

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Marquette County Democratic Party

ADDRESS (number and street)

P.O. Box 189

Check if different than previously reported. (ACC)

Marquette

MI

49855

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00385393

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11)
(Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12)
(Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

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

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on [MM] / [DD] / [YYYY] in the State of []

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

- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period

[MM] / [DD] / [YYYY] 01 / 01 / 2019 through [MM] / [DD] / [YYYY] 06 / 30 / 2019

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

Niemi, Robert, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Niemi, Robert, , ,

[Electronically Filed]

Date

[MM] / [DD] / [YYYY] 07 / 29 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Marquette County Democratic Party

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		<input type="text" value="10285.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10285.50"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="8866.00"/>	<input type="text" value="8866.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="19151.50"/>	<input type="text" value="19151.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1303.33"/>	<input type="text" value="1303.33"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="17848.17"/>	<input type="text" value="17848.17"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Marquette County Democratic Party

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1534.00	1534.00
(ii) Unitemized	7332.00	7332.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8866.00	8866.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	8866.00	8866.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	8866.00	8866.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8866.00	8866.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1303.33	1303.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1303.33	1303.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1303.33	1303.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1303.33	1303.33

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8866.00	8866.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8866.00	8866.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1303.33	1303.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1303.33	1303.33

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

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

FOR LINE NUMBER: PAGE 6 OF 11
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Marquette County Democratic Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Cappuccio, Carol, , ,
 Mailing Address 55 Oak Hill Drive
 City Marquette State MI Zip Code 49855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 28 / 2019
Transaction ID : SA11AI.9002
 Amount of Each Receipt this Period 120.00
 Memo Item
 Sizzle tkts

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Chapman, Jason, , ,
 Mailing Address 1660 Glenwood Ln
 City Ishpeming State MI Zip Code 49849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mi Democratic Party Occupation (for Individual) Field Rep-Coordinated campaign
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 05 / 03 / 2019
Transaction ID : SA11AI.8905
 Amount of Each Receipt this Period 200.00
 Memo Item
 Sizzle tkts

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Chapman, Jason, , ,
 Mailing Address 1660 Glenwood Ln
 City Ishpeming State MI Zip Code 49849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mi Democratic Party Occupation (for Individual) Field Rep-Coordinated campaign
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 04 / 2019
Transaction ID : SA11AI.8934
 Amount of Each Receipt this Period 10.00
 Memo Item
 Recurring Monthly donation

SUBTOTAL of Receipts This Page (optional).....▶ 330.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Marquette County Democratic Party

A. Chapman, Ray, Jason, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1660 Glenwood Lane
 City Ishpeming State MI Zip Code 49849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Champman Transportation Occupation (for Individual) Owner - Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 03 / 2019**
Transaction ID : SA11AI.8906
 Amount of Each Receipt this Period 200.00
 Memo Item
 Sizzle tkts

B. Hietamaki, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address DECEASED
 City Gwinn State MI Zip Code 49841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MGH-DLP Occupation (for Individual) Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **04 / 19 / 2019**
Transaction ID : SA11AI.8869
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Mazzuchi, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 Orianna Dr
 City Marquette State MI Zip Code 49855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Marquette County Occupation (for Individual) lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 30 / 2019**
Transaction ID : SA11AI.8927
 Amount of Each Receipt this Period 250.00
 Memo Item
 2019 CC Renewal & 2019 Solicitation

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Marquette County Democratic Party

A. Mazzuchi, Jennifer, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 Orianna Dr

City Marquette	State MI	Zip Code 49855
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Marquette County	Occupation (for Individual) lawyer
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2019

Transaction ID : SA11AI.9030

Amount of Each Receipt this Period
40.00

Memo Item
Sizzle tkts

B. Niemi, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1702 Gray Street

City Marquette	State MI	Zip Code 49855
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) retired	Occupation (for Individual) retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2019

Transaction ID : SA11AI.8858

Amount of Each Receipt this Period
214.00

Memo Item
In Kind -Annual PO Box rental #189

C. Niemi, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1702 Gray Street

City Marquette	State MI	Zip Code 49855
-------------------	-------------	-------------------

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

Name of Employer (for Individual) retired	Occupation (for Individual) retired
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
469.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2019

Transaction ID : SA11AI.8868

Amount of Each Receipt this Period
200.00

Memo Item
Sizzle tkts

SUBTOTAL of Receipts This Page (optional).....▶	454.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 11
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Marquette County Democratic Party

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Niemi, Robert, , ,

Mailing Address 1702 Gray Street

City Marquette	State MI	Zip Code 49855
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) retired	Occupation (for Individual) retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
569.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2019

Transaction ID : SA11AI.9003

Amount of Each Receipt this Period
100.00

Memo Item
Sizzle tkts

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	1534.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Marquette County Democratic Party

Full Name (Last, First, Middle Initial)

A. ATT Wireless

Mailing Address 444 Michigan Avenue

City Detroit State MI Zip Code 48226

Purpose of Disbursement
Monthly phone bill

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.8847
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. City of Ishpeming

Mailing Address 100 E. Division Street

City Ishpeming State MI Zip Code 49849

Purpose of Disbursement
Al Quaal Rent & Deposit

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.8842
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Giroux, Anne, , ,

Mailing Address 1625 North Westwood Circle

City Ishpeming State MI Zip Code 49849

Purpose of Disbursement
Reimburse for Sizzle food and supplies

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.8848
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Marquette County Democratic Party

Full Name (Last, First, Middle Initial)

A. Niemi, Robert, , ,

Mailing Address 1702 Gray Street

City
Marquette

State
MI

Zip Code
49855

Purpose of Disbursement
In Kind -Annual PO Box rental #189

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.8870

Amount of Each Disbursement this Period

214.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

214.00

847.08