

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

Morton for Congress

ADDRESS (number and street)

5510 Woodward Ave

Check if different than previously reported. (ACC)

Detroit

MI

48202

2. FEC IDENTIFICATION NUMBER ▼

C C00554923

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MI

14

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04 / 01 / 2014

through

M M / D D / Y Y Y Y

06 / 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 Ms. Linda A Ward

Signature of Treasurer Ms. Linda A Ward

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07 / 14 / 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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Morton for Congress

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))....	400.00	31265.00
(b) Total Contribution Refunds (from Line 20(d))	2100.00	2100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-1700.00	29165.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	13649.21	33946.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	3135.90	3135.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	10513.31	30811.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.98	
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).....	5070.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Morton for Congress

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).....	250.00	28850.00
(ii) Unitemized.....	150.00	2405.00
(iii) TOTAL of contributions from individuals ▶	400.00	31255.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	10.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	400.00	31265.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	117.00	21617.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	117.00	21617.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	3135.90	3135.90
15. OTHER RECEIPTS (Dividends, Interest, etc.)	2530.00	2530.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	6182.90	58547.90

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	13649.21	33946.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	21500.00	21500.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	21500.00	21500.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2100.00	2100.00
(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)).....	2100.00	2100.00
21. OTHER DISBURSEMENTS	1000.00	1000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	38249.21	58546.92

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	32067.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6182.90
25. SUBTOTAL (add Line 23 and Line 24).....	38250.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	38249.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.98

**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 24
	<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)
Morton for Congress

A. Full Name (Last, First, Middle Initial)
James R Lawrence

Mailing Address 8200 E Jefferson Ave
Apt 1502

City Detroit State MI Zip Code 48214-3976

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
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2014

Transaction ID : VNJ1NCJ9PW6

Amount of Each Receipt this Period
250.00

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).....

250.00

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 24
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Morton for Congress

A. Full Name (Last, First, Middle Initial)
Maurice Morton

Mailing Address 2985 E Jefferson Ave

City State Zip Code
Detroit MI 48207-4288

FEC ID number of contributing federal political committee. **C H4MI14166**

Name of Employer Occupation
Simpson Morton & Cross Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
21617.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 03 / 2014

Transaction ID : VNJ1NCXVJG8

Amount of Each Receipt this Period
117.00

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).....

117.00

117.00

**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 24
	<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)
Morton for Congress

A. Full Name (Last, First, Middle Initial)
Detroit Chamber

Mailing Address 1 Woodward Ave

City State Zip Code
Detroit MI 48226-3402

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2115.00

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

Transaction ID : VNJ1NCRR5A0

Amount of Each Receipt this Period
2115.00

Refund of Disbursement

B. Full Name (Last, First, Middle Initial)
Mission Point Resort

Mailing Address One Lakeshore Drive

City State Zip Code
Mackinac Island MI 49757

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1020.90

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : VNJ1NCNS8Y4

Amount of Each Receipt this Period
1020.90

Refund of Disbursement

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).....

3135.90

3135.90

**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 24
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Morton for Congress

A. Full Name (Last, First, Middle Initial)
CBS Outdoor

Mailing Address 88 Custer St

City State Zip Code
Detroit MI 48202-3106

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

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
 06 / 11 / 2014

Transaction ID : VNJ1NCXVJJ3

Amount of Each Receipt this Period
2500.00

Refund for Outdoor Billboard

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).....

2500.00

2500.00

**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 9 OF 24			
	<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)
Morton for Congress

Full Name (Last, First, Middle Initial) A. Tamekia Ashford		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 3320 Spinnaker Ln Apt 11B		Amount of Each Disbursement this Period 500.00 Transaction ID : VNH2D9S5QX6
City Detroit	State MI	
Zip Code 48207-5005	Purpose of Disbursement Communication Services	Category/ Type 001
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. Ashley Enterprises		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 28475 Everett		Amount of Each Disbursement this Period 1200.00 Transaction ID : VNH2D9S5QS4
City Southfield	State MI	
Zip Code 48076-3023	Purpose of Disbursement Administrative Consulting	Category/ Type 001
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. Beans & Cornbread		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 29508 Northwestern Hwy		Amount of Each Disbursement this Period 333.66 Transaction ID : VNH2D9RX479
City Southfield	State MI	
Zip Code 48034-5703	Purpose of Disbursement Food and Beverage	Category/ Type 001
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).....	2033.66
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 10 OF 24	
	<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)
Morton for Congress

Full Name (Last, First, Middle Initial) A. Eye to Eye Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 600 River Place Dr Apt 6608		Amount of Each Disbursement this Period 300.00 Transaction ID : VNH2D9RZ3G5
City Detroit	State MI Zip Code 48207-5025	
Purpose of Disbursement Printing	Category/Type 001	
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. Eye to Eye Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 600 River Place Dr Apt 6608		Amount of Each Disbursement this Period 588.45 Transaction ID : VNH2D9S5R00
City Detroit	State MI Zip Code 48207-5025	
Purpose of Disbursement Fundraiser Commissions	Category/Type 001	
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. Johnson Monroe Group LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1221 Bowers St Unit 393		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH2D9S3428
City Birmingham	State MI Zip Code 48012-7123	
Purpose of Disbursement Campaign Consulting	Category/Type 001	
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).....	1888.45
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 11 OF 24	
	<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)
Morton for Congress

