

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Trott for Congress, Inc.

ADDRESS (number and street) P.O. Box 217  
 Check if different than previously reported. (ACC)  
Troy MI 48099

2. **FEC IDENTIFICATION NUMBER** ▼ C C00548941 **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲  
STATE ▼ DISTRICT  
MI 11

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)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
07 / 01 / 2015 through 09 / 30 / 2015

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 THOMAS J. MCCARTHY

Signature of Treasurer THOMAS J. MCCARTHY [Electronically Filed] Date M M / D D / Y Y Y Y  
01 / 29 / 2016

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  
**Trott for Congress, Inc.**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	150006.97	524471.97
(b) Total Contribution Refunds (from Line 20(d)) .....	50.00	50.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	149956.97	524421.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	69051.09	339080.60
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	35617.49
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	69051.09	303463.11
8. Cash on Hand at Close of Reporting Period (from Line 27).....	430115.26	
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).....	250000.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Trott for Congress, Inc.

Report Covering the Period: From:  /  /  To:  /  /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	103846.97	384056.97
(ii) Unitemized.....	2610.00	6665.00
(iii) TOTAL of contributions from individuals ▶	106456.97	390721.97
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	43550.00	133750.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	150006.97	524471.97
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	35617.49
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	150006.97	560089.46

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	69051.09	339080.60
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	9500.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	50.00	50.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	50.00	50.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	69101.09	348630.60

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	349209.38
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	150006.97
25. SUBTOTAL (add Line 23 and Line 24).....	499216.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	69101.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	430115.26

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 6 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT H HOMMEL**

Mailing Address 1301 RIVER RANCH  
APT 319

City Fort Lauderdale State FL Zip Code 33315

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

Name of Employer SELF-EMPLOYED Occupation ENTREPRENEUR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2015

**Transaction ID : A67BBE24F946846DA873**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**WILLIS C BULLARD**

Mailing Address 1849 LAKEVIEW LANE

City Highland State MI Zip Code 48357-4817

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

Name of Employer SPA Occupation CONSULTANT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : A585005ABE2F143C59E1**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH A. BADALAMENTI**

Mailing Address 5269 GLENGATE

City Rochester State MI Zip Code 48306-2731

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

Name of Employer FIVE BROTHERS MORTGAGE Occupation MANAGER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2015

**Transaction ID : A9F043219D9694F8EBA9**

Amount of Each Receipt this Period  
2200.00

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

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

2725.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**MIKE KOJAIAN**

Mailing Address 39400 WOODWARD AVENUE  
SUITE 250

City Bloomfield Hills State MI Zip Code 48304-5155

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

Name of Employer KOJAIAN MANAGEMENT CORPORATION Occupation CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2015

**Transaction ID : A3380FC2309814B97A32**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**JULIUS DENENBERG**

Mailing Address 555 SOUTH OLD WOODWARD AVE  
# 1009

City Birmingham State MI Zip Code 48009-6675

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

Name of Employer DENENBERG, TUFFLEY PLLC Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2015

**Transaction ID : A16B84E77A4C6428C82D**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**KATHLEEN H TROTT**

Mailing Address 158 LAKE PARK DRIVE

City Birmingham State MI Zip Code 48009-1202

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : A75BA32DFD67146D2876**

Amount of Each Receipt this Period  
2500.00

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**STEVEN H. LEWIS**

Mailing Address 1015 WADDINGTON

City Bloomfield Hills State MI Zip Code 48301-2354

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

Name of Employer DEROY & DEVEREAUX Occupation INDEPENDENT CONTRACTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : A4B218B3B50D84CF3B7B**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**DARLENE JACKSON**

Mailing Address 374 WELLESLEY STREET

City Birmingham State MI Zip Code 48009-1556

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

Name of Employer SELF Occupation REALTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : ACA3EE68B847943659D2**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**CARL BUMGARDNER**

Mailing Address 28930 WIXOM ROAD

City Wixom State MI Zip Code 48393-3416

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

Name of Employer ROYAL TRUCK & TRAILER SALES Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : AD47E96D518C44AFF851**

Amount of Each Receipt this Period  
**500.00**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**STEVEN G GORDON**

Mailing Address **ONE TOWNE SQUARE  
SUITE 1200**

City **Southfield** State **MI** Zip Code **48076-3708**

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

Name of Employer **SIGNATURE ASSOCIATES** Occupation **REAL ESTATE BROKER/PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 09 / 2015**

**Transaction ID : ABCC18FD72643405D890**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**JOSEPH J O'CONNOR**

Mailing Address **803 WEST BIG BEAVER ROAD  
SUITE 203**

City **Troy** State **MI** Zip Code **48084-4734**

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

Name of Employer **KALPA SYSTEMS, INC.** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 08 / 2015**

**Transaction ID : A6B0D12107EE54A8ABCD**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**GWEN S WEINER**

Mailing Address **27235 OVID COURT**

City **Franklin** State **MI** Zip Code **48025-1036**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 29 / 2015**

**Transaction ID : A254D161445F34EDD955**

Amount of Each Receipt this Period  
**2700.00**

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

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

**3950.00**

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

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

FOR LINE NUMBER: PAGE 10 OF 84  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**ELIZABETH FRAZEE**

Mailing Address 6313 EVERMAY DRIVE

City State Zip Code  
Mc Lean VA 22101-2309

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

Name of Employer Occupation  
TWINLOGIC STRATEGIES LLP CONSULTANT/ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : A5D22EBF9781E48518E3**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**GILBERT C. COX Jr.**

Mailing Address 60 SEAGATE DRIVE  
UNIT 1506

City State Zip Code  
Naples FL 34103-2444

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : A055ECDE71C4E41B5867**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**ABE A MUNFAKH**

Mailing Address 9335 SADDLEBROOK COURT

City State Zip Code  
Plymouth MI 48170-3784

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

Name of Employer Occupation  
Munfakh and Associates, LLC CHAIRMAN/CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : A2E8A580B98094281A1C**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**MARK T. HAMMOND**

Mailing Address 5604 KIRKRIDGE TRAIL

City State Zip Code  
Oakland Township MI 48306-2257

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

Name of Employer Occupation  
ALIDADE CAPITAL REAL ESTATE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2015

**Transaction ID : ADD49D9183C584017A2F**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**LORENZO CAVALIERE**

Mailing Address 30078 SCHOENHERR SUITE 300

City State Zip Code  
Warren MI 48088-3178

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

Name of Employer Occupation  
CAVALIERE COMPANIES REAL ESTATE DEVELOPER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : A300AF0CFE3EF4455BD8**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT SOAVE**

Mailing Address 21900 MARTER ROAD

City State Zip Code  
Saint Clair Shores MI 48080-2485

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

Name of Employer Occupation  
ATTORNEYS TITLE AGENCY EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : A442D5EEF44304256B8A**

Amount of Each Receipt this Period  
250.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**COLIN HANNA**

Mailing Address **603 FAIRWAY DRIVE**

City **West Chester** State **PA** Zip Code **19382-2013**

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

Name of Employer **LET FREEDOM RING** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 18 / 2015**

**Transaction ID : AF2558B2677CA4983A18**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**ADELE F. ACHESON**

Mailing Address **3305 INTERLAKEN ROAD**

City **West Bloomfield** State **MI** Zip Code **48323-1827**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**07 / 09 / 2015**

**Transaction ID : A1EB353A9034643C4A8C**

Amount of Each Receipt this Period  
**2700.00**

**C.** Full Name (Last, First, Middle Initial)  
**EDWARD M PARKS**

Mailing Address **727 HARMON**

City **Birmingham** State **MI** Zip Code **48009-1329**

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

Name of Employer **PLANTE MORAN** Occupation **ACCOUNTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 07 / 2015**

**Transaction ID : A6D950EA5926B4983907**

Amount of Each Receipt this Period  
**500.00**

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

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

**3700.00**

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

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

FOR LINE NUMBER: PAGE 13 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES DARDAS**

Mailing Address 3668 S. CREEK DR.

