

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
CMS Energy Corporation Employees for Better Government- Federal

ADDRESS (number and street) One Energy Plaza  
EP8-267  
 Check if different than previously reported. (ACC)  
Jackson MI 49201

2. **FEC IDENTIFICATION NUMBER** C00075473  
**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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 10 01 2005 through 10 31 2005

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 Gregory L. Ward II

Signature of Treasurer Electronically Filed by Gregory L. Ward II Date 10 08 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
CMS Energy Corporation Employees for Better Government- Federal

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		51102.72
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period .....	42958.86									
(c) Total Receipts (from Line 19) .....	7442.49	70518.63								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	50401.35	121621.35								
7. Total Disbursements (from Line 31) .....	0.00	71220.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	50401.35	50401.35								
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  
CMS Energy Corporation Employees for Better Government- Federal

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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	2818.36	14347.06
(i) Itemized (use Schedule A) .....	4624.13	56171.57
(ii) Unitemized .....	7442.49	70518.63
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	7442.49	70518.63
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 Transfer (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)) .....	7442.49	70518.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7442.49	70518.63

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(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.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	66220.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	5000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	0.00	71220.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	0.00	71220.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	7442.49	70518.63
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7442.49	70518.63
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CMS Energy Corporation Employees for Better Government- Federal**

<b>A.</b> Full Name (Last, First, Middle Initial) MR JOHN E BUCK		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 457 GEORGETOWN		<b>Transaction ID:</b> PR51750854640	
City OREGON	State OH	Amount of Each Receipt this Period 26.32	
Zip Code 43616-3009			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation SR TECH ANL II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.04	P/R Deduction (\$13.81 Semi-Monthly)	

<b>B.</b> Full Name (Last, First, Middle Initial) MS ANNE M CHILDS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 741 EDGEWOOD		<b>Transaction ID:</b> PR51756554640	
City JACKSON	State MI	Amount of Each Receipt this Period 24.92	
Zip Code 49202-3403			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CMS ENTERPRISES	Occupation SR HR CNSL II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.34	P/R Deduction (\$13.17 Semi-Monthly)	

<b>C.</b> Full Name (Last, First, Middle Initial) MR JAMES R CODDINGTON		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5490 CHANNEL VIEW DR		<b>Transaction ID:</b> PR51759034640	
City WHITEHALL	State MI	Amount of Each Receipt this Period 28.44	
Zip Code 49461			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation VP GENERATION OPERS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.40	P/R Deduction (\$16.05 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	79.68
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 26
	<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)  
CMS Energy Corporation Employees for Better Government- Federal

Full Name (Last, First, Middle Initial) <b>A. MR JOHN J DELLAS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5161 BLUE STONE		<b>Transaction ID: PR51767194640</b>	
City <b>JACKSON</b>	State <b>MI</b>	Zip Code <b>49201-8338</b>	Amount of Each Receipt this Period _____ 24.80
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation EX MGR ELEC SUPPLY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 246.56		
		P/R Deduction (\$13.09 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. MR LAURENCE R DEWITT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address CMS-991-3 P.O. BOX 311		<b>Transaction ID: PR51768484640</b>	
City <b>MENDHAM</b>	State <b>NJ</b>	Zip Code <b>07945-0311</b>	Amount of Each Receipt this Period _____ 46.54
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CMS RESOURCE DEVELOPMENT CO	Occupation EX DIR-JORF LASFAR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 462.28		
		P/R Deduction (\$25.37 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. MR DANIEL B DEXTER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 328 MONROE DRIVE		<b>Transaction ID: PR51768534640</b>	
City <b>SARASOTA</b>	State <b>FL</b>	Zip Code <b>34236-1713</b>	Amount of Each Receipt this Period _____ 44.44
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CMS ENTERPRISES	Occupation EX MANAGING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 427.06		
		P/R Deduction (\$25.37 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>115.78</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

<b>A.</b> Full Name (Last, First, Middle Initial) MR DAVID J DOWHAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51770604640	
Mailing Address 28790 COLEMAN ST		Amount of Each Receipt this Period 22.90	
City GROSSE ILE	State MI	Zip Code 48138-2012	P/R Deduction (\$12.04 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer CMS ENTERPRISES	Occupation COMMERCIAL DIRECTOR-CMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.02		

