPACT MEDIA		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 23715 NILAN DR		Amount of Each Disbursement this Period 591.50
City NOVI	State MI	
Zip Code 48375	Purpose of Disbursement PIWOWAR REIMBURSEMENT - COMMUNICATIONS CONSULTING	Transaction ID : SB17.7711
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. IMPACT MEDIA		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 23715 NILAN DR		Amount of Each Disbursement this Period 1703.34
City NOVI	State MI	
Zip Code 48375	Purpose of Disbursement PIWOWAR REIMBURSEMENT - COMMUNICATIONS CONSULTING	Transaction ID : SB17.7712
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. IMPACT MEDIA		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 23715 NILAN DR		Amount of Each Disbursement this Period 696.00
City NOVI	State MI	
Zip Code 48375		Transaction ID : SB17.7713
Purpose of Disbursement PIWOWAR REIMBURSEMENT - COMMUNICATIONS CONSULTING		
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) B. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 5318.46
City NOVI	State MI	
Zip Code 48375		Transaction ID : SB17.7282
Purpose of Disbursement PRINTING & DESIGN SERVICES		
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) C. JET'S PIZZA		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address 1126 N PONTIAC TRAIL		Amount of Each Disbursement this Period 26.20
City WALLED LAKE	State MI	
Zip Code 48390		Transaction ID : SB17.7715
Purpose of Disbursement PIWOWAR REIMBURSEMENT - MEETING EXPENSE: MEALS		
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	5318.46
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. JOANN FABRICS		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 43570 W OAKS DR		Amount of Each Disbursement this Period 0.00
City NOVI	State MI	
Zip Code 48377	Purpose of Disbursement HUDSON REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7643 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LAKE SHORE PARK		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 601 S LAKE DR		Amount of Each Disbursement this Period 5.00
City NOVI	State MI	
Zip Code 48375	Purpose of Disbursement PAVLOV REIMBURSEMENT - PARKING SERVICES	Transaction ID : SB17.7652 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. LASERCOMP		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 34013 SCHOOLCRAFT RD		Amount of Each Disbursement this Period 186.31
City LIVONIA	State MI	
Zip Code 48150	Purpose of Disbursement PIWOWAR REIMBURSEMENT - EQUIPMENT RENTAL	Transaction ID : SB17.7717 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LASERCOMP		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 34013 SCHOOLCRAFT RD		Amount of Each Disbursement this Period 207.44
City LIVONIA	State MI	
Zip Code 48150	Purpose of Disbursement PIWOWAR REIMBURSEMENT - EQUIPMENT RENTAL	Transaction ID : SB17.7718
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. LIBRARY SPORTS PUB & GRILL		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 6363 HAGGERTY RD		Amount of Each Disbursement this Period 45.59
City WEST BLOOMFIELD TOWNSHIP	State MI	
Zip Code 48322	Purpose of Disbursement PIWOWAR REIMBURSEMENT - MEETING EXPENSE: MEALS	Transaction ID : SB17.7720
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. LIVONIA CHAMBER OF COMMERCE		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 33233 5 MILE ROAD		Amount of Each Disbursement this Period 25.00
City LIVONIA	State MI	
Zip Code 48154	Purpose of Disbursement HUDSON REIMBURSEMENT - EVENT REGISTRATION FEE	Transaction ID : SB17.7638
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LOWE'S		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 2745 WEST MAPLE ROAD		Amount of Each Disbursement this Period 65.14
City COMMERCE TOWNSHIP	State MI	
Zip Code 48390	Purpose of Disbursement BOGREN REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7621
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. LOWE'S		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2014
Mailing Address 2745 WEST MAPLE ROAD		Amount of Each Disbursement this Period 25.78
City COMMERCE TOWNSHIP	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7721
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. LOWE'S		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2014
Mailing Address 2745 WEST MAPLE ROAD		Amount of Each Disbursement this Period 14.81
City COMMERCE TOWNSHIP	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7722
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LUKICH'S FAMILY RESTAURANT		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 3900 ROCHESTER RD		Amount of Each Disbursement this Period 125.00
City TROY State MI Zip Code 48083	Purpose of Disbursement TIETZ REIMBURSEMENT - MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.7657 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MAJORITY STRATEGIES, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 135 PROFESSIONAL DRIVE SUITE 104		Amount of Each Disbursement this Period 158633.05
City PONTE VEDRA BEACH State FL Zip Code 32082	Purpose of Disbursement DIRECT MAIL PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.7283
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MARATHON PETROLEUM		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2014
Mailing Address 24141 NOVI RD		Amount of Each Disbursement this Period 19.56