City Rochester State MI Zip Code 48306-1474

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

Name of Employer ALPHA USA Occupation PRESIDENT & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : A38BDF1674F9D4625AB1**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1300.00

**B.** Full Name (Last, First, Middle Initial)  
**CONNIE HUDAS**

Mailing Address 4621 TWIN FAWN LANE

City Orchard Lake State MI Zip Code 48324-3091

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

Name of Employer TIME INC. Occupation ADVERTISING SALES

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A90FA0A8E22BA4419BE3**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**ELIZABETH A. KOJAIAN**

Mailing Address 601 ORCHARD RIDGE ROAD

City Bloomfield Hills State MI Zip Code 48304-2633

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 18 / 2015

**Transaction ID : A1E4055BF59094379B4E**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

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

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

\_\_\_\_\_ 6700.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 14 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**JONATHAN S. AARON**

Mailing Address 1575 ORCHARD RIDGE

City Bloomfield Hills State MI Zip Code 48301-4018

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : AF4E40A64947A4AACAFE**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MICKEY SHAPIRO**

Mailing Address 31550 NORTHWESTERN HWY SUITE 200

City Farmington Hills State MI Zip Code 48334-2532

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

Name of Employer LAUTREC Occupation EXECUTIVE

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : AC3BF68FD08CD4666B82**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS GUASTELLO**

Mailing Address 34120 WOODWARD

City Birmingham State MI Zip Code 48009-0920

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

Name of Employer CENTER MANAGEMENT Occupation PRESIDENT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : AADB688F183784AA79F2**

Amount of Each Receipt this Period  
 2450.00

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

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

7850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD POLING JR**

Mailing Address 5455 Corporate Drive  
Suite 114

City State Zip Code  
Troy MI 48098-2620

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

Name of Employer Occupation  
POLING MCGAW & POLING PC ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : A51E8D7AEC2CF4FAEA59**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**PETER KARMANOS Jr.**

Mailing Address 233 PIERCE STREET

City State Zip Code  
Birmingham MI 48009-6044

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

Name of Employer Occupation  
MAD DOG TECHNOLOGY CHAIRMAN & CO-FOUNDER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2015

**Transaction ID : ADD41AEB87A934A8594A**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**S. EVAN WEINER**

Mailing Address 27235 OVID CT

City State Zip Code  
Franklin MI 48025-1036

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

Name of Employer Occupation  
EDWARD C. LEVY CO CORPORATE EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2015

**Transaction ID : A8ED8FC1C3E5142A590A**

Amount of Each Receipt this Period  
2200.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN F SCHAEFER**

Mailing Address **380 N. OLD WOODWARD AVENUE**  
**SUITE 320**

City **Birmingham** State **MI** Zip Code **48009-5322**

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

Name of Employer **THE LAW FIRM OF JOHN F. SCHAEFER** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 14 / 2015**

**Transaction ID : AA0B3D8E5F2EA41DC871**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL H ACHESON**

Mailing Address **3305 INTERLAKEN ROAD**

City **West Bloomfield** State **MI** Zip Code **48323-1827**

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

Name of Employer **INTERLAKEN CAPITAL LLC** Occupation **BUSINESSMAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 09 / 2015**

**Transaction ID : A26B9411861C24DE6990**

Amount of Each Receipt this Period  
**2700.00**

**C.** Full Name (Last, First, Middle Initial)  
**BRIAN ROBERTS**

Mailing Address **1471 TRAILSIDE BLVD**

City **Wixom** State **MI** Zip Code **48393-1590**

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

Name of Employer **ATTORNEY'S TITLE AGENCY** Occupation **MANAGER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 22 / 2015**

**Transaction ID : A24F2F2B7E4B74B44871**

Amount of Each Receipt this Period  
**250.00**

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

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

**3950.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**BETTY BRIGHT**

Mailing Address 6257 TELEGRAPH RD  
APT 230

City Bloomfield Hills State MI Zip Code 48301-1659

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : A3A5705CE83494E8AA59**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**SAMIR W. HANNA**

Mailing Address 962 DOWLING ROAD

City Bloomfield Hills State MI Zip Code 48304-2523

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

Name of Employer MARINA REHABILITATION Occupation PHYSICAL THERAPIST

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : AD1F5E6CF2CD24B61A51**

Amount of Each Receipt this Period  
2450.00

**C.** Full Name (Last, First, Middle Initial)  
**BRUCE PATTERSON**

Mailing Address 42479 REDFERN STREET

City Canton State MI Zip Code 48187-3451

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY & CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
525.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 09 / 2015

**Transaction ID : A6A1CBFC5B23947679BA**

Amount of Each Receipt this Period  
125.00

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

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

2825.00

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

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

FOR LINE NUMBER: PAGE 18 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES DARDAS**

Mailing Address 3668 S. CREEK DR.

City Rochester State MI Zip Code 48306-1474

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

Name of Employer ALPHA USA Occupation PRESIDENT & CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : A671AAE8DDEE94C18A2A**

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS GUASTELLO**

Mailing Address 34120 WOODWARD

City Birmingham State MI Zip Code 48009-0920

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

Name of Employer CENTER MANAGEMENT Occupation PRESIDENT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : A6A50EA0296344DF78CE**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**BURTON D FARBMAN**

Mailing Address 28400 NORTHWESTERN HWY.  
4 FLOOR

City Southfield State MI Zip Code 48034-8349

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : AE5AD0C3601B244A2A6B**

Amount of Each Receipt this Period  
1000.00

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

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

4400.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 19 OF 84

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**PIERRE BOUTROS**

Mailing Address **285 HAWTHORNE STREET**

City **Birmingham** State **MI** Zip Code **48009-3711**

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

Name of Employer **MILLS PHARMACY** Occupation **PHARMACIST**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2015**

**Transaction ID : AAE3E9A5D35A1495082B**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**MICKEY SHAPIRO**

Mailing Address **31550 NORTHWESTERN HWY SUITE 200**

City **Farmington Hills** State **MI** Zip Code **48334-2532**

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

Name of Employer **LAUTREC** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 01 / 2015**

**Transaction ID : A8C757FE81CCC4938993**

Amount of Each Receipt this Period  
**2700.00**

**C.** Full Name (Last, First, Middle Initial)  
**TIFFANY MOORE**

Mailing Address **417 QUAKENBOS STREET NW**

City **Washington** State **DC** Zip Code **20011-1307**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 22 / 2015**