<b>B.</b> Full Name (Last, First, Middle Initial) MR JOHN F DRAKE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51770874640	
Mailing Address 200 HILLWOOD CT		Amount of Each Receipt this Period 87.50	
City JEROME	State MI	Zip Code 49249-9411	P/R Deduction (\$45.20 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer CONSUMERS ENERGY	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00		

<b>C.</b> Full Name (Last, First, Middle Initial) MR TODD R DUNCAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51771814640	
Mailing Address 7392 WESTLANE AVENUE		Amount of Each Receipt this Period 21.56	
City JENISON	State MI	Zip Code 49428-8964	P/R Deduction (\$11.69 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer CONSUMERS ENERGY	Occupation SR ACCOUNT MGR I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.74		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	131.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

<b>A.</b> Full Name (Last, First, Middle Initial) MR HOWARD J EDELSON Mailing Address 5721 LEBLANC		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51773204640
City State Zip Code ANN ARBOR MI 48103-9395	Amount of Each Receipt this Period 32.64	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$16.32 Semi-Monthly)	
Name of Employer CONSUMERS ENERGY Occupation DIR REG GOV AFFRS	Aggregate Year-to-Date 290.70	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) MR THOMAS W ELWARD Mailing Address 5531 SWAN LAKE DR.		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51774364640
City State Zip Code W BLOOMFIELD MI 48322-1765	Amount of Each Receipt this Period 80.90	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$45.15 Semi-Monthly)	
Name of Employer CMS ENTERPRISES Occupation PRES & COO-CMS ENT	Aggregate Year-to-Date 809.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) MR KELLY M FARR Mailing Address 5385 OVERHILL DR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51776304640
City State Zip Code SAGINAW MI 48603-1756	Amount of Each Receipt this Period 20.26	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.26 Semi-Monthly)	
Name of Employer CONSUMERS ENERGY Occupation SR COMMS CNSL II	Aggregate Year-to-Date 202.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	133.80
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

Full Name (Last, First, Middle Initial) <b>A. MR ROBERT A FENECH</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 343 EAGLE RIDGE CT		<b>Transaction ID: PR51776854640</b>
City ANN ARBOR State MI Zip Code 48103-9389	Amount of Each Receipt this Period _____ 47.80	
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$24.33 Semi-Monthly)
Name of Employer CONSUMERS ENERGY	Occupation EX CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 478.00	

Full Name (Last, First, Middle Initial) <b>B. MS BELINDA FOXWORTH</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 143 CADYCENTER #208		<b>Transaction ID: PR51779594640</b>
City NORTHVILLE State MI Zip Code 48167	Amount of Each Receipt this Period _____ 102.32	
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$-51.16 Semi-Monthly)
Name of Employer CMS ENTERPRISES	Occupation SR VP & GEN COUN-CMS ENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 562.76	

Full Name (Last, First, Middle Initial) <b>C. MR J GARDNER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 8388 PARKRIDGE DR		<b>Transaction ID: PR51781944640</b>
City DEXTER State MI Zip Code 48130-9397	Amount of Each Receipt this Period _____ 36.44	
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$19.34 Semi-Monthly)
Name of Employer CONSUMERS ENERGY	Occupation DIR FINANCIAL REPORTING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.20	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>186.56</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

Full Name (Last, First, Middle Initial) <b>A. MR WILLIAM E GARRITY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1205 MILLER AVE		<b>Transaction ID: PR51782174640</b>	
City ANN ARBOR	State MI	Zip Code 48103-3754	Amount of Each Receipt this Period _____ 37.96
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation SR VP ELEC & GAS SUPPLY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 365.00		
		P/R Deduction (\$21.54 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. MR RUFUS D GLADNEY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3822 RIVER COVE		<b>Transaction ID: PR51784234640</b>	
City LANSING	State MI	Zip Code 48917-8527	Amount of Each Receipt this Period _____ 23.66
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation EX MGR ENERGY SVCS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 234.44		
		P/R Deduction (\$12.70 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. MR GEORGE C HASS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7110 SALEM ROAD		<b>Transaction ID: PR51791754640</b>	
City PLYMOUTH	State MI	Zip Code 48170-5084	Amount of Each Receipt this Period _____ 40.10
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation EX DIR NEW GENERATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 398.00		
		P/R Deduction (\$21.14 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>101.72</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 26
	<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)  
CMS Energy Corporation Employees for Better Government- Federal

