

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
Wolverine PAC

ADDRESS (number and street) PO Box 972480
Ypsilanti MI 48197

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00451583

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 checked="" 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 M M M / D D D / Y Y Y Y Y Y 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 M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 03 / 01 / 2023 through M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2023

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

Type or Print Name of Treasurer _____

Signature of Treasurer Weissler DeFoe, Jody, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2023

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Wolverine PAC

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="2023"/> | <input type="text" value="11236.29"/> | <input type="text" value="11236.29"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="18736.29"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="1000.00"/> | <input type="text" value="8500.00"/> |
| (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="19736.29"/> | <input type="text" value="19736.29"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="15000.00"/> | <input type="text" value="15000.00"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="4736.29"/> | <input type="text" value="4736.29"/> |
| 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

Wolverine PAC

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)..... | 0.00 | 5000.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 0.00 | 5000.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 2500.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 0.00 | 7500.00 |
| 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.)..... | 1000.00 | 1000.00 |
| 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)).....▶ | 1000.00 | 8500.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 1000.00 | 8500.00 |

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 | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 5000.00 | 5000.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 10000.00 | 10000.00 |
| 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)) .. | 15000.00 | 15000.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 15000.00 | 15000.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) | 0.00 | 7500.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 0.00 | 7500.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

**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 6 OF 11 |
| <input 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 checked="" type="checkbox"/> 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)
Wolverine PAC

A. SUSIE LEE FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5130 S Fort Apache Rd
Ste 215 Pmb 382

City Las Vegas State NV Zip Code 89148-1732

FEC ID number of contributing federal political committee. **C** C00655613

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

Receipt For: 2023
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 01 / 2023

Transaction ID : 8477963

Amount of Each Receipt this Period
1000.00

Memo Item

Uncashed/State Dated Check from 6/9/22

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 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 Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1000.00 |
| TOTAL This Period (last page this line number only).....▶ | 1000.00 |

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 type="checkbox"/> 21b | <input checked="" 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)
Wolverine PAC

A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 430 S Capitol St SE
FI 2

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2023 |

City Washington State DC Zip Code 20003-4024

FEC Identification Number

Purpose of Disbursement
Contribution

C

Candidate Name

Transaction ID : 500984622

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2023
 Primary General
 Other (specify) ▼

5000.00

State: District:

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Amount of Each Disbursement this Period

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

State: District:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Amount of Each Disbursement this Period

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

State: District:

Memo Item

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

5000.00

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

5000.00

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 type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" 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)
Wolverine PAC

A. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 14 | | 2023 |

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement Contribution

| | |
|---|-----------|
| C | C00575209 |
|---|-----------|

Candidate Name

Transaction ID : 500870736

CRAIG, ANGELA DAWN, , ,

Category/Type

Amount of Each Disbursement this Period

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

| |
|---------|
| 1000.00 |
|---------|

State: MN District: 02

Memo Item

B. CARTWRIGHT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 414

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 26 | | 2023 |

City Scranton State PA Zip Code 18501-0414

FEC Identification Number

Purpose of Disbursement Contribution

| | |
|---|-----------|
| C | C00509968 |
|---|-----------|

Candidate Name

Transaction ID : 500993463

CARTWRIGHT, MATTHEW A., , ,

Category/Type

Amount of Each Disbursement this Period

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

| |
|---------|
| 1000.00 |
|---------|

State: PA District: 08

Memo Item

C. CHRIS DELUZIO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 16210

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 26 | | 2023 |

City Pittsburgh State PA Zip Code 15242-0210

FEC Identification Number

Purpose of Disbursement Contribution

| | |
|---|-----------|
| C | C00787648 |
|---|-----------|

Candidate Name

Transaction ID : 500993465

DELUZIO, CHRISTOPHER, , ,

Category/Type

Amount of Each Disbursement this Period

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

| |
|---------|
| 1000.00 |
|---------|

State: PA District: 17

Memo Item

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

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

| |
|---------|
| 3000.00 |
|---------|

| |
|--|
| |
|--|

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 type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" 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)
Wolverine PAC