**Transaction ID : A65D9DC9837D249D6A7A**

Amount of Each Receipt this Period  
**250.00**

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

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

**3450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD P. MAZUR**

Mailing Address 30451 E. LINCOLNSHIRE

City State Zip Code  
Beverly Hills MI 48025-4751

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

Name of Employer Occupation  
SELF-EMPLOYED REAL ESTATE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2015

**Transaction ID : AEC8D4AE8148042A5904**

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
**RANDE K. YEAGER**

Mailing Address 427 FIELDSTONE DRIVE

City State Zip Code  
Venice FL 34292-4601

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

Name of Employer Occupation  
OLD REPUBLIC TITLE.COM CEO/CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 04 / 2015

**Transaction ID : AA9AD92D497A54AA1B22**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**PAUL RUOKIS**

Mailing Address 18259 CEDARISLAND BOULEVARD

City State Zip Code  
Romulus MI 48174-9589

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

Name of Employer Occupation  
ATTORNEY'S TITLE AGENCY SALES

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 22 / 2015

**Transaction ID : A31577FF59ED94C53A04**

Amount of Each Receipt this Period  
250.00

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 21 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**LORI B CONWAY**

Mailing Address 32845 WHATLEY

City State Zip Code  
Franklin MI 48025-1140

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : A5F8260341E7C4A20999**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MARK A WINTER**

Mailing Address 1129 DUCKWOOD CT

City State Zip Code  
White Lake MI 48383-3034

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

Name of Employer Occupation  
IDENTITY PUBLIC RELATIONS CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : AC7B4B810B37A42A4A7D**

Amount of Each Receipt this Period  
2200.00

**C.** Full Name (Last, First, Middle Initial)  
**JAMES D GILLIS**

Mailing Address 13114 ELGIN

City State Zip Code  
Huntington Woods MI 48070-1417

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

Name of Employer Occupation  
JIMAX CONSTRUCTION CONTRACTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : A388E28D391A34A43917**

Amount of Each Receipt this Period  
1000.00

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 22 OF 84  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH J O'CONNOR**

Mailing Address **803 WEST BIG BEAVER ROAD**  
**SUITE 203**

City **Troy** State **MI** Zip Code **48084-4734**

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

Name of Employer **KALPA SYSTEMS, INC.** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2015**

**Transaction ID : AAE0B3C3F7E974025BA3**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**KURT SMITH**

Mailing Address **1046 WATERHILL CT**

City **Birmingham** State **MI** Zip Code **48009**

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

Name of Employer **ENERGY PRODUCTS INC** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 08 / 2015**

**Transaction ID : AFD22B307D3894537905**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**HARRIETT B. ROTTER**

Mailing Address **24265 BINGHAM CT**

City **Bingham Farms** State **MI** Zip Code **48025-3420**

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

Name of Employer **SELF** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 08 / 2015**

**Transaction ID : A6DE9C2314C04453BA0B**

Amount of Each Receipt this Period  
**250.00**

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

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

**950.00**

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

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

FOR LINE NUMBER: PAGE 23 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**CLAUDIA BARKER VALENTE**

Mailing Address 7055 LEESTONE STREET

City Springfield State VA Zip Code 22151-3520

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

Name of Employer VALENTE & ASSOCIATES Occupation CONSULTANT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A429C241F232F472E91E**

Amount of Each Receipt this Period  
 1000.00

In-kind: CATERING

**B.** Full Name (Last, First, Middle Initial)  
**DONN SALVOSA**

Mailing Address 9911 OAK BRANCH DRIVE

City Vienna State VA Zip Code 22181-5333

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

Name of Employer SELF Occupation CONSULTANT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : AED59F9B57F2D4F41AD3**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**PETER KARMANOS Jr.**

Mailing Address 233 PIERCE STREET

City Birmingham State MI Zip Code 48009-6044

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

Name of Employer MAD DOG TECHNOLOGY Occupation CHAIRMAN & CO-FOUNDER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : ABF82224C48B64E71A58**

Amount of Each Receipt this Period  
 2700.00

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 24 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**VAN E. CONWAY**

Mailing Address 32845 WHATLEY

City State Zip Code  
Franklin MI 48025-1140

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

Name of Employer Occupation  
CONWAY MACKENZIE, INC. PRESIDENT/CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 18 / 2015

**Transaction ID : A9FFA512CEDFE4012B94**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS W CRANMER**

Mailing Address 4739 SANDPIPER LANE

City State Zip Code  
West Bloomfield MI 48323-2063

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

Name of Employer Occupation  
MILLER CANFIELD ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : A9567316C10B746CDAF6**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH J O'CONNOR**

Mailing Address 803 WEST BIG BEAVER ROAD  
SUITE 203

City State Zip Code  
Troy MI 48084-4734

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

Name of Employer Occupation  
KALPA SYSTEMS, INC. EXECUTIVE

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A84AC9ABEA32F4803B6D**

Amount of Each Receipt this Period  
800.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 25 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**MARK VALENTE III**

Mailing Address **Hamilton Square - 5th Floor**  
**600 Fourteenth Street, NW**

City **Washington** State **DC** Zip Code **20005-2008**

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

Name of Employer **VALENTE & ASSOCIATES** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**646.97**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 09 / 2015**

**Transaction ID : A6B2B97858A2F4582849**

Amount of Each Receipt this Period  
**146.97**

In-kind: LUNCHEON COST

**B.** Full Name (Last, First, Middle Initial)  
**CAMILLE JAYNE**

Mailing Address **6550 RED MAPLE LANE**

City **Bloomfield Hills** State **MI** Zip Code **48301-3224**

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

Name of Employer **THE JAYNE GROUP** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 09 / 2015**

**Transaction ID : A83C5E53F977142B2A76**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**ERNEST J CODILIS Jr.**

Mailing Address **15WO 30 N. FRONTAGE ROAD**

City **Willowbrook** State **IL** Zip Code **60527**

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

Name of Employer **CODILIS & ASSOCIATES** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**07 / 02 / 2015**

**Transaction ID : A1509123D31DC4853974**

Amount of Each Receipt this Period  
**2700.00**

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

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

**3846.97**

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

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

FOR LINE NUMBER: PAGE 26 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID S FARBMAN**

Mailing Address 28400 NORTHWESTERN HWY  
4TH FLOOR

City Southfield State MI Zip Code 48034-8349

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

Name of Employer FARBMAN GROUP Occupation PRESIDENT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 10 / 2015

**Transaction ID : AA62794A8B58542DBB67**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**C. MICHAEL KOJAIAN**

Mailing Address 39400 WOODWARD AVENUE  
SUITE 250

City Bloomfield Hills State MI Zip Code 48304-5155

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

Name of Employer KOJAIAN MANAGEMENT CORPORATION Occupation PRESIDENT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 18 / 2015

**Transaction ID : A79C1FC86749B465FB1C**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**VAN E. CONWAY**

Mailing Address 32845 WHATLEY

City Franklin State MI Zip Code 48025-1140

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

Name of Employer CONWAY MACKENZIE, INC. Occupation PRESIDENT/CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 18 / 2015

