

FEC  
FORM 3XREPORT 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

Newaygo County Democratic Executive Committee

ADDRESS (number and street) ▼

P.O. Box 146

 Check if different than previously reported. (ACC)

Newaygo

MI

49337

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00452854

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)<br>(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)<br>(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

 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  
07 / 01 / 2011

through

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2011

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 Charles Benham

Signature of Treasurer

Charles Benham

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 / 11 / 2012

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  
OnlyFEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Newaygo County Democratic Executive Committee**

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="2011"/>		16702.63
(b) Cash on Hand at Beginning of Reporting Period.....	22211.98	
(c) Total Receipts (from Line 19) .....	152.74	27973.31
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	22364.72	44675.94
7. Total Disbursements (from Line 31).....	5243.12	27554.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	17121.60	17121.60
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

Newaygo County Democratic Executive Committee

Report Covering the Period: From: 07 / 01 / 2011 To: 12 / 31 / 2011

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	0.00
(ii) Unitemized .....	152.74	27973.31
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	152.74	27973.31
(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) .....	152.74	27973.31
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))..... ▶	152.74	27973.31
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	152.74	27973.31

**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 .....	5243.12	27554.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5243.12	27554.34
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 (2 U.S.C. §441a(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 .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	5243.12	27554.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5243.12	27554.34

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	152.74	27973.31
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	152.74	27973.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5243.12	27554.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5243.12	27554.34

**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"/> 24	<input type="checkbox"/> 25	<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

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)  
**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

**A. A-1 Bingo and supply**

Mailing Address 827 Bridge N. W.

City Grand Rapis State MI Zip Code 49504

Purpose of Disbursement deposit

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2011

**Transaction ID : SB21B.5131**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**B. Att**

Mailing Address Processing Center

City Saginaw State MI Zip Code 48605

Purpose of Disbursement phones

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2011

**Transaction ID : SB21B.5110**

Amount of Each Disbursement this Period

102.95

Full Name (Last, First, Middle Initial)

**C. Att**

Mailing Address Processing Center

City Saginaw State MI Zip Code 48605

Purpose of Disbursement phones

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 25 / 2011

**Transaction ID : SB21B.5119**

Amount of Each Disbursement this Period

102.96

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

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

605.91

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

**A. Att**

Mailing Address Processing Center

City State Zip Code  
Saginaw MI 48605

Purpose of Disbursement  
phone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2011

**Transaction ID : SB21B.5124**

Amount of Each Disbursement this Period

102.96

Full Name (Last, First, Middle Initial)

**B. Att**

Mailing Address Processing Center

City State Zip Code  
Saginaw MI 48605

Purpose of Disbursement  
phones

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 26 / 2011

**Transaction ID : SB21B.5128**

Amount of Each Disbursement this Period

103.09

Full Name (Last, First, Middle Initial)

**C. Att**

Mailing Address Processing Center

City State Zip Code  
Saginaw MI 48605

Purpose of Disbursement  
phones

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 27 / 2011

**Transaction ID : SB21B.5139**

Amount of Each Disbursement this Period

103.05

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

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

309.10

**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"/> 24	<input type="checkbox"/> 25	<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)

**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

**A. Att**

Mailing Address Processing Center

City State Zip Code  
Saginaw MI 48605

Purpose of Disbursement  
phones

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		28		2011

**Transaction ID : SB21B.5132**

Amount of Each Disbursement this Period

102.66
--------

Full Name (Last, First, Middle Initial)

**B. Consumers Power**

Mailing Address Processing Center

City State Zip Code  
Lansing MI 48937

Purpose of Disbursement  
ele

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		15		2011

**Transaction ID : SB21B.5108**

Amount of Each Disbursement this Period

36.26
-------

Full Name (Last, First, Middle Initial)

**C. Consumers Power**

Mailing Address Processing Center

City State Zip Code  
Lansing MI 48937

Purpose of Disbursement  
ele

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2011

**Transaction ID : SB21B.5114**

Amount of Each Disbursement this Period

49.23
-------

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

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

188.15
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**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"/> 24	<input type="checkbox"/> 25	<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)  
**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

**A. Consumers Power**

Mailing Address Processing Center

City Lansing State MI Zip Code 48937

Purpose of Disbursement  
ele

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2011

**Transaction ID : SB21B.5122**

Amount of Each Disbursement this Period

38.22
-------

Full Name (Last, First, Middle Initial)

**B. Consumers Power**

Mailing Address Processing Center

City Lansing State MI Zip Code 48937

Purpose of Disbursement  
ele

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2011

**Transaction ID : SB21B.5126**

Amount of Each Disbursement this Period

26.31
-------

Full Name (Last, First, Middle Initial)

**C. Consumers Power**

Mailing Address Processing Center

City Lansing State MI Zip Code 48937

Purpose of Disbursement  
ele

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2011

**Transaction ID : SB21B.5129**

Amount of Each Disbursement this Period

30.75
-------

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

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

95.28
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**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"/> 24	<input type="checkbox"/> 25	<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)  
**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

**A. Consumers Power**

Mailing Address Processing Center

City Lansing State MI Zip Code 48937

Purpose of Disbursement Heat

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 14 / 2011

Transaction ID : SB21B.5137

Amount of Each Disbursement this Period

34.05

Full Name (Last, First, Middle Initial)