City NOVI State MI Zip Code 48375	Purpose of Disbursement PIWOWAR REIMBURSEMENT - TRAVEL: FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.7724 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	158633.05
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 10400 FERNWOOD ROAD		Amount of Each Disbursement this Period 3531.79
City BETHESDA	State MD	
Zip Code 20817		Transaction ID : SB17.7725
Purpose of Disbursement PIWOWAR REIMBURSEMENT - FACILITY RENTAL/CATERING SERVICES		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 10400 FERNWOOD ROAD		Amount of Each Disbursement this Period 300.00
City BETHESDA	State MD	
Zip Code 20817		Transaction ID : SB17.7624
Purpose of Disbursement BOGREN REIMBURSEMENT - TRAVEL: LODGING		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 10400 FERNWOOD ROAD		Amount of Each Disbursement this Period 12.95
City BETHESDA	State MD	
Zip Code 20817		Transaction ID : SB17.7726
Purpose of Disbursement PIWOWAR REIMBURSEMENT - TRAVEL: LODGING		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement MM / DD / YYYY 08 / 13 / 2014
Mailing Address 10400 FERNWOOD ROAD		Amount of Each Disbursement this Period 1890.49
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement PIWOWAR REIMBURSEMENT - TRAVEL: LODGING	Transaction ID : SB17.7727
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. MARRIOTT		Date of Disbursement MM / DD / YYYY 08 / 13 / 2014
Mailing Address 10400 FERNWOOD ROAD		Amount of Each Disbursement this Period 12641.74
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement PIWOWAR REIMBURSEMENT - FACILITY RENTAL/CATERING SERVICES	Transaction ID : SB17.7728
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. MEIJER		Date of Disbursement MM / DD / YYYY 12 / 05 / 2013
Mailing Address 1703 HAGGERTY		Amount of Each Disbursement this Period 7.29
City COMMERCE	State MI	
Zip Code 48390	Purpose of Disbursement HUDSON REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7641
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 124 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEIJER		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 1703 HAGGERTY		Amount of Each Disbursement this Period 21.83
City COMMERCE	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7729
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. MEIJER		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 1703 HAGGERTY		Amount of Each Disbursement this Period 7.71
City COMMERCE	State MI	
Zip Code 48390	Purpose of Disbursement CAMPBELL REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7633
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. MEIJER		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 1703 HAGGERTY		Amount of Each Disbursement this Period 85.20
City COMMERCE	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7730
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEIJER		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2014
Mailing Address 1703 HAGGERTY		Amount of Each Disbursement this Period 54.63
City COMMERCE	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7731
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. MEIJER		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 1703 HAGGERTY		Amount of Each Disbursement this Period 75.49
City COMMERCE	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7732
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. MEIJER		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 1703 HAGGERTY		Amount of Each Disbursement this Period 2.65
City COMMERCE	State MI	
Zip Code 48390	Purpose of Disbursement CAMPBELL REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7635
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. NATIONAL RESEARCH, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 146 STATE HIGHWAY 34 SUITE 250		Amount of Each Disbursement this Period 35000.00 Transaction ID : SB17.7284
City HOLMDEL State NJ Zip Code 07733	Purpose of Disbursement POLLING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NATIONAL RESEARCH, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 146 STATE HIGHWAY 34 SUITE 250		Amount of Each Disbursement this Period 24000.00 Transaction ID : SB17.7285
City HOLMDEL State NJ Zip Code 07733	Purpose of Disbursement POLLING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NORTH OAKLAND REPUBLICAN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2205 TEGGERDINE RD		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.7655 [MEMO ITEM]
City WHITE LAKE State MI Zip Code 48386	Purpose of Disbursement TIETZ REIMBURSEMENT - EVENT REGISTRATION FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	59000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 986.35 Transaction ID : SB17.7176
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 12.84 Transaction ID : SB17.7151
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 63.25 Transaction ID : SB17.7152
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1062.44
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 986.35 Transaction ID : SB17.7187
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 881.00 Transaction ID : SB17.7153
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 986.34 Transaction ID : SB17.7198
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2853.69
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1042.60 Transaction ID : SB17.7209
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1042.58 Transaction ID : SB17.7220
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2960.55 Transaction ID : SB17.7177
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5045.73
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 130 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEGAN J. PIWOWAR			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 52.40	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7154	
Purpose of Disbursement TRAVEL: MILEAGE		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. MEGAN J. PIWOWAR			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 10794.85	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7155	
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. MEGAN J. PIWOWAR			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 2960.56	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.7188	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	13807.81
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1956.35 Transaction ID : SB17.7156
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2960.56 Transaction ID : SB17.7199
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 12.00 Transaction ID : SB17.7157
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4928.91
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 13358.79 Transaction ID : SB17.7158
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.7159
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 3878.51 Transaction ID : SB17.7160
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	17257.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 133 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2960.54 Transaction ID : SB17.7210
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2960.56 Transaction ID : SB17.7221
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 2417.28 Transaction ID : SB17.7286
City BEVERLY	State MA	
Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	8338.38
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. RED CURVE SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014	
Mailing Address 500 CUMMINGS CENTER SUITE 4400			Amount of Each Disbursement this Period 2400.00	
City BEVERLY	State MA	Zip Code 01915	Transaction ID : SB17.7287	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 500 CUMMINGS CENTER SUITE 4400			Amount of Each Disbursement this Period 2464.96	
City BEVERLY	State MA	Zip Code 01915	Transaction ID : SB17.7288	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 500 CUMMINGS CENTER SUITE 4400			Amount of Each Disbursement this Period 151.80	
City BEVERLY	State MA	Zip Code 01915	Transaction ID : SB17.7289	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	5016.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. RED LOBSTER		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 479 TELEGRAPH RD		Amount of Each Disbursement this Period 468.79
City WATERFORD State MI Zip Code 48329	Purpose of Disbursement TIETZ REIMBURSEMENT - FACILITY RENTAL/CATERING SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.7671 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANDREW RICHNER		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 718 BERKSHIRE ROAD		Amount of Each Disbursement this Period 186.33
City GROSSE POINTE PARK State MI Zip Code 48230	Purpose of Disbursement IN-KIND: CATERING SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.7166
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SAM'S CLUB		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 2101 S.E. 25TH STREET		Amount of Each Disbursement this Period 193.43
City BENTONVILLE State AR Zip Code 72712	Purpose of Disbursement CAMPBELL REIMBURSEMENT - OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.7630 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	186.33
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. SE MICHIGAN TEA PARTY			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2014	
Mailing Address 111 WOLF CREEK HWY			Amount of Each Disbursement this Period 90.00	
City ADRIAN	State MI	Zip Code 49221	Transaction ID : SB17.7620	
Purpose of Disbursement BOGREN REIMBURSEMENT - EVENT REGISTRATION FEE		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. SPINAL COLUMN NEWSWEEKLY			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014	
Mailing Address 1103 S MILFORD RD			Amount of Each Disbursement this Period 430.00	
City HIGHLAND	State MI	Zip Code 48357	Transaction ID : SB17.7663	
Purpose of Disbursement TIETZ REIMBURSEMENT - PRINT ADVERTISING		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ST ANDREW'S SOCIETY OF DETROIT HIGHLAND GAMES			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2014	
Mailing Address 2360 ROCHESTER CT			Amount of Each Disbursement this Period 68.00	
City TROY	State MI	Zip Code 48083	Transaction ID : SB17.7626	
Purpose of Disbursement CAMPBELL REIMBURSEMENT - EVENT REGISTRATION FEE		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 137 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 72.67
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7733
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 08 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 79.47
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7734
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 127.15
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7735
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 58.25
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAVLOV REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7650 [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 241.48
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7736 [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 99.61
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7737 [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. STRATEGIC MEDIA PLACEMENT		M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period	
City DELAWARE State OH Zip Code 43015		211375.00	
Purpose of Disbursement MEDIA PLACEMENT		Transaction ID : SB17.7290	
Candidate Name		Category/Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. STRATEGIC MEDIA PLACEMENT		M M / D D / Y Y Y Y 07 / 24 / 2014	
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period	
City DELAWARE State OH Zip Code 43015		214225.00	
Purpose of Disbursement MEDIA PLACEMENT		Transaction ID : SB17.7291	
Candidate Name		Category/Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. SUBURBAN COLLECTION SHOWPLACE		M M / D D / Y Y Y Y 02 / 26 / 2014	
Mailing Address 46100 GRAND RIVER		Amount of Each Disbursement this Period	
City NOVI State MI Zip Code 48374		10.00	
Purpose of Disbursement HUDSON REIMBURSEMENT - PARKING SERVICES		Transaction ID : SB17.7644	
Candidate Name		Category/Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	425600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. TARGET		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 495 HAGGERTY HWY		Amount of Each Disbursement this Period 25.00
City COMMERCE TOWNSHIP	State MI	
Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - PRINTING & DESIGN SERVICES	Transaction ID : SB17.7738 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE BAR		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2014
Mailing Address 224 S MAIN ST		Amount of Each Disbursement this Period 128.96
City MILFORD	State MI	
Zip Code 48381	Purpose of Disbursement HUDSON REIMBURSEMENT - MEETING EXPENSE: MEALS	Transaction ID : SB17.7637 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE RAKOLTA GROUP		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 575 VINEWOOD AVENUE		Amount of Each Disbursement this Period 25000.00
City BIRMINGHAM	State MI	
Zip Code 48009	Purpose of Disbursement FUNDRAISING CONSULTING	Transaction ID : SB17.7292
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	25000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. THE STRATEGY GROUP		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period 7500.00 Transaction ID : SB17.7293
City DELAWARE State OH Zip Code 43015	Purpose of Disbursement MEDIA PRODUCTION	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE STRATEGY GROUP		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period 20000.00 Transaction ID : SB17.7294
City DELAWARE State OH Zip Code 43015	Purpose of Disbursement MEDIA PRODUCTION	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE STRATEGY GROUP		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period 7675.00 Transaction ID : SB17.7295
City DELAWARE State OH Zip Code 43015	Purpose of Disbursement MEDIA PRODUCTION	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	35175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 142 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DOUG TIETZ		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 918.79 Transaction ID : SB17.7162
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. DOUG TIETZ		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 24.44 Transaction ID : SB17.7163
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. DOUG TIETZ		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 339.32 Transaction ID : SB17.7164
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1282.55
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 143 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DOUG TIETZ		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1716.27 Transaction ID : SB17.7165
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TRACTOR SUPPLY CO		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 57184 LYON CENTER DRIVE WEST		Amount of Each Disbursement this Period 126.99 Transaction ID : SB17.7649 [MEMO ITEM]
City NEW HUDSON	State MI	
Zip Code 48165	Purpose of Disbursement KIDD REIMBURSEMENT - OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TROY CHAMBER OF COMMERCER		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 2125 BUTTERFIELD DR #100N		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.7661 [MEMO ITEM]
City TROY	State MI	
Zip Code 48084	Purpose of Disbursement TIETZ REIMBURSEMENT - EVENT REGISTRATION FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1716.27
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 144 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. UNDERGROUND PRINTING		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 329 S. MAIN STREET		Amount of Each Disbursement this Period 810.90
City ANN ARBOR State MI Zip Code 48104	Purpose of Disbursement PIWOWAR REIMBURSEMENT - PRINTING & DESIGN SERVICES	
Candidate Name		Transaction ID : SB17.7739
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. UPTOWN GRILLE		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 3100 WEST MAPLE RD		Amount of Each Disbursement this Period 38.00