**Transaction ID : A44CDA64CADA94CF7AE3**

Amount of Each Receipt this Period  
 2700.00

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 27 OF 84  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE ZRINYI**

Mailing Address 4502 RAVINEWOOD DRIVE

City Commerce Township State MI Zip Code 48382-1630

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

Name of Employer ZINC, INC. Occupation OWNER/CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : AFC9BF8CBC09943958AB**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**DON J STEBBINS**

Mailing Address 2582 KENT RIDGE COURT

City Bloomfield Hills State MI Zip Code 48301-2276

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 10 / 2015

**Transaction ID : A216B2F08CB6E4FF7871**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MARCY J FORD**

Mailing Address 25325 SHERWOOD DRIVE

City Huntington Woods State MI Zip Code 48070-1734

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

Name of Employer TROTT LAW PC Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : A09B0DB2FAB2F4443A18**

Amount of Each Receipt this Period  
 100.00

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 28 OF 84  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**LORI B CONWAY**

Mailing Address 32845 WHATLEY

City State Zip Code  
Franklin MI 48025-1140

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : A1DCC2E1836524ED981B**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**GHADA HANNA**

Mailing Address 962 DOWLING RD.

City State Zip Code  
Bloomfield Hills MI 48304-2523

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

Name of Employer Occupation  
CTR FOR PHYSICAL MEDICAL AND REHABIL PHYSICIAN

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : A1FC087FF1A2A4794885**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Glen Carlson**

Mailing Address 321 LAKE PARK DRIVE

City State Zip Code  
Birmingham MI 48009-1270

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

Name of Employer Occupation  
ACME MANUFACTURING COMPANY EXECUTIVE/OWNER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : AA81129447EF54632916**

Amount of Each Receipt this Period  
100.00

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**ELLIOT SPOON**

Mailing Address 1858 S. BATES ST.

City Birmingham	State MI	Zip Code 48009-1980
--------------------	-------------	------------------------

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

Name of Employer MSU COLLEGE OF LAW	Occupation PROFESSOR
----------------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : AF2B07E1F0CD747D3B2B**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS A GITTER**

Mailing Address 816 LAKE ANGELUS SHORES

City Lake Angelus	State MI	Zip Code 48326-1034
----------------------	-------------	------------------------

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

Name of Employer RALCO INDUSTRIES INC.	Occupation CEO
-------------------------------------------	-------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : AAEA057863670423A8FB**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN F SCHAEFER**

Mailing Address 380 N. OLD WOODWARD AVENUE  
SUITE 320

City Birmingham	State MI	Zip Code 48009-5322
--------------------	-------------	------------------------

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

Name of Employer THE LAW FIRM OF JOHN F. SCHAEFER	Occupation ATTORNEY
------------------------------------------------------	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : A7C8D86408E374BB6983**

Amount of Each Receipt this Period  
1700.00

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

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

6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**JOSE FUENTES**

Mailing Address **750 9TH STREET, NW  
SUITE 750**

City **Washington** State **DC** Zip Code **20001-4589**

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

Name of Employer **EAST PORT STRATEGIES** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 15 / 2015**

**Transaction ID : A7A81AD15B93C40699AA**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**ELIZABETH A. KOJAIAN**

Mailing Address **601 ORCHARD RIDGE ROAD**

City **Bloomfield Hills** State **MI** Zip Code **48304-2633**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 18 / 2015**

**Transaction ID : AD93879A9EBEA457C981**

Amount of Each Receipt this Period  
**2700.00**

**C.** Full Name (Last, First, Middle Initial)  
**MARK VALENTE III**

Mailing Address **Hamilton Square - 5th Floor  
600 Fourteenth Street, NW**

City **Washington** State **DC** Zip Code **20005-2008**

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

Name of Employer **VALENTE & ASSOCIATES** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2646.97**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2015**

**Transaction ID : A23B51E2A492542768C0**

Amount of Each Receipt this Period  
**2000.00**

In-kind:GAME TICKETS

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

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

**4950.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH J O'CONNOR**

Mailing Address **803 WEST BIG BEAVER ROAD**  
**SUITE 203**

City **Troy** State **MI** Zip Code **48084-4734**

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

Name of Employer **KALPA SYSTEMS, INC.** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3250.00**

Date of Receipt **09 / 07 / 2015**

**Transaction ID : A8496F9C97E71405B905**

Amount of Each Receipt this Period **1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**STEPHEN TEMPLETON**

Mailing Address **735 FOREST AVE**  
**SUITE 204**

City **Birmingham** State **MI** Zip Code **48009-6429**

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

Name of Employer **TEMPLETON BUILDING CO.** Occupation **BUILDER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **09 / 09 / 2015**

**Transaction ID : A28078563B7B54693A4B**

Amount of Each Receipt this Period **500.00**

**C.** Full Name (Last, First, Middle Initial)  
**ANN TEMPLETON**

Mailing Address **735 FOREST AVE.**  
**SUITE 204**

City **Birmingham** State **MI** Zip Code **48009-6429**

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

Name of Employer **FOREST AVENUE DESIGNS** Occupation **DESIGNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **09 / 09 / 2015**

**Transaction ID : AA859409F737A440BAC9**

Amount of Each Receipt this Period **500.00**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD J. KUNZ**

Mailing Address 1157 W. GLENGARRY CIRCLE

City Bloomfield Hills State MI Zip Code 48301-2225

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

Name of Employer HONIGMAN, MILLER ET AL Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : ADC475F3E80B84B1B960**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

103846.97

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN PAC**

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City State Zip Code  
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A2FBAC59337C248D7914**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**DYKEMA GOSSETT FEDERAL PAC**

Mailing Address 201 TOWNSEND STREET  
SUITE 900

City State Zip Code  
Lansing MI 48933-1529

FEC ID number of contributing federal political committee. **C C00342113**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : A1389776C8179411193E**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN LAND TITLE ASSOCIATION TITLE INDUSTRY PAC (TIPAC)**

Mailing Address 1800 M STREET NW  
SUITE 300S

City State Zip Code  
Washington DC 20036-5830

FEC ID number of contributing federal political committee. **C C00012914**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : A6F7CB82979AA4A61BD3**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 34 OF 84  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**FORD MOTOR COMPANY CIVIC ACTION FUND**

Mailing Address **THE AMERICAN ROAD**

City State Zip Code  
**DEARBORN MI 48121**

FEC ID number of contributing federal political committee. **C C00046474**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 17 2015**

**Transaction ID : ACAE63B9B0BC343419EA**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**CATERPILLAR EMOLLOYEES PAC**

Mailing Address **100 N.E. ADAMS STREET**

City State Zip Code  
**Peoria IL 61629-0001**

FEC ID number of contributing federal political committee. **C C00148031**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 22 2015**

**Transaction ID : A9F93E5A29E714FD9BC2**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**QUICKEN LOANS INC PAC**

Mailing Address **101 S. WASHINGTON SQ.  
SUITE 620**

City State Zip Code  
**Lansing MI 48933-1708**

FEC ID number of contributing federal political committee. **C C00388827**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 20 2015**

