

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Committee to Elect Paul Clements

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))....	13360.00	13360.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	13360.00	13360.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	613.98	613.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	613.98	613.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	12746.02	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

Committee to Elect Paul Clements

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).....	10750.00	10750.00
(ii) Unitemized.....	1110.00	1110.00
(iii) TOTAL of contributions from individuals ▶	11860.00	11860.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	1500.00	1500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	13360.00	13360.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
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)..... ▶	13360.00	13360.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	613.98	613.98
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	613.98	613.98

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13360.00
25. SUBTOTAL (add Line 23 and Line 24).....	13360.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	613.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	12746.02

**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 11
	<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)
Committee to Elect Paul Clements

A. Full Name (Last, First, Middle Initial)
Mollie Clements

Mailing Address 2229 LaCross St.

City Kalamzoo State MI Zip Code 49006

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2013

Transaction ID : SA11AI.4107

Amount of Each Receipt this Period
 1000.00

Campaign Contribution

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

Mailing Address 3 Brookside Lane

City Ossining State NY Zip Code 10562

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

Name of Employer Property Resources Corp. Occupation Construction 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
 02 / 05 / 2013

Transaction ID : SA11AI.4115

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 4039 Sunvalley Dr.

City Kalamazoo State MI Zip Code 49008

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2013

Transaction ID : SA11AI.4128

Amount of Each Receipt this Period
 250.00

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

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

2250.00

**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 11
	<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)
Committee to Elect Paul Clements

A. Full Name (Last, First, Middle Initial)
Charles K. Cummings

Mailing Address 1625 W. South St.

City Kalamazoo State MI Zip Code 49006

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 6495 Pepperidge Cir.

City Portage State MI Zip Code 49024

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

Name of Employer Southwest Michigan Imaging Occupation Chief Executive Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2013

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 8 Castle Drive

City Acton State MA Zip Code 01720

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2013

Transaction ID : SA11AI.4130

Amount of Each Receipt this Period
 2500.00

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: (check only one)	PAGE 7 OF 11
	<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)
Committee to Elect Paul Clements

A. Full Name (Last, First, Middle Initial)
Crispin Kontz

Mailing Address 9702 93 St.

City State Zip Code
Edmonton, AL Canada ZZ 00000

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

Name of Employer Occupation
Alberta Health Services Public Health Nurse (US citizen)

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period
500.00
 campaign contribution by US citizen living in Canada

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

Mailing Address 84 Echo Hills Drive

City State Zip Code
Kalamazoo MI 49009

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

Name of Employer Occupation
Western Michigan University Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2013

Transaction ID : SA11AI.4111

Amount of Each Receipt this Period
500.00

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 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).....

1000.00

10750.00

**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 11
	<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)
Committee to Elect Paul Clements

A. Full Name (Last, First, Middle Initial)
Paul Colin Clements

Mailing Address 2517 Broadway Ave.

City Kalamazoo State MI Zip Code 49008

FEC ID number of contributing federal political committee. **C H4MI06105**

Name of Employer Western Michigan University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2013

Transaction ID : SA11D.4154

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Paul Colin Clements

Mailing Address 2517 Broadway Ave.

City Kalamazoo State MI Zip Code 49008

FEC ID number of contributing federal political committee. **C H4MI06105**

Name of Employer Western Michigan University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2013

Transaction ID : SA11D.4155

Amount of Each Receipt this Period
 500.00

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

Mailing Address 2517 Broadway Ave.

City Kalamazoo State MI Zip Code 49008

FEC ID number of contributing federal political committee. **C H4MI06105**

Name of Employer Western Michigan University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2013

Transaction ID : SA11D.4156

Amount of Each Receipt this Period
 500.00

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

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

1500.00

1500.00

**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 11
	<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)
Committee to Elect Paul Clements

Full Name (Last, First, Middle Initial) A. Paul Colin Clements		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2013
Mailing Address 2517 Broadway Ave.		Amount of Each Disbursement this Period 291.87 Transaction ID : SB17.4157
City Kalamazoo State MI Zip Code 49008	Purpose of Disbursement Printer, paper, files, toner 001 Category/Type	
Candidate Name Committee to Elect Paul Clements	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: 06		

Full Name (Last, First, Middle Initial) B. Paul Colin Clements		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2013
Mailing Address 2517 Broadway Ave.		Amount of Each Disbursement this Period 31.69 Transaction ID : SB17.4158
City Kalamazoo State MI Zip Code 49008	Purpose of Disbursement breakfast 001 Category/Type	
Candidate Name Committee to Elect Paul Clements	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: 06		

Full Name (Last, First, Middle Initial) c. Paul Colin Clements		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2013
Mailing Address 2517 Broadway Ave.		Amount of Each Disbursement this Period 42.99 Transaction ID : SB17.4159
City Kalamazoo State MI Zip Code 49008	Purpose of Disbursement breakfast 001 Category/Type	
Candidate Name Committee to Elect Paul Clements	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: 06		

SUBTOTAL of Disbursements This Page (optional).....	366.55
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 10 OF 11
	<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)
Committee to Elect Paul Clements

Full Name (Last, First, Middle Initial) A. Paul Colin Clements		Date of Disbursement MM / DD / YYYY 02 / 09 / 2013
Mailing Address 2517 Broadway Ave.		Amount of Each Disbursement this Period 86.50 Transaction ID : SB17.4160
City Kalamazoo	State MI	
Zip Code 49008	Purpose of Disbursement lunch	Category/ Type 001
Candidate Name Committee to Elect Paul Clements	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: 06	

Full Name (Last, First, Middle Initial) B. Paul Colin Clements		Date of Disbursement MM / DD / YYYY 02 / 25 / 2013
Mailing Address 2517 Broadway Ave.		Amount of Each Disbursement this Period 74.61 Transaction ID : SB17.4161
City Kalamazoo	State MI	
Zip Code 49008	Purpose of Disbursement campaign committee dinner	Category/ Type 001
Candidate Name Committee to Elect Paul Clements	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: 06	

Full Name (Last, First, Middle Initial) c. Paul Colin Clements		Date of Disbursement MM / DD / YYYY 03 / 04 / 2013
Mailing Address 2517 Broadway Ave.		Amount of Each Disbursement this Period 18.40 Transaction ID : SB17.4162
City Kalamazoo	State MI	
Zip Code 49008	Purpose of Disbursement Stamps	Category/ Type 003
Candidate Name Committee to Elect Paul Clements	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: 06	

SUBTOTAL of Disbursements This Page (optional).....	179.51
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 11			
	<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)
Committee to Elect Paul Clements

Full Name (Last, First, Middle Initial) A. Paul Colin Clements		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2013
Mailing Address 2517 Broadway Ave.		Amount of Each Disbursement this Period 39.90
City Kalamazoo State MI Zip Code 49008	Purpose of Disbursement lunch Category/Type 003	
Candidate Name Committee to Elect Paul Clements	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)	Transaction ID : SB17.4163
State: MI District: 06		

Full Name (Last, First, Middle Initial) B.		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 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 M M / D D / Y Y Y Y
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).....	39.90
TOTAL This Period (last page this line number only).....	585.96