Full Name (Last, First, Middle Initial) <b>A. MS CAROL ISLES</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 10575 DARREL DRIVE		<b>Transaction ID: PR51800034640</b>	
City State Zip Code HANOVER MI 49241-8701	Amount of Each Receipt this Period _____ 22.32		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer CMS ENTERPRISES	Occupation VP & CONTROLLER - CMS ENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 223.20		
		P/R Deduction (\$23.91 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. MR FRANK JOHNSON</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4193 LAKE FOREST DRIVE WEST		<b>Transaction ID: PR51803204640</b>	
City State Zip Code ANN ARBOR MI 48108-8923	Amount of Each Receipt this Period _____ 79.62		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer CONSUMERS ENERGY	Occupation SR VP ENERGY OPERS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 796.20		
		P/R Deduction (\$41.27 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. MR DAVID W JOOS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2044 BIRCH BLUFF DRIVE		<b>Transaction ID: PR51804874640</b>	
City State Zip Code OKEMOS MI 48864-5964	Amount of Each Receipt this Period _____ 132.74		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer CONSUMERS ENERGY	Occupation PRES & CHF EXEC OFFC-CMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1327.40		
		P/R Deduction (\$72.94 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>234.68</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

Full Name (Last, First, Middle Initial) <b>A. MR MICHAEL R KEGERREIS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7648 APACHE TRAIL		<b>Transaction ID: PR51806684640</b>	
City State Zip Code TEMPERANCE MI 48182-1523	Amount of Each Receipt this Period _____ 22.52		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation FUEL SUPV B		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 224.00		
		P/R Deduction (\$11.83 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. MS SUE E KOSECK</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 679 GLAZIER ROAD		<b>Transaction ID: PR51811024640</b>	
City State Zip Code CHELSEA MI 48118-9780	Amount of Each Receipt this Period _____ 28.28		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CMS ENTERPRISES	Occupation BUS UNIT PART-ENTERPRISES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 281.00		
		P/R Deduction (\$14.89 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. MR JAMES G KRAUSS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4747 HORTON RD		<b>Transaction ID: PR51811794640</b>	
City State Zip Code JACKSON MI 49201-9727	Amount of Each Receipt this Period _____ 27.50		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation DIR IT INFRA SVCS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 226.56		
		P/R Deduction (\$14.93 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>78.30</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 26
	<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)  
CMS Energy Corporation Employees for Better Government- Federal

Full Name (Last, First, Middle Initial) <b>A. MR DAVID A LAPINSKI</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7498 HUNTER'S RIDGE		<b>Transaction ID: PR51814374640</b>	
City State Zip Code <b>JACKSON MI 49201-8562</b>	Amount of Each Receipt this Period _____ <b>34.96</b>		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation EX DIR EL SRCING/TRANSACTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>346.84</b>		
		P/R Deduction (\$18.37 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. MR THOMAS R LAWITZKE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3822 KIRKWOOD		<b>Transaction ID: PR51815194640</b>	
City State Zip Code <b>JACKSON MI 49203-1162</b>	Amount of Each Receipt this Period _____ <b>24.08</b>		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation I/T TECH SR TM LD/SR PR M		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>239.24</b>		
		P/R Deduction (\$12.76 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. MS LINDA L LONGO</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1907 FRIEZE AVE		<b>Transaction ID: PR51818284640</b>	
City State Zip Code <b>ANN ARBOR MI 48104-4762</b>	Amount of Each Receipt this Period _____ <b>23.82</b>		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation SR BUS SPRT CNSL II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>236.04</b>		
		P/R Deduction (\$12.61 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>82.86</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