Full Name (Last, First, Middle Initial) A. Johnson Monroe Group LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 1221 Bowers St Unit 393		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH2D9S5QT2
City Birmingham	State MI Zip Code 48012-7123	
Purpose of Disbursement Campaign Consulting	Category/Type 001	
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. Vincent Mazzola		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 1635 W Hancock St		Amount of Each Disbursement this Period 600.00 Transaction ID : VNH2D9RZG97
City Detroit	State MI Zip Code 48208-2209	
Purpose of Disbursement Internet Consulting	Category/Type 001	
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. Michigan Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 606 Townsend St		Amount of Each Disbursement this Period 700.00 Transaction ID : VNH2D9RX495
City Lansing	State MI Zip Code 48933-2313	
Purpose of Disbursement Tickets - MDP Dinner	Category/Type 001	
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).....	2300.00
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 12 OF 24	
	<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)
Morton for Congress

Full Name (Last, First, Middle Initial) A. NGP Van, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 700.00 Transaction ID : VNH2D9RX420
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Database Services Candidate Name Category/Type 001	
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. NGP Van, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 700.00 Transaction ID : VNH2D9SH4X0
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Database Services Candidate Name Category/Type 001	
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. Carlton R Orse		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1 Williamsburg Towne St Ste 100		Amount of Each Disbursement this Period 3150.00 Transaction ID : VNH2D9RVVW2
City Southfield State MI Zip Code 48075-3467	Purpose of Disbursement Political Strategy Consulting Candidate Name Category/Type 001	
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).....	4550.00
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 13 OF 24	
	<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)
Morton for Congress

A. Carlton R Orse

Full Name (Last, First, Middle Initial)

Mailing Address 1 Williamsburg Towne St
Ste 100

City Southfield State MI Zip Code 48075-3467

Purpose of Disbursement Food and Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 07 / 2014

Amount of Each Disbursement this Period: 117.88

Transaction ID : VNH2D9RXM08

Category/Type: 001

B. Sandler, Reiff, Young & Lamb, P.C.

Full Name (Last, First, Middle Initial)

Mailing Address 1025 Vermont Ave NW
Ste 300

City Washington State DC Zip Code 20005-6302

Purpose of Disbursement Legal Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 19 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : VNH2D9S3CT4

Category/Type: 001

c. Sandler, Reiff, Young & Lamb, P.C.

Full Name (Last, First, Middle Initial)

Mailing Address 1025 Vermont Ave NW
Ste 300

City Washington State DC Zip Code 20005-6302

Purpose of Disbursement Legal Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 23 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : VNH2D9S5QV0

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 1117.88

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 14 OF 24	
	<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)
Morton for Congress

A. Sponsored by BMO Harris Bank N.A.

Full Name (Last, First, Middle Initial)

Mailing Address 1750 Old Meadow Rd Ste 300

City McLean State VA Zip Code 22102-4304

Purpose of Disbursement Credit Card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 02 / 2014

Amount of Each Disbursement this Period: 316.07

Transaction ID : VNH2D9RX412

Category/Type: 001

B. Sponsored by BMO Harris Bank N.A.

Full Name (Last, First, Middle Initial)

Mailing Address 1750 Old Meadow Rd Ste 300

City McLean State VA Zip Code 22102-4304

Purpose of Disbursement Credit Card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 02 / 2014

Amount of Each Disbursement this Period: 40.16

Transaction ID : VNH2D9SH4Y8

Category/Type: 001

C. Sponsored by BMO Harris Bank N.A.

Full Name (Last, First, Middle Initial)

Mailing Address 1750 Old Meadow Rd Ste 300

City McLean State VA Zip Code 22102-4304

Purpose of Disbursement Credit Card Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 02 / 2014

Amount of Each Disbursement this Period: 5.00

Transaction ID : VNH2D9T87S8

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 361.23

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 24	
	<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)
Morton for Congress

Full Name (Last, First, Middle Initial) A. Linda Ward		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 23307 N Chanticleer Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : VNH2D9S5QZ2
City Southfield State MI Zip Code 48034-6938	Purpose of Disbursement Accounting Consulting Candidate Name Category/Type 001	
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. Linda Ward		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 23307 N Chanticleer Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : VNH2D9S6Y51
City Southfield State MI Zip Code 48034-6938	Purpose of Disbursement Accounting Consulting Candidate Name Category/Type 001	
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	13251.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 24	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Morton for Congress

Full Name (Last, First, Middle Initial) A. Maurice Morton		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 2985 E Jefferson Ave		Amount of Each Disbursement this Period 10000.00 Transaction ID : VNH2D9S3436
City State Zip Code Detroit MI 48207-4288	Purpose of Disbursement Loan Repayment	
Candidate Name Maurice Morton	Category/Type 009	
Office Sought: <input checked="" 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: MI District: 14		