**Transaction ID : AEE9F5104AA3B41C79EA**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)**

Mailing Address '25 MASSACHUSETTS AVENUE, NW  
SUITE 400

City Washington State DC Zip Code 20001-1427

FEC ID number of contributing federal political committee. **C C00076810**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : AAD6F8AF769CB41F4A27**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC PAC**

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900

City Washington State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : A654EF248379E41B3A92**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**GRIDIRON-PAC**

Mailing Address C/O NATIONAL FOOTBALL LEAGUE  
345 PARK AVENUE

City New York State NY Zip Code 10154-0004

FEC ID number of contributing federal political committee. **C C00451153**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : AE3A4A8D8503B4184AB8**

Amount of Each Receipt this Period  
 2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**ITC HOLDINGS CORP. PAC**

Mailing Address 201 TOWNSEND STREET  
SUITE 900

City State Zip Code  
Lansing MI 48933-1529

FEC ID number of contributing federal political committee. **C C00388462**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6250.00**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 09 / 2015

**Transaction ID : A4EB0DA16E7CC4CFBACC**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**FLAGSTAR BANK FEDERAL PAC**

Mailing Address 5151 CORPORATE DR. E-183-3

City State Zip Code  
Troy MI 48098-2639

FEC ID number of contributing federal political committee. **C C00455733**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 11 / 2015

**Transaction ID : AEE74690E73A2482DB85**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**PIONEER PAC**

Mailing Address 701 8TH STREET, NW  
SUITE 500

City State Zip Code  
Washington DC 20001-3965

FEC ID number of contributing federal political committee. **C C00325357**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 17 / 2015

**Transaction ID : A2D260F0F8C434BBFACE**

Amount of Each Receipt this Period  
**3000.00**

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

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

**5600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**THE DOW CHEMICAL COMPANY EMPLOYEES PAC (DOWPAC)**

Mailing Address 2030 DOW CENTER

City Midland	State MI	Zip Code 48674-1500
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2015

**Transaction ID : AFEEF00D04D5F421CB8B**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILD PAC)**

Mailing Address '1201 15TH STREET, NW'

City Washington	State DC	Zip Code 20005-2899
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : A3748233F9A9A4AF7A7A**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**CMR POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 2485

City Springfield	State VA	Zip Code 22152-0485
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00469429

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2015

**Transaction ID : AE10773ADA73F4636848**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

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

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

\_\_\_\_\_ 5000.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 38 OF 84  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address '600 14TH STREET, NW'  
SUITE 800

City Washington State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 13 / 2015

**Transaction ID : A394EB24738F04E2CA80**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CITIGROUP INC. PAC**

Mailing Address 1101 PENNSYLVANIA AVENUE NW  
SUITE 1000

City Washington State DC Zip Code 20004-2524

FEC ID number of contributing federal political committee. **C C00008474**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 03 / 2015

**Transaction ID : ACBA7227A33E54B0EA0D**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC**

Mailing Address 11921 FREEDOM RD. SUITE 100

City Reston State VA Zip Code 20190-5608

FEC ID number of contributing federal political committee. **C C00447565**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : A82E3D9E5CE3147F5844**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

**A.** Mailing Address **One Comcast Center**  
**1701 JFK BLVD, 49TH FLOOR**  
City Philadelphia State PA Zip Code 19103-2838

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **3500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**08 / 05 / 2015**  
**Transaction ID : A9E298E5AF3F94031A1D**

Amount of Each Receipt this Period  
**1000.00**

Full Name (Last, First, Middle Initial)  
**B. DELPHI CORP. PAC**

Mailing Address **5725 DELPHI DRIVE**  
City Troy State MI Zip Code 48098-2815

FEC ID number of contributing federal political committee. **C C00346130**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**07 / 20 / 2015**  
**Transaction ID : A179416B5CC0644E79A7**

Amount of Each Receipt this Period  
**1000.00**

Full Name (Last, First, Middle Initial)  
**C. COMPETITIVE CARRIERS ASSOCIATION PAC**

Mailing Address **805 15TH STREET**  
**SUITE 401**  
City Washington State DC Zip Code 20005-6533

FEC ID number of contributing federal political committee. **C C00490698**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**08 / 03 / 2015**  
**Transaction ID : A1EC24ACE848A44ACB89**

Amount of Each Receipt this Period  
**250.00**

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

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

**2250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**SCHOSTAK FAMILY FEDERAL PAC**

Mailing Address 17800 LAUREL PARK DRIVE NORTH

City Livonia	State MI	Zip Code 48152-3985
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00458406

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : A97E94C41D39A4AFDB87**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)**

Mailing Address 1771 N STREET NW

City Washington	State DC	Zip Code 20036-2800
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : A91CCBE609AD44B8587A**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**SPRINT CORP. PAC**

Mailing Address 12502 SUNRISE VALLEY DRIVE

City Reston	State VA	Zip Code 20191-3438
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 10 / 2015

**Transaction ID : AD042E3BCE7BA4348B88**

Amount of Each Receipt this Period  
500.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**CMS ENERGY CORPORATION EMPLOYEES FOR BETTER GOVERNMENT- FEDERAL**

Mailing Address **ONE ENERGY PLAZA**  
**EP8-253**

City **Jackson** State **MI** Zip Code **49201-2357**

FEC ID number of contributing federal political committee. **C C00075473**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**07 / 09 / 2015**

**Transaction ID : A74DF4DE33C77470594E**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**CONSUMER ELECTRONICS ASSOCIATION PAC**

Mailing Address **1919 S EADS ST**

City **Arlington** State **VA** Zip Code **22202-3028**

FEC ID number of contributing federal political committee. **C C00375048**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 11 / 2015**

**Transaction ID : AB8A8A49B56744BB684F**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**RITE AID POLITICAL ACTION COMMITTEE**

Mailing Address **500 EIGHTH STREET, NW**  
**SUITE 210**

City **Washington** State **DC** Zip Code **20004-2131**

FEC ID number of contributing federal political committee. **C C00104083**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 22 / 2015**

**Transaction ID : AAC85E2EF0E704B799EA**

Amount of Each Receipt this Period  
**1500.00**

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

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

**5000.00**

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

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

FOR LINE NUMBER: PAGE 42 OF 84  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**UNITED FOR HEALTH PAC**

Mailing Address 701 PENNSYLVANIA AVE NW  
SUITE 200

City Washington State DC Zip Code 20004-3610

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : ADCAB71575DF847DCA9E**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**THE DOW CHEMICAL COMPANY EMPLOYEES PAC (DOWPAC)**

Mailing Address 2030 DOW CENTER

City Midland State MI Zip Code 48674-1500

FEC ID number of contributing federal political committee. **C C00074096**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : AD4636F9AA6D94D1FA60**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City Washington State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : A9B071FCDE4B548A3BC7**

Amount of Each Receipt this Period  
 2500.00

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

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

6500.00

43550.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CLAUDIA BARKER VALENTE</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015	
Mailing Address 7055 LEESTONE STREET			Amount of Each Disbursement this Period 1000.00	
City Springfield	State VA	Zip Code 22151-3520	Transaction ID : B429C241F232F472E91E	
Purpose of Disbursement In-kind:CATERING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MARK VALENTE III</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2015	
Mailing Address Hamilton Square - 5th Floor 600 Fourteenth Street, NW			Amount of Each Disbursement this Period 146.97	
City Washington	State DC	Zip Code 20005-2008	Transaction ID : B6B2B97858A2F4582849	
Purpose of Disbursement In-kind:LUNCHEON COST		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MARK VALENTE III</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015	
Mailing Address Hamilton Square - 5th Floor 600 Fourteenth Street, NW			Amount of Each Disbursement this Period 2000.00	
City Washington	State DC	Zip Code 20005-2008	Transaction ID : B23B51E2A492542768C0	
Purpose of Disbursement In-kind:GAME TICKETS		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3146.97
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 706.11 <b>Transaction ID : B1790F710D6E94405BFE</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL SERVICES/TAX	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 42.45 <b>Transaction ID : B44A7AE16BB51447CB70</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ARISTOTLE INTERNATIONAL INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 205 PENNSYLVANIA AVENUE SE		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : B3D13E58E041244CEA0C</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement SOFTWARE SUBSCRIPTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1398.56
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 84	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CLARK HILL P.L.C.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 601 PENNSYLVANIA AVE NW NORTH BUILDING, SUITE 1000		Amount of Each Disbursement this Period 410.00 <b>Transaction ID : B8CC66B155A114966B24</b>
City Washington State DC Zip Code 20004-2601	Purpose of Disbursement LEGAL CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 42.45 <b>Transaction ID : B55E6FD10F3FF4FE1A84</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 696.17 <b>Transaction ID : BF1438F5EB6464EA2AC5</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL SERVICES/TAX	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1148.62
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. THC INVESTORS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 100 TOWNSEND ST			Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : B6006CF27E2204572978</b>
City Birmingham	State MI	Zip Code 48009-6068	
Purpose of Disbursement FACILITY/ROOM RENTAL DEPOSIT		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. TROTT LAW PC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address 31440 Northwestern Hwy #200			Amount of Each Disbursement this Period 573.00 <b>Transaction ID : B9C23EC548BBA4F6D92E</b>
City Farmington Hills	State MI	Zip Code 48334-5422	
Purpose of Disbursement COURIER SERVICES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ARISTOTLE INTERNATIONAL INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address 205 PENNSYLVANIA AVENUE SE			Amount of Each Disbursement this Period 650.00 <b>Transaction ID : B86D70B7E5A254347837</b>
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement SOFTWARE SUBSCRIPTION		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2223.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. THE SENIOR ALLIANCE AREA AGENCY ON AGING</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015
Mailing Address 3850 SECOND STREET SUITE 100			Amount of Each Disbursement this Period 250.00 <b>Transaction ID : B557AAF055F714A68BD4</b>
City Wayne	State MI	Zip Code 48184-1755	
Purpose of Disbursement EVENT SPONSOR		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. NORC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 1825 SCOTT LAKE ROAD			Amount of Each Disbursement this Period 300.00 <b>Transaction ID : BD5DC852E72594B8EBC1</b>
City Waterford	State MI	Zip Code 48328-1654	
Purpose of Disbursement EVENT SPONSOR		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. CSS PAYROLL, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102			Amount of Each Disbursement this Period 657.20 <b>Transaction ID : BFA96C34160FE4892BF9</b>
City Farmington Hills	State MI	Zip Code 48335-5222	
Purpose of Disbursement PAYROLL SERVICES/TAX		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1207.20
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 84	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 42.45 <b>Transaction ID : BC0E7FB882B77467CA01</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WAYNE 11TH CDRC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 2736 HOGAN WAY		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : B89A5061D83F64C50803</b>
City Canton State MI Zip Code 48188-6302	Purpose of Disbursement EVENT SPONSOR	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DAVID L. ANDRUKITIS INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2015
Mailing Address PRINTING & MAILING SERVICES 8325 OLD MARLBORO PIKE, A-13		Amount of Each Disbursement this Period 991.41 <b>Transaction ID : B4A213762159341D49BE</b>
City Upper Marlboro State MD Zip Code 20772-2617	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1333.86
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2015
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 27.52 <b>Transaction ID : B4676443771EE43E394B</b>
City Baton Rouge State LA Zip Code 70808-2597	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 627.82 <b>Transaction ID : B123A261D56264519904</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL SERVICES/TAX	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 42.45 <b>Transaction ID : B5CFE720A50114FD3ABB</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	697.79
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. ARISTOTLE INTERNATIONAL INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2015
Mailing Address 205 PENNSYLVANIA AVENUE SE			Amount of Each Disbursement this Period 650.00 <b>Transaction ID : BD9DA643BC59B47608C1</b>
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement SOFTWARE SUBSCRIPTION		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. MAROON PHOTOGRAPHY</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2015
Mailing Address 2725 P STREET NW			Amount of Each Disbursement this Period 945.00 <b>Transaction ID : B712501FEFFB549D186C</b>
City Washington	State DC	Zip Code 20007-3065	
Purpose of Disbursement FUNDRAISING SUPPLIES		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. THE CATALYST GROUP RW, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2015
Mailing Address 600 PENNSYLVANIA AVE. SE SUITE 330			Amount of Each Disbursement this Period 2250.00 <b>Transaction ID : BD59F4D2A26894EDCBBF</b>
City Washington	State DC	Zip Code 20003-6300	
Purpose of Disbursement FUNDRAISING CONSULTANT		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3845.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 84	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CLARK HILL P.L.C.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 601 PENNSYLVANIA AVE NW NORTH BUILDING, SUITE 1000		Amount of Each Disbursement this Period 70.00 <b>Transaction ID : BA68D1C0A848F4A7F8DD</b>
City Washington State DC Zip Code 20004-2601	Purpose of Disbursement LEGAL CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 42.45 <b>Transaction ID : B493CD01B00B1457FBA5</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 627.82 <b>Transaction ID : B5E1B9F9DFC5A4C4984C</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL SERVICES/TAX	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	740.27
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2015
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 280.94 <b>Transaction ID : B4897149DA4C64726933</b>
City Baton Rouge State LA Zip Code 70808-2597	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 627.84 <b>Transaction ID : B0F8F5584991A415DB98</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL SERVICES/TAX	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 42.45 <b>Transaction ID : B3D07305B135C422682F</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	951.23
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 160.72 <b>Transaction ID : BDA6297BD45464048A87</b>
City Baton Rouge State LA Zip Code 70808-2597	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ARISTOTLE INTERNATIONAL INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 205 PENNSYLVANIA AVENUE SE		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : B6925BC913A5F40DAB8C</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement SOFTWARE SUBSCRIPTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CONNECTIVIST MEDIA</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 544 E. OGDEN AVENUE SUITE 700-161		Amount of Each Disbursement this Period 1721.70 <b>Transaction ID : B5B98522C2ED34028B30</b>
City Milwaukee State WI Zip Code 53202-2698	Purpose of Disbursement EMAIL SUBSCRIPTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2532.42
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. BILL BERTAKIS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 2120 PARK CIRCLE		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : B09DE66F3CA1643D0910</b>
City Keego Harbor State MI Zip Code 48320-1220	Purpose of Disbursement PHOTOGRAPHY SERVICES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. IDENTITY PR</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 30700 TELEGRAPH ROAD SUITE 1475		Amount of Each Disbursement this Period 1332.23 <b>Transaction ID : BE48773330BF1410AAF2</b>
City Bingham Farms State MI Zip Code 48025-4590	Purpose of Disbursement PRINTING SERVICES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 416.53 <b>Transaction ID : B70FAB75EC9524790B9D</b>
City Baton Rouge State LA Zip Code 70808-2597	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2098.76
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CSS PAYROLL, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102			Amount of Each Disbursement this Period 42.45 <b>Transaction ID : B22579DA9EEC24F7E96F</b>
City Farmington Hills	State MI	Zip Code 48335-5222	
Purpose of Disbursement PAYROLL FEE		Category/ Type	
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. CSS PAYROLL, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102			Amount of Each Disbursement this Period 627.82 <b>Transaction ID : B907A56508B984A878CA</b>
City Farmington Hills	State MI	Zip Code 48335-5222	
Purpose of Disbursement PAYROLL SERVICES/TAX		Category/ Type	
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 5555 HILTON AVENUE SUITE 106			Amount of Each Disbursement this Period 44.77 <b>Transaction ID : B241D6468771F432BB88</b>
City Baton Rouge	State LA	Zip Code 70808-2597	
Purpose of Disbursement MERCHANT FEES		Category/ Type	
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	715.04
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 24.00 <b>Transaction ID : B711AD20D5780446DB2B</b>
City Baton Rouge State LA Zip Code 70808-2597	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 212.92 <b>Transaction ID : BB3ECDB31BD534096BD4</b>
City Baton Rouge State LA Zip Code 70808-2597	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DAVID A. TROTT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address 158 LAKE PARK DRIVE		Amount of Each Disbursement this Period 1325.22 <b>Transaction ID : B69B75002C2974819A69</b>
City Birmingham State MI Zip Code 48009-1202	Purpose of Disbursement Debt Repayment	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1562.14
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. MEGAN J. PIWOWAR</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015	
Mailing Address P.O. BOX 217			Amount of Each Disbursement this Period 1312.00	
City Troy	State MI	Zip Code 48099-0217	Transaction ID : <b>BE94E11302B464CB0B64</b>	
Purpose of Disbursement 7/24 TROTT REPAYMENT: TRAVEL		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. U.S. Post Office</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015	
Mailing Address 32455 Twelve Mile Rd.			Amount of Each Disbursement this Period 4.22	
City Farmington Hills	State MI	Zip Code 48333-9991	Transaction ID : <b>BC881D91CCB364F0BB38</b>	
Purpose of Disbursement 7/24 TROTT REPAYMENT: POSTAGE		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. OAKLAND COUNTY CLERK</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015	
Mailing Address 1200 N TELEGRAPH RD			Amount of Each Disbursement this Period 9.00	
City Pontiac	State MI	Zip Code 48341-1032	Transaction ID : <b>BFAE8B4D117D645B489C</b>	
Purpose of Disbursement 7/24 TROTT REPAYMENT: COPIES		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 1442.36 <b>Transaction ID : B3A38C43BA2DF466884E</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL SERVICES/SALARY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EMILY MILES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address 6510 COMMERCE ROAD		Amount of Each Disbursement this Period 1442.36 <b>Transaction ID : B5737B9587EF045B7BE9</b>
City West Bloomfield State MI Zip Code 48324-2714	Purpose of Disbursement SALARY	
Candidate Name	Category/Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JENNY GORSKI</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2015
Mailing Address 5829 BENT TWIG ROAD		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : B61DEFAF8FE804A98878</b>
City Mc Lean State VA Zip Code 22101-1807	Purpose of Disbursement EXPENSE REIMBURSEMENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1467.36
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. U.S. CAPITOL GIFT SHOP</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2015
Mailing Address LONGWORTH BUILDING			Amount of Each Disbursement this Period 25.00
City Washington	State DC	Zip Code 20515-0001	
Purpose of Disbursement GORSKI REIMBURSEMENT: EVENT SUPPLIES		Category/ Type	<b>Transaction ID : B64707180357649278E7</b>
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. THE CATALYST GROUP RW, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 600 PENNSYLVANIA AVE. SE SUITE 330			Amount of Each Disbursement this Period 7001.12
City Washington	State DC	Zip Code 20003-6300	
Purpose of Disbursement FEES AND EXPENSE REIMBURSEMENT		Category/ Type	<b>Transaction ID : BF7F1B7FFF9E94173966</b>
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address '300 FIRST STREET, SE'			Amount of Each Disbursement this Period 206.44
City Washington	State DC	Zip Code 20003-1801	
Purpose of Disbursement CATALYST GP REIMBURSEMENT: MEETING EXPENSE- MEALS		Category/ Type	<b>Transaction ID : B26AD0B359E2D46CF91F</b>
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7001.12
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 84	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. THE CATALYST GROUP RW, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 600 PENNSYLVANIA AVE. SE SUITE 330		Amount of Each Disbursement this Period 2250.00
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement FUNDRAISING CONSULTANT	
Candidate Name	Category/Type	Transaction ID : <b>BF1DE6435D5E34F158A6</b>  <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address '300 FIRST STREET, SE'		Amount of Each Disbursement this Period 215.28
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement CATALYST GP REIMBURSEMENT; MEETING EXPENSE- MEALS	
Candidate Name	Category/Type	Transaction ID : <b>BC12AAD4691CA4D64BE9</b>  <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. MILLAR W &amp; COMPANY CATERING</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 1335 14TH ST NW		Amount of Each Disbursement this Period 160.47
City Washington State DC Zip Code 20005-3610	Purpose of Disbursement CATALYST GP REIMBURSEMENT: CATERING	
Candidate Name	Category/Type	Transaction ID : <b>B1DBBF17E103746428B5</b>  <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 84	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. THE CATALYST GROUP RW, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 600 PENNSYLVANIA AVE. SE SUITE 330		Amount of Each Disbursement this Period 2250.00
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement FUNDRAISING CONSULTANT	
Candidate Name	Category/Type	<b>Transaction ID : BCE2C0E74CB284C36BFB</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address '300 FIRST STREET, SE'		Amount of Each Disbursement this Period 59.67
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement CATALYST GP REIMBURSEMENT- MEETING EXPENSE- MEALS	
Candidate Name	Category/Type	<b>Transaction ID : BBEA4CC4132574EC2912</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. GEPETTO CATERING, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 4505 QUEENSBURY RD		Amount of Each Disbursement this Period 227.06
City Riverdale State MD Zip Code 20737-1033	Purpose of Disbursement CATALYST GP REIMBURSEMENT: CATERING	
Candidate Name	Category/Type	<b>Transaction ID : BD16F66041B7945FDB5F</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. GEPETTO CATERING, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 4505 QUEENSBURY RD		Amount of Each Disbursement this Period 315.83 Transaction ID : <b>BD6D0FA428B134D948B4</b>
City Riverdale State MD Zip Code 20737-1033	Purpose of Disbursement CATALYST GP REIMBURSEMENT: CATERING	
Candidate Name	Category/Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHARLIE PALMER STEAK</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 101 CONSTITUTION AVE NW		Amount of Each Disbursement this Period 948.04 Transaction ID : <b>BB35D3D9A94594DC3B9F</b>
City Washington State DC Zip Code 20001-2133	Purpose of Disbursement CATALYST GP REIMBURSEMENT: MEETING EXPENSE- MEALS	
Candidate Name	Category/Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address '300 FIRST STREET, SE'		Amount of Each Disbursement this Period 91.00 Transaction ID : <b>B1F70BE2E890849D68D9</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement CATALYST GP REIMBURSEMENT: MEETING EXPENSE- MEALS	
Candidate Name	Category/Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. GEPPETTO CATERING, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 4505 QUEENSBURY RD		Amount of Each Disbursement this Period 277.33
City Riverdale	State MD	
Zip Code 20737-1033	Purpose of Disbursement CATALYST GP REIMBURSEMENT: CATERING	Transaction ID : B6B6211E86F0F4A44842
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DECIDER STRATEGIES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address 2420 MULBERRY CT		Amount of Each Disbursement this Period 10000.00
City Ann Arbor	State MI	
Zip Code 48104-6390	Purpose of Disbursement Debt Repayment: STRATEGY CONSULTING	Transaction ID : B481C1D2013A34861AF5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE CATALYST GROUP RW, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 600 PENNSYLVANIA AVE. SE SUITE 330		Amount of Each Disbursement this Period 2784.95
City Washington	State DC	
Zip Code 20003-6300	Purpose of Disbursement EXPENSE REIMBURSEMENT	Transaction ID : B1E693DB22A4C4CAD8BC
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12784.95
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 84	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. MILLAR W &amp; COMPANY CATERING</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 1335 14TH ST NW		Amount of Each Disbursement this Period 193.93 Transaction ID : B12536D1DC91646ADB25
City Washington State DC Zip Code 20005-3610	Purpose of Disbursement CATALYST GP REIMBURSEMENT: CATERING	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address '300 FIRST STREET, SE'		Amount of Each Disbursement this Period 206.44 Transaction ID : B6E923030F6F5481AB45
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement CATALYST GP REIMBURSEMENT: MEETING EXPENSE- MEALS	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. RSVP CATERING</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 2930 PROSPERITY AVE		Amount of Each Disbursement this Period 2384.58 Transaction ID : B90BC97A51E144BA1B22
City Fairfax State VA Zip Code 22031-2209	Purpose of Disbursement CATALYST GP REIMBURSEMENT: CATERING	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 84	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 1442.36 <b>Transaction ID : BC652C6B32A48424D972</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL SERVICES/SALARY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EMILY MILES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2015
Mailing Address 6510 COMMERCE ROAD		Amount of Each Disbursement this Period 1442.36 <b>Transaction ID : BD1363BB5E37D4673AEE</b>
City West Bloomfield State MI Zip Code 48324-2714	Purpose of Disbursement SALARY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 1442.37 <b>Transaction ID : BBB06D28C1DAB4D21822</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL SERVICES/SALARY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2884.73
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. EMILY MILES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2015
Mailing Address 6510 COMMERCE ROAD		Amount of Each Disbursement this Period 1442.37
City West Bloomfield	State MI Zip Code 48324-2714	
Purpose of Disbursement SALARY	Category/Type	<b>Transaction ID : B9F5206C141B74A6CB3B</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 1442.37
City Farmington Hills	State MI Zip Code 48335-5222	
Purpose of Disbursement PAYROLL SERVICES/SALARY	Category/Type	<b>Transaction ID : B8AA1A67A9F2E4982849</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EMILY MILES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 6510 COMMERCE ROAD		Amount of Each Disbursement this Period 1442.37
City West Bloomfield	State MI Zip Code 48324-2714	
Purpose of Disbursement SALARY	Category/Type	<b>Transaction ID : BD664ACB6D61E4A0C8C9</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1442.37
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 1442.36 <b>Transaction ID : B0B67AC5EBFF5453D822</b>
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL SERVICES/SALARY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EMILY MILES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 6510 COMMERCE ROAD		Amount of Each Disbursement this Period 1442.36 <b>Transaction ID : B8A8A2AF3E47543A8A4E</b>
City West Bloomfield State MI Zip Code 48324-2714	Purpose of Disbursement SALARY	
Candidate Name	Category/Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EMILY MILES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 6510 COMMERCE ROAD		Amount of Each Disbursement this Period 4895.46 <b>Transaction ID : BC879E2E09DF44355AAA</b>
City West Bloomfield State MI Zip Code 48324-2714	Purpose of Disbursement EXPENSE REIMBURSEMENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6337.82
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial)  
**A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City Washington State DC Zip Code 20003-1885