Full Name (Last, First, Middle Initial) <b>A. MR RICHARD MATTESON JR</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 800 CRESCENT RD		<b>Transaction ID: PR51823534640</b>	
City <b>JACKSON</b>	State <b>MI</b>	Zip Code <b>49203-3865</b>	Amount of Each Receipt this Period _____ 20.58
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer CONSUMERS ENERGY	Occupation DIR CORP COMM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 204.60		
		P/R Deduction (\$10.45 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. MS SHARON A MCILNAY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 26151 HERSHEYVALE DR		<b>Transaction ID: PR51826174640</b>	
City <b>FRANKLIN</b>	State <b>MI</b>	Zip Code <b>48025-1265</b>	Amount of Each Receipt this Period _____ 42.84
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer CMS ENTERPRISES	Occupation VP & GEN CNSL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 428.40		
		P/R Deduction (\$29.17 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. MR TIMOTHY L MEHL</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3110-1252 PO BOX 311		<b>Transaction ID: PR51827294640</b>	
City <b>MENDHAM</b>	State <b>NJ</b>	Zip Code <b>07945-0311</b>	Amount of Each Receipt this Period _____ 35.56
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer CMS RESOURCE DEVELOPMENT CO	Occupation SITE MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 352.18		
		P/R Deduction (\$19.33 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>98.98</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

Full Name (Last, First, Middle Initial) <b>A. MR DAVID G MENGENBIER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1911 AUSTIN AVENUE		<b>Transaction ID: PR51827654640</b>	
City ANN ARBOR	State MI	Zip Code 48104-3621	Amount of Each Receipt this Period _____ 40.10
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation SR VP GV&PUB AF/C CMP OFR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 641.60		
		P/R Deduction (\$43.02 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. MR THOMAS L MILLER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 38 HARBOR HILL		<b>Transaction ID: PR51830164640</b>	
City GROSSE POINTE FARM	State MI	Zip Code 48236-3748	Amount of Each Receipt this Period _____ 60.08
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CMS ENTERPRISES	Occupation VP INTL & MIDSTREAM ASSET		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.80		
		P/R Deduction (\$32.08 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. MS LAURA L MOUNTCASTLE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2225 LONDONDERRY		<b>Transaction ID: PR51832904640</b>	
City ANN ARBOR	State MI	Zip Code 48104-2805	Amount of Each Receipt this Period _____ 77.28
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation VP INVEST RELAT & TREAS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 772.80		
		P/R Deduction (\$42.29 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>177.46</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

<b>A.</b> Full Name (Last, First, Middle Initial) MR FRANK M MURRAY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 29760 HILLBROOK STREET		<b>Transaction ID:</b> PR51833664640	
City LIVONIA	State MI	Zip Code 48152-4519	Amount of Each Receipt this Period 22.96
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CMS ENTERPRISES	Occupation COMMERCIAL MANAGER II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.26		
		P/R Deduction (\$11.94 Semi-Monthly)	

<b>B.</b> Full Name (Last, First, Middle Initial) MR DANIEL E NALLY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4846 146TH AVE		<b>Transaction ID:</b> PR51834174640	
City HOLLAND	State MI	Zip Code 49423-9798	Amount of Each Receipt this Period 22.88
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CMS ENTERPRISES	Occupation EX MGR N AMER OPS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.72		
		P/R Deduction (\$11.44 Semi-Monthly)	

<b>C.</b> Full Name (Last, First, Middle Initial) MS JILL M POLICH		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 921 PRATT RIDGE COURT		<b>Transaction ID:</b> PR51844524640	
City ANN ARBOR	State MI	Zip Code 48103-1402	Amount of Each Receipt this Period 41.78
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation MGR DSTR ENG&REG/OPERS SV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 413.60		
		P/R Deduction (\$22.27 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>87.62</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

<b>A.</b> Full Name (Last, First, Middle Initial) MR PHILLIP G POLYAK Mailing Address 355 WILLIS ROAD City SALINE State MI Zip Code 48176-1598 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR51844644640 Amount of Each Receipt this Period 42.92
Name of Employer DEARBORN GENERATION OPER LLC Occupation GEN MGR - DBN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.36		P/R Deduction (\$22.63 Semi-Monthly)

<b>B.</b> Full Name (Last, First, Middle Initial) MR DAVID F RONK JR Mailing Address 420 NORTHLAWN City EAST LANSING State MI Zip Code 48823-3119 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR51853474640 Amount of Each Receipt this Period 20.68
Name of Employer CONSUMERS ENERGY Occupation DIR TRANS & RES PLNG Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 204.70		P/R Deduction (\$11.37 Semi-Monthly)