Full Name (Last, First, Middle Initial) B. Maurice Morton		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 2985 E Jefferson Ave		Amount of Each Disbursement this Period 10000.00 Transaction ID : VNH2D9S3Q35
City State Zip Code Detroit MI 48207-4288	Purpose of Disbursement Loan Repayment	
Candidate Name Maurice Morton	Category/Type 009	
Office Sought: <input checked="" 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: MI District: 14		

Full Name (Last, First, Middle Initial) c. Maurice Morton		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 2985 E Jefferson Ave		Amount of Each Disbursement this Period 1500.00 Transaction ID : VNH2D9T8868
City State Zip Code Detroit MI 48207-4288	Purpose of Disbursement Repayment of Loan	
Candidate Name Maurice Morton	Category/Type 009	
Office Sought: <input checked="" 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: MI District: 14		

SUBTOTAL of Disbursements This Page (optional).....	21500.00
TOTAL This Period (last page this line number only).....	21500.00

**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 17 OF 24			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Morton for Congress

Full Name (Last, First, Middle Initial) A. Barbara J Evans		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2014
Mailing Address 1900 Chene Ct Apt 203		Amount of Each Disbursement this Period 700.00 Transaction ID : VNH2D9SH512
City Detroit	State MI Zip Code 48207-4933	
Purpose of Disbursement Return of Contribution	Category/Type 010	
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. Sandra L Jackson		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2014
Mailing Address 4354 E Outer Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : VNH2D9SH520
City Detroit	State MI Zip Code 48234-3182	
Purpose of Disbursement Refund of Contribution	Category/Type 010	
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. Levi Stubbs III		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 19457 Gloucester Dr		Amount of Each Disbursement this Period 300.00 Transaction ID : VNH2D9T8819
City Detroit	State MI Zip Code 48203-1482	
Purpose of Disbursement Refund of Contribution	Category/Type 010	
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 18 OF 24			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Morton for Congress

Full Name (Last, First, Middle Initial) A. Linda Ward		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014
Mailing Address 23307 N Chanticleer Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : VNH2D9S5QY4
City Southfield State MI Zip Code 48034-6938	Purpose of Disbursement Refund of Contribution Candidate Name Category/Type 010	
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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	2000.00

**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 19 OF 24			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Morton for Congress

Full Name (Last, First, Middle Initial) A. Maurice Morton		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address 2985 E Jefferson Ave		Amount of Each Disbursement this Period \$ 1000.00 Transaction ID : VNH2D9T8A64
City Detroit State MI Zip Code 48207-4288	Purpose of Disbursement Repayment of debt Category/Type 007	
Candidate Name Maurice Morton	Office Sought: <input checked="" 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: MI District: 14		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	\$ 1000.00
TOTAL This Period (last page this line number only).....	\$ 1000.00

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)
Morton for Congress

Transaction ID : **VNJ1NCMTT27L**

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Maurice Morton

Primary

General

Other (specify) ▼

Mailing Address

2985 E Jefferson Ave

City

State

ZIP Code

Detroit

MI

48207-4288

Original Amount of Loan

1500.00

Cumulative Payment To Date

1500.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M 01 / D 21 / Y 2014 Y

Date Due

M M / D D / Y none Y Y

Interest Rate

none % (apr)

Secured:

Yes 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)..... ▶

0.00

TOTALS This Period (last page in this line only)..... ▶

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

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)
Morton for Congress

Transaction ID : **VNJ1NCMK207L**

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Maurice Morton

Primary

General

Other (specify) ▼

Mailing Address

2985 E Jefferson Ave

City

State

ZIP Code

Detroit

MI

48207-4288

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

20000.00

20000.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 03 /

D 31 /

Y 2014 Y

M M /

D D /

Y none Y Y

none % (apr)

Yes

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)..... ▶

0.00

TOTALS This Period (last page in this line only)..... ▶

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

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)
Morton for Congress

Transaction ID : **VNJ1NCXVJG8L**

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Maurice Morton

Primary
 General
 Other (specify) ▼

Mailing Address
2985 E Jefferson Ave

City State ZIP Code
Detroit MI 48207-4288

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
117.00 0.00 117.00

TERMS

Date Incurred Date Due Interest Rate Secured:
06 / 03 / 2014 none % (apr) Yes 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)..... 117.00
TOTALS This Period (last page in this line only)..... 117.00

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

NAME OF COMMITTEE (In Full)
Morton for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Maurice Morton	Nature of Debt (Purpose): Advances for flyers, t-shirts, campaign design, postage, supplies, food and beverages
Mailing Address 2985 E Jefferson Ave	
City State Zip Code Detroit MI 48207-4288	

Outstanding Balance Beginning This Period 5253.00	Transaction ID : VNF3X9H9CA9	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 4253.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP Van, Inc.	Nature of Debt (Purpose): Use of Campaign Database
Mailing Address 1101 15th St NW Ste 500	
City State Zip Code Washington DC 20005-5006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VNF3X9H9SB5	
Amount Incurred This Period 700.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 700.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

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)	4953.00
2) TOTALS This Period (last page this line number only)	4953.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	117.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	5070.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF3X9H9SB5

Campaign Database

Form/Schedule:

Transaction ID: