

08 DEC -8 PM 3:09

08 DEC -6 PM 3:09

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2008 DEC -5 PM 1:35

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
Friends of WSUSOM

ADDRESS (number and street) P.O. Box 44406
Check it different than previously reported. (ACC) Detroit MI 48244-0406

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C00452961

3. IS THIS REPORT NEW (N) OR AMENDED (A) X

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: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)
Election on in the State of
(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)
Election on 11 04 2008 in the State of MI

5. Covering Period 10 16 2008 through 11 24 2008

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 Douglas Skrzyniarz

Signature of Treasurer [Signature] Date 12 03 2008

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 Only table with 8 columns and 1 row. FEC FORM 3X Rev. 12/2004

28039954273

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Friends of WSUSOM

Report Covering the Period:

From:

10 16 2009

To:

11 24 2009

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|----------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <u>2009</u> | | 0.00 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 14,142.04 | |
| (c) Total Receipts (from Line 19)..... | 3,650.00 | 23,420.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 17,792.04 | 23,420.00 |
| 7. Total Disbursements (from Line 31)..... | 8,500.99 | 14,128.95 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 9,291.05 | 9,291.05 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

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

28039954274

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Friends of WSUSOM

Report Covering the Period:

From:

10 16 2008

To:

11 24 2008

| 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)..... | 3,250.00 | 23,020.00 |
| (ii) Unitemized..... | 400.00 | 400.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 3,650.00 | 23,420.00 |
| (b) Political Party Committees..... | | |
| (c) Other Political Committees (such as PACs)..... | | |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶ | 3,650.00 | 23,420.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | | |
| 13. All Loans Received..... | | |
| 14. Loan Repayments Received..... | | |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | | |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | | |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | | |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | | |
| (b) Levin Funds (from Schedule H5)..... | | |
| (c) Total Transfers (add 18(a) and 18(b)).. | | |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 3,650.00 | 23,420.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 3,650.00 | 23,420.00 |

28039954275

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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
 - (ii) Non-Federal Share
 - (b) Other Federal Operating Expenditures
 - (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶
- 22. Transfers to Affiliated/Other Party Committees
- 23. Contributions to Federal Candidates/Committees and Other Political Committees
- 24. Independent Expenditures (use Schedule E)
- 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)
- 26. Loan Repayments Made
- 27. Loans Made
- 28. Refunds of Contributions To:
 - (a) Individuals/Persons Other Than Political Committees
 - (b) Political Party Committees
 - (c) Other Political Committees (such as PACs)
 - (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))
- 29. Other Disbursements
- 30. Federal Election Activity (2 U.S.C. §431(20))
 - (a) Allocated Federal Election Activity (from Schedule H6)
 - (i) Federal Share
 - (ii) "Levin" Share
 - (b) Federal Election Activity Paid Entirely With Federal Funds
 - (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))
- 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..
- 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)

| | |
|----------|-----------|
| | |
| 4,950.99 | 7,978.00 |
| 4,950.99 | 7,978.00 |
| 500.00 | 2,100.00 |
| 3,050.00 | 4,050.00 |
| 8,500.99 | 14,128.00 |
| 8,500.99 | 14,128.00 |

| | |
|-----------|-----------|
| | |
| 7,978.00 | 7,978.00 |
| 7,978.00 | 7,978.00 |
| 2,100.00 | 2,100.00 |
| 4,050.00 | 4,050.00 |
| 14,128.00 | 14,128.00 |
| 14,128.00 | 14,128.00 |

28039954276

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) | 3,650.00 | 23,420.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | | |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 3,650.00 | 23,420.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 4,950.99 | 7,978.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | | |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 4,950.99 | 7,978.00 |

28039954277

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

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

FOR LINE NUMBER: PAGE 1 OF 2
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of WSUSOM

A. Pieper, David
Full Name (Last, First, Middle Initial)

Date of Receipt: **10/17/2008**

Mailing Address: **1356 Yorkshire**

City: **Grosse Pointe** State: **MI** Zip Code: **48230**

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

Name of Employer: **Wayne State University** Occupation: **Administrator**

Receipt For: Primary General Other (specify) **▼**

Aggregate Year-to-Date: **500.00**

Amount of Each Receipt this Period: **500.00**

B. binnebaugh, David
Full Name (Last, First, Middle Initial)

Date of Receipt: **10/27/2008**

Mailing Address: **338 McMillan Road**

City: **Grosse Pointe** State: **MI** Zip Code: **48236**

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

Name of Employer: **Retired** Occupation: **Physician**

Receipt For: Primary General Other (specify) **▼**

Aggregate Year-to-Date: **1,000.00**

Amount of Each Receipt this Period: **1,000.00**

c. brady, Kevin
Full Name (Last, First, Middle Initial)

Date of Receipt: **10/29/2008**

Mailing Address: **8 Higbie Ct.**

City: **Grosse Pointe** State: **MI** Zip Code: **48236**

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

Name of Employer: **St. John Health** Occupation: **Physician**

Receipt For: Primary General Other (specify) **▼**

Aggregate Year-to-Date: **250.00**

Amount of Each Receipt this Period: **250.00**

SUBTOTAL of Receipts This Page (optional).....▶ **1,750.00**

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

28039954278

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

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

FOR LINE NUMBER: PAGE 2 OF 2
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Friends of WSUSOM

A. Full Name (Last, First, Middle Initial)
Seonard, Robert

Mailing Address
4 Cameron Place

City Grosse Pointe State MI Zip Code 48230

FEC ID number of contributing federal political committee. C

Name of Employer St. John Health Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date 500.00

Date of Receipt 10 29 2008

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Balogh, Linda

Mailing Address
22541 Arden Glen Ct.

City Novi State MI Zip Code 48374

FEC ID number of contributing federal political committee. C

Name of Employer UofM Health System Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date 500.00

Date of Receipt 10 31 2008

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Herman, Mark

Mailing Address
286 Cloverly Road

City Grosse Pointe State MI Zip Code 48236

FEC ID number of contributing federal political committee. C

Name of Employer St. John Health Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date 500.00

Date of Receipt 11 05 2008

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1,500.00

TOTAL This Period (last page this line number only) ▶ 3,250.00

28039954279

**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) | | PAGE | OF |
| | <input checked="" type="checkbox"/> 21b <input type="checkbox"/> 27 | <input type="checkbox"/> 22 <input type="checkbox"/> 28a | <input type="checkbox"/> 23 <input type="checkbox"/> 28b | <input type="checkbox"/> 24 <input type="checkbox"/> 28c |
| | | | | <input type="checkbox"/> 26 <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Friends of WSUSOM

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| A. Goodwill Printing | | Date of Disbursement |
| Mailing Address 2000 W. Eight Mile Road | | 10 20 2008 |
| City State Zip Code Ferndale MI 48220 | | |
| Purpose of Disbursement Fundraising Mailing/Printing | | Amount of Each Disbursement this Period |
| Candidate Name | | 3,870.58 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type 003 |
| State: _____ | District: _____ | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| B. Country Club of Detroit | | Date of Disbursement |
| Mailing Address 225 Country Club Drive | | 11 01 2009 |
| City State Zip Code Grosse Pointe MI 48236 | | |
| Purpose of Disbursement Food and Beverage | | Amount of Each Disbursement this Period |
| Candidate Name | | 508.72 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type 003 |
| State: _____ | District: _____ | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| C. | | Date of Disbursement |
| Mailing Address | | |
| City State Zip Code | | |
| Purpose of Disbursement | | Amount of Each Disbursement this Period |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |
| State: _____ | District: _____ | |

| | |
|-----------------------------------------------------------|-----------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 4,379.30 |
| TOTAL This Period (last page this line number only).....▶ | 4,379.30 |

28039954280

**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) | | | | | | PAGE | OF |
| | <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" 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)
Friends of WSUSOM

A. Full Name (Last, First, Middle Initial)
McCotter Congressional Committee

Date of Disbursement
10 23 2008

Mailing Address
P.O. Box 530788

City
Livonia State
MI Zip Code
48153

Purpose of Disbursement
Contribution

Candidate Name
Thaddeus McCotter

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **MI** District: **11**

Amount of Each Disbursement this Period
500.00

Category/Type
011

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

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

Category/Type

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

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶ **500.00**

TOTAL This Period (last page this line number only) ▶ **500.00**

28039954281

**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)

PAGE 1 OF 3

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <input 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 checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Friends of WSUGOM

Full Name (Last, First, Middle Initial)

A. MI House Democratic Caucus Fund

Mailing Address

P.O. Box 16193

City

Lansing

State

MI

Zip Code

48901

Purpose of Disbursement

Contribution

Candidate Name

011
Category/
Type

Date of Disbursement

10 16 2008

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. MI House Democratic Caucus Fund