<b>C.</b> Full Name (Last, First, Middle Initial) MR JOHN G RUSSELL Mailing Address 6254 PINE HOLLOW DR City EAST LANSING State MI Zip Code 48823-9728 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR51855054640 Amount of Each Receipt this Period 35.06
Name of Employer CONSUMERS ENERGY Occupation PRES & COO-CONSUMERS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 333.07		P/R Deduction (\$20.91 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>98.66</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

<b>A.</b> Full Name (Last, First, Middle Initial) MR NORMAN J SAARI		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51855344640	
Mailing Address 6160 PARK LAKE ROAD		Amount of Each Receipt this Period 49.58	
City EAST LANSING	State MI	Zip Code 48823-9786	P/R Deduction (\$24.79 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 446.22	
Name of Employer CMS Retirees	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) MR MICHAEL J SHORE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51862104640	
Mailing Address 5919 BRADFORD		Amount of Each Receipt this Period 26.98	
City JACKSON	State MI	Zip Code 49201-8352	P/R Deduction (\$14.73 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 269.80	
Name of Employer CONSUMERS ENERGY	Occupation VP & CHF RISK OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) MR S SMITH JR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51865324640	
Mailing Address 3 CAMERON PLACE		Amount of Each Receipt this Period 245.92	
City GROSSE POINTE	State MI	Zip Code 48230-1912	P/R Deduction (\$61.48 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 1352.56	
Name of Employer CMS Retirees	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	322.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

<b>A.</b> Full Name (Last, First, Middle Initial) MR MICHAEL C SNIEGOWSKI		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51865614640	
Mailing Address 10681 RED MAPLE DRIVE		Amount of Each Receipt this Period 50.04	
City PLYMOUTH	State MI	Zip Code 48170-3292	P/R Deduction (\$26.51 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer CMS ENTERPRISES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation EX MGR INDEP ENERGY SVCS Aggregate Year-to-Date ▼ 493.56	

<b>B.</b> Full Name (Last, First, Middle Initial) MR WILLIAM H STEPHENS, III		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51868824640	
Mailing Address 13 COLONEL HAZZARD RD		Amount of Each Receipt this Period 76.70	
City OKATIE	State SC	Zip Code 29909-7003	P/R Deduction (\$38.35 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer CMS Retirees	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Aggregate Year-to-Date ▼ 767.00	

<b>C.</b> Full Name (Last, First, Middle Initial) MR JAMES J SZYMUSIAK		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR51872274640	
Mailing Address 7650 PURPLE MARTIN WAY		Amount of Each Receipt this Period 22.28	
City DEXTER	State MI	Zip Code 48130-8550	P/R Deduction (\$11.73 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer CONSUMERS ENERGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation EXEC MGR BUS CUST OPRS Aggregate Year-to-Date ▼ 221.24	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	149.02
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

<b>A.</b> Full Name (Last, First, Middle Initial) MR SCOTT D THOMAS		Date of Receipt
Mailing Address 1772 CHICORY RIDGE ROAD		<input type="text"/> / <input type="text"/> / <input type="text"/>
City ANN ARBOR	State MI	Zip Code 48103
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR51874954640
Name of Employer CONSUMERS ENERGY		Amount of Each Receipt this Period 45.50
Occupation MGR EQUIP SVCS		P/R Deduction (\$25.37 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.80	

<b>B.</b> Full Name (Last, First, Middle Initial) MR JOSEPH P TOMASIK		Date of Receipt
Mailing Address 22995 WHITEHALL DRIVE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City NOVI	State MI	Zip Code 48374-3646
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR51876744640
Name of Employer CMS INTERNATIONAL VENTURES LLC		Amount of Each Receipt this Period 59.20
Occupation VP & CHIEF DEV OFFICER		P/R Deduction (\$31.23 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 592.00	

<b>C.</b> Full Name (Last, First, Middle Initial) MS MAUREEN K TRUMBLE		Date of Receipt
Mailing Address 121 FOX POINT COURT NE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City ADA	State MI	Zip Code 49301-9296
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR51878034640
Name of Employer CONSUMERS ENERGY		Amount of Each Receipt this Period 26.86
Occupation AMI PROGRAM DIR		P/R Deduction (\$14.99 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.44	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>131.56</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