City COMMERCE TOWNSHIP State MI Zip Code 48390	Purpose of Disbursement PIWOWAR REIMBURSEMENT - MEETING EXPENSE: MEALS	
Candidate Name		Transaction ID : SB17.7741
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period 761.60
City WASHINGTON State DC Zip Code 20260	Purpose of Disbursement PIWOWAR REIMBURSEMENT - POSTAGE	
Candidate Name		Transaction ID : SB17.7742
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period 2388.00
City WASHINGTON State DC Zip Code 20260	Purpose of Disbursement PIWOWAR REIMBURSEMENT - POSTAGE	
Candidate Name	Category/Type	Transaction ID : SB17.7743 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period 343.00
City WASHINGTON State DC Zip Code 20260	Purpose of Disbursement PIWOWAR REIMBURSEMENT - POSTAGE	
Candidate Name	Category/Type	Transaction ID : SB17.7744 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MARK VALENTE III		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 7055 LEESTONE STREET		Amount of Each Disbursement this Period 2388.00
City SPRINGFIELD State VA Zip Code 22151	Purpose of Disbursement IN-KIND: FACILITY RENTAL/CATERING SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.7615
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2388.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2014
Mailing Address PO BOX 4002		Amount of Each Disbursement this Period 144.95
City ACKWORTH	State GA Zip Code 30101	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - MOBILE PHONE EXPENSE		Transaction ID : SB17.7745
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address PO BOX 4002		Amount of Each Disbursement this Period 68.19
City ACKWORTH	State GA Zip Code 30101	
Purpose of Disbursement CAMPBELL REIMBURSEMENT - MOBILE PHONE EXPENSE		Transaction ID : SB17.7628
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address PO BOX 4002		Amount of Each Disbursement this Period 146.62
City ACKWORTH	State GA Zip Code 30101	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - MOBILE PHONE EXPENSE		Transaction ID : SB17.7746
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address PO BOX 4002		Amount of Each Disbursement this Period 68.16
City ACKWORTH	State GA Zip Code 30101	
Purpose of Disbursement CAMPBELL REIMBURSEMENT - MOBILE PHONE EXPENSE		Transaction ID : SB17.7629
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2014
Mailing Address PO BOX 4002		Amount of Each Disbursement this Period 72.60
City ACKWORTH	State GA Zip Code 30101	
Purpose of Disbursement CAMPBELL REIMBURSEMENT - MOBILE PHONE EXPENSE		Transaction ID : SB17.7634
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 702 SW 8TH ST		Amount of Each Disbursement this Period 30.35
City BENTONVILLE	State AR Zip Code 72716	
Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES		Transaction ID : SB17.7748
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 148 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WALGREENS		Date of Disbursement MM / DD / YYYY 08 / 03 / 2014
Mailing Address 24100 NOVI RD		Amount of Each Disbursement this Period 7.47
City NOVI	State MI	
Zip Code 48375	Purpose of Disbursement PIWOWAR REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.7750
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. WAYNE 11TH CONGRESSIONAL DISTRICT COMMITTEE		Date of Disbursement MM / DD / YYYY 08 / 10 / 2014
Mailing Address 6642 CARLTON RD		Amount of Each Disbursement this Period 300.00
City CANTON	State MI	
Zip Code 48187	Purpose of Disbursement TIETZ REIMBURSEMENT - EVENT REGISTRATION FEE	Transaction ID : SB17.7669
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. KRISTINE ZRINYI		Date of Disbursement MM / DD / YYYY 09 / 19 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 536.52
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Transaction ID : SB17.7223
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	536.52
TOTAL This Period (last page this line number only).....	936052.25

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **TROTT FOR CONGRESS, INC.** Transaction ID : **SC/10.7005**

LOAN SOURCE Full Name (Last, First, Middle Initial) DAVID A. TROTT	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 158 PARK LAKE DRIVE	

City	State	ZIP Code
BIRMINGHAM	MI	48009

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 / 06 / 2014	11/04/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	250000.00
TOTALS This Period (last page in this line only).....	250000.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DECIDER STRATEGIES

Mailing Address 2420 MULBERRY CT

City State Zip Code
ANN ARBOR MI 48104

Nature of Debt (Purpose):
STRATEGY CONSULTING

Outstanding Balance Beginning This Period **Transaction ID : SD10.7751**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
10000.00 0.00 10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MAJORITY STRATEGIES, INC.

Mailing Address 135 PROFESSIONAL DRIVE SUITE 104

City State Zip Code
PONTE VEDRA BEACH FL 32082

Nature of Debt (Purpose):
DIRECT MAIL

Outstanding Balance Beginning This Period **Transaction ID : SD10.7297**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
24849.87 0.00 24849.87

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	34849.87
2) TOTALS This Period (last page this line number only)	34849.87
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	250000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	284849.87