A. CHRIS PAPPAS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 313

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 26 | | 2023 |

City Manchester State NH Zip Code 03105-0313

FEC Identification Number

Purpose of Disbursement Contribution

| | |
|---|-----------|
| C | C00660464 |
|---|-----------|

Candidate Name
PAPPAS, CHRIS, , ,

Category/
Type

Transaction ID : **500993467**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: NH District: 01

| |
|---------|
| 1000.00 |
|---------|

Memo Item

B. ERIC SORENSEN FOR ILLINOIS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 1172

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 26 | | 2023 |

City Moline State IL Zip Code 61266-1172

FEC Identification Number

Purpose of Disbursement Contribution

| | |
|---|-----------|
| C | C00793935 |
|---|-----------|

Candidate Name
SORENSEN, ERIC, , ,

Category/
Type

Transaction ID : **500993468**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: IL District: 17

| |
|---------|
| 1000.00 |
|---------|

Memo Item

C. LANDSMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 413

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 14 | | 2023 |

City Cincinnati State OH Zip Code 45201-0413

FEC Identification Number

Purpose of Disbursement Contribution

| | |
|---|-----------|
| C | C00800276 |
|---|-----------|

Candidate Name
LANDSMAN, GREG, , ,

Category/
Type

Transaction ID : **500870737**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: OH District: 01

| |
|---------|
| 1000.00 |
|---------|

Memo Item

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

| |
|---------|
| 3000.00 |
|---------|

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 type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" 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)
Wolverine PAC

Full Name (Last, First, Middle Initial)
A. NIKKI FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | / | 26 | / | 2023 |

Mailing Address PO Box 5171

FEC Identification Number

| | |
|----------|-----------|
| C | C00787812 |
|----------|-----------|

Transaction ID : 500993469

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Memo Item

City Springfield State IL Zip Code 62705-5171

Purpose of Disbursement
Contribution

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name
BUDZINSKI, NIKKI, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: IL District: 13

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

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | / | 26 | / | 2023 |

Mailing Address 13851 W 63rd St
Num 303

FEC Identification Number

| | |
|----------|-----------|
| C | C00670034 |
|----------|-----------|

Transaction ID : 500993466

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Memo Item

City Shawnee State KS Zip Code 66216-3800

Purpose of Disbursement
Contribution

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name
DAVIDS, SHARICE, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: KS District: 03

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

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | / | 26 | / | 2023 |

Mailing Address PO Box 3121

FEC Identification Number

| | |
|----------|-----------|
| C | C00649913 |
|----------|-----------|

Transaction ID : 500993464

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Memo Item

City Glen Allen State VA Zip Code 23058-3121

Purpose of Disbursement
Contribution

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name
SPANBERGER, ABIGAIL, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: VA District: 07

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

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

| |
|---------|
| 3000.00 |
|---------|

| |
|--|
| |
|--|

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 type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" 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)
Wolverine PAC

A. SUSIE LEE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5130 S Fort Apache Rd
Ste 215 Pmb 382

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 26 | | 2023 |

City Las Vegas State NV Zip Code 89148-1732

FEC Identification Number

Purpose of Disbursement
Contribution

| | |
|---|-----------|
| C | C00655613 |
|---|-----------|

Candidate Name
LEE, SUSIE, , ,

Category/
Type

Transaction ID : 500993470

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2024 Primary General Other (specify) ▼
 State: NV District: 03

| |
|---------|
| 1000.00 |
|---------|

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

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|---|--|
| C | |
|---|--|

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

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Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
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City State Zip Code

FEC Identification Number

Purpose of Disbursement

| | |
|---|--|
| C | |
|---|--|

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

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| |
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Memo Item

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

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

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|---------|
| 1000.00 |
|---------|

| |
|----------|
| 10000.00 |
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