<b>A.</b> Full Name (Last, First, Middle Initial) MR STEVEN D UNRUH Mailing Address 1335 WINCHCOMBE City BLOOMFIELD HILLS State MI Zip Code 48304-1270 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR51878854640 Amount of Each Receipt this Period 33.30
Name of Employer: CONSUMERS ENERGY Occupation: FIELD MANAGER I Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 331.32		P/R Deduction (\$17.36 Semi-Monthly)

<b>B.</b> Full Name (Last, First, Middle Initial) MR MICHAEL D VANHEMERT Mailing Address 18344 LARAUGH DRIVE City NORTHVILLE State MI Zip Code 48168-3504 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR51879334640 Amount of Each Receipt this Period 33.56
Name of Employer: CONSUMERS ENERGY Occupation: VP & CORP SECRETARY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 335.60		P/R Deduction (\$16.78 Semi-Monthly)

<b>C.</b> Full Name (Last, First, Middle Initial) MR THEODORE J VOGEL Mailing Address 3895 BRADFORD SQUARE DR City ANN ARBOR State MI Zip Code 48103-6317 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR51881664640 Amount of Each Receipt this Period 42.34
Name of Employer: CONSUMERS ENERGY Occupation: VP & CHF TAX CNSL-CMS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 423.40		P/R Deduction (\$22.75 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>109.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 24 / 26  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

**A.** Full Name (Last, First, Middle Initial)  
MR LEONARD J WACLAWIK

Mailing Address 4506 SID DRIVE

City State Zip Code  
JACKSON MI 49201-9061

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

Name of Employer CONSUMERS ENERGY Occupation DIR FINANCIAL FORECASTING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 552.02

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR51881964640

Amount of Each Receipt this Period  
101.48

P/R Deduction (\$27.97 Semi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
MS CYNTHIA L WESTERHOF

Mailing Address 634 DORNOCH

City State Zip Code  
ANN ARBOR MI 48103-9044

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

Name of Employer CONSUMERS ENERGY Occupation DIR PEOPLE SERVICES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.56

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR51885974640

Amount of Each Receipt this Period  
20.64

P/R Deduction (\$10.80 Semi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
MR JOHN WING

Mailing Address 6671 COMSTOCK ROAD

City State Zip Code  
GRANT TOWNSHIP MI 48032-2603

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

Name of Employer CMS GEN - FILER CITY OPER LLC Occupation GEN MGR - DBN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.64

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR51889704640

Amount of Each Receipt this Period  
20.78

P/R Deduction (\$10.96 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 142.90

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
CMS Energy Corporation Employees for Better Government- Federal

Full Name (Last, First, Middle Initial) <b>A. MR DANIEL A WRIGHT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 13240 PRIMROSE LANE		<b>Transaction ID: PR51891124640</b>	
City DEWITT	State MI	Zip Code 48820-8164	Amount of Each Receipt this Period _____ 25.78
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation EX DIR INFO SVCS & TECH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 254.86		
		P/R Deduction (\$13.75 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. MR GEORGE A PICKART</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 210 SHEA ROAD		<b>Transaction ID: PR52160864640</b>	
City LOTHIAN	State MD	Zip Code 20711-3103	Amount of Each Receipt this Period _____ 37.78
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CONSUMERS ENERGY	Occupation EX DIR FED AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 374.50		
		P/R Deduction (\$20.44 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. MR DAVID M PRICE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6100 NW HICKORY PLACE		<b>Transaction ID: PR52172804640</b>	
City PARKVILLE	State MO	Zip Code 64152-8712	Amount of Each Receipt this Period _____ 26.34
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CMS ENTERPRISES	Occupation DIR PROJECTS III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 261.84		
		P/R Deduction (\$2.50 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>89.90</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 26 / 26	
	(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"/> 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)  
CMS Energy Corporation Employees for Better Government- Federal

**A.** Full Name (Last, First, Middle Initial)  
MR THOMAS J WEBB

Mailing Address 6142 HIDDEN LAKE CIRCLE

City	State	Zip Code
RICHLAND	MI	49083-9764

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

Name of Employer CONSUMERS ENERGY	Occupation EX VP & CFO
--------------------------------------	---------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
922.46

Date of Receipt  

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

**Transaction ID:** PR52240264640

Amount of Each Receipt this Period  
167.72

P/R Deduction (\$45.51 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	167.72
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2818.36