Mailing Address

P.O. Box 16193

City

Lansing

State

MI

Zip Code

48901

Purpose of Disbursement

Contribution

Candidate Name

011
Category/
Type

Date of Disbursement

10 23 2008

Amount of Each Disbursement this Period

300.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Friends of Deb Kennedy

Mailing Address

19034 Seaton Dr.

City

Brownstown Twp

State

MI

Zip Code

48193

Purpose of Disbursement

Contribution

Candidate Name

Deb Kennedy

011
Category/
Type

Date of Disbursement

10 23 2008

Amount of Each Disbursement this Period

500.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

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

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

1,800.00

28039954282

**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) | | | | | | PAGE <u>2</u> OF <u>3</u> | |
| | <input 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 checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b | | |

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NAME OF COMMITTEE (In Full)
Friends of WSU.SOM

| | | |
|---------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| A. Tom George for State Senate | | Date of Disbursement 10 23 2008 |
| Mailing Address P.O. Box 1265 | | Amount of Each Disbursement this Period 500.00 |
| City Malama Zoo | State MI | |
| Zip Code 49081 | | 011 Category/ Type |
| Purpose of Disbursement Contribution | | |
| Candidate Name Tom George | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| B. Committee to Elect Dave Hildenbrand | | Date of Disbursement 10 23 2008 |
| Mailing Address 2700 Timpson Ave SE | | Amount of Each Disbursement this Period 250.00 |
| City Lowell | State MI | |
| Zip Code 49331 | | 011 Category/ Type |
| Purpose of Disbursement Contribution | | |
| Candidate Name Dave Hildenbrand | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| C. John Proos for State Representative | | Date of Disbursement 10 23 2008 |
| Mailing Address P.O. Box 804 | | Amount of Each Disbursement this Period 250.00 |
| City St. Joseph | State MI | |
| Zip Code 49085 | | 011 Category/ Type |
| Purpose of Disbursement Contribution | | |
| Candidate Name John Proos | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

| | |
|------------------------------------------------------------------|-----------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1,000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

28039954283

**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)

PAGE 3 OF 3

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <input 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 checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Friends of WSUSOM

A. Full Name (Last, First, Middle Initial)
Friends of Roger Kahn for Senate

Date of Disbursement
10 23 2008

Mailing Address
P.O. Box 1627

City
Saginaw State
MI Zip Code
48605

Purpose of Disbursement
Roger Kahn

Candidate Name
Roger Kahn

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Amount of Each Disbursement this Period
250.00

Category/Type
011

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

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Amount of Each Disbursement this Period

Category/Type

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

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional).....▶ **250.00**

TOTAL This Period (last page this line number only).....▶ **3,050.00**

28039954284

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

| | |
|-----------------------------------------|-----------------|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
|-----------------------------------------|-----------------|

| | |
|------------------------------------------------|------------|
| <input type="checkbox"/> USPS First Class Mail | Postmarked |
|------------------------------------------------|------------|

| | |
|----------------------------------------------------|------------------|
| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
|----------------------------------------------------|------------------|

| | |
|----------------------------------------------------------------------------------|------------|
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/> | |

| | |
|--------------------------------------------|------------|
| <input type="checkbox"/> USPS Express Mail | Postmarked |
|--------------------------------------------|------------|

| | |
|---------------------------------------------|--|
| <input type="checkbox"/> Postmark Illegible | |
|---------------------------------------------|--|

| | |
|--------------------------------------|--|
| <input type="checkbox"/> No Postmark | |
|--------------------------------------|--|


| | |
|-----------------------------------------------------------------------------------------|---------------------------------|
| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): Fed Ex | Shipping Date 12/4/08 |
| Next Business Day Delivery <input type="checkbox"/> | |

| | |
|----------------------------------------------------------------------------|-----------------|
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
|----------------------------------------------------------------------------|-----------------|

| | |
|--------------------------------------------------------------------------------|-----------------------------------|
| <input checked="" type="checkbox"/> Received from Senate Public Records Office | Date of Receipt 12/6/08 |
|--------------------------------------------------------------------------------|-----------------------------------|

| | |
|-----------------------------------------------------------------|-----------------|
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
|-----------------------------------------------------------------|-----------------|

| | |
|-------------------------------------------|-------------------------------|
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |
|-------------------------------------------|-------------------------------|

| | |
|-------------------------------------------------------------------------------------------------|----------------------------------|
|  PREPARER | 12/12/08 DATE PREPARED |
|-------------------------------------------------------------------------------------------------|----------------------------------|

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