**B. Dallas Dean**

Mailing Address 2531 W. 140th

City Grant State MI Zip Code 49327

Purpose of Disbursement parade gas

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2011

Transaction ID : SB21B.5127

Amount of Each Disbursement this Period

143.00

Full Name (Last, First, Middle Initial)

**C. DTE Gas**

Mailing Address P.O. Box 740786

City Cincinnati State OH Zip Code 45274-0786

Purpose of Disbursement heat

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2011

Transaction ID : SB21B.5123

Amount of Each Disbursement this Period

31.50

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

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

208.55

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

**A. DTE Gas**

Mailing Address P.O. Box 740786

City Cincinnati State OH Zip Code 45274-0786

Purpose of Disbursement  
heat

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2011

**Transaction ID : SB21B.5140**

Amount of Each Disbursement this Period

41.68

Full Name (Last, First, Middle Initial)

**B. Pat Brisette**

Mailing Address 3993 skyline Dr

City Fremont State MI Zip Code 49412

Purpose of Disbursement  
rent aug,sept

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2011

**Transaction ID : SB21B.5111**

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

**C. Pat Brisette**

Mailing Address 3993 skyline Dr

City Fremont State MI Zip Code 49412

Purpose of Disbursement  
rent,oct,nov

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2011

**Transaction ID : SB21B.5125**

Amount of Each Disbursement this Period

900.00

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

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

1841.68

**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"/> 24	<input type="checkbox"/> 25	<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)

**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

**A. Pat Brissette**

Mailing Address 3993 skyline Dr

City State Zip Code  
Fremont MI 49412

Purpose of Disbursement  
rent,dec,jan

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2011

**Transaction ID : SB21B.5133**

Amount of Each Disbursement this Period

900.00
--------

Full Name (Last, First, Middle Initial)

**B. Ross Pike**

Mailing Address 2955 Elm St

City State Zip Code  
White Cloud MI 49349

Purpose of Disbursement  
parade bags

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		22		2011

**Transaction ID : SB21B.5143**

Amount of Each Disbursement this Period

12.00
-------

Full Name (Last, First, Middle Initial)

**C. Ross Pike**

Mailing Address 2955 Elm St

City State Zip Code  
White Cloud MI 49349

Purpose of Disbursement  
sprint wireless for ross

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2011

**Transaction ID : SB21B.5142**

Amount of Each Disbursement this Period

60.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

972.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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"/> 24	<input type="checkbox"/> 25	<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)  
**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

**A. Ross Pike**

Mailing Address 2955 Elm St

City State Zip Code  
White Cloud MI 49349

Purpose of Disbursement  
police report for ross

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2011

**Transaction ID : SB21B.5141**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

**B. State of Michigan**

Mailing Address 101 E. Hillsdale

City State Zip Code  
Lansing MI 48909

Purpose of Disbursement  
lic

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2011

**Transaction ID : SB21B.5130**

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**C. U.S Postage service**

Mailing Address 136 W. Wood St.

City State Zip Code  
Newaygo MI 49337

Purpose of Disbursement  
stamps 2nd cong

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2011

**Transaction ID : SB21B.5117**

Amount of Each Disbursement this Period

104.00

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

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

314.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

**A. U.S Postage service**

Mailing Address 136 W. Wood St.

City Newaygo State MI Zip Code 49337

Purpose of Disbursement  
box rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2011

**Transaction ID : SB21B.5118**

Amount of Each Disbursement this Period

42.00

Full Name (Last, First, Middle Initial)

**B. U.S Postage service**

Mailing Address 136 W. Wood St.

City Newaygo State MI Zip Code 49337

Purpose of Disbursement  
stamps

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2011

**Transaction ID : SB21B.5120**

Amount of Each Disbursement this Period

1.48

Full Name (Last, First, Middle Initial)

**C. U.S Postage service**

Mailing Address 136 W. Wood St.

City Newaygo State MI Zip Code 49337

Purpose of Disbursement  
key mail box

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2011

**Transaction ID : SB21B.5121**

Amount of Each Disbursement this Period

9.00

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

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

52.48

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

**A. U.S Postage service**

Mailing Address 136 W. Wood St.

City Newaygo State MI Zip Code 49337

Purpose of Disbursement  
stamps

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 19 / 2011

**Transaction ID : SB21B.5138**

Amount of Each Disbursement this Period

44.00

Full Name (Last, First, Middle Initial)

**B. Wal-Mart**

Mailing Address 7083 W.48th St

City Fremont State MI Zip Code 49412

Purpose of Disbursement  
parade candy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 12 / 2011

**Transaction ID : SB21B.5106**

Amount of Each Disbursement this Period

71.05

Full Name (Last, First, Middle Initial)

**C. Wal-Mart**

Mailing Address 7083 W.48th St

City Fremont State MI Zip Code 49412

Purpose of Disbursement  
office supplies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 20 / 2011

**Transaction ID : SB21B.5109**

Amount of Each Disbursement this Period

65.59

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

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

180.64

# 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"/> 24	<input type="checkbox"/> 25	<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)

**Newaygo County Democratic Executive Committee**

Full Name (Last, First, Middle Initial)

### A. Wal-Mart

Mailing Address 7083 W.48th St

City Fremont State MI Zip Code 49412

Purpose of Disbursement  
parade candy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5					2011

Transaction ID : SB21B.5115

Amount of Each Disbursement this Period

9	9	.	8	0
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Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

9	9	.	8	0
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4	8	6	7	.	5	9
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