Purpose of Disbursement  
E MILES REIMBURSEMENT: EVENT REGISTRATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Disbursement this Period  
150.00

Transaction ID : B316A33DE490648CA87B

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. DIAMOND CAB**

Mailing Address 1100 Q STREET NW

City Washington State DC Zip Code 20009-4313

Purpose of Disbursement  
E MILES REIMBURSEMENT: TAXI/CAB FARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Disbursement this Period  
9.71

Transaction ID : B83FF4AD6F1E0465CB1D

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. FOUNDING FARMERS**

Mailing Address 1924 PENNSYLVANIA AVE NW

City Washington State DC Zip Code 20006-3607

Purpose of Disbursement  
E MILES REIMBURSEMENT: FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 13 / 2015

Amount of Each Disbursement this Period  
57.50

Transaction ID : B3D38E289792D475E989

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. GRAND CAB COMPANY</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 3001 EARL PLACE NE			Amount of Each Disbursement this Period 8.09
City Washington	State DC	Zip Code 20018-2207	
Purpose of Disbursement E MILES REIMBURSEMENT: TAXI/CAB FARE		Category/ Type	<b>Transaction ID : B936A87FA27574EE8A40</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. KROGER</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 2600 W. MAPLE ROAD			Amount of Each Disbursement this Period 108.47
City BLOOMFIELD HILLS	State MI	Zip Code 48301	
Purpose of Disbursement E MILES REIMBURSEMENT: FUNDRAISING EVENT SUPPLIES		Category/ Type	<b>Transaction ID : B237743F5BA244FE2A42</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. VIP CAB OF DC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 2606 BLADENSBURG RD NE			Amount of Each Disbursement this Period 20.37
City Washington	State DC	Zip Code 20018-1423	
Purpose of Disbursement E MILES REIMBURSEMENT: TAXI/CAB FARE		Category/ Type	<b>Transaction ID : B5F6E189B0B21404992D</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

**A. TRAVEL TRADERS**

Full Name (Last, First, Middle Initial)  
Mailing Address 400 NEW JERSEY AVE NW

City Washington State DC Zip Code 20001-2002

Purpose of Disbursement  
E MILES REIMBURSEMENT: TAXI/CAB FARE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 13 / 2015

Amount of Each Disbursement this Period: 8.45

Transaction ID : B940D2602331B42CD88A

[MEMO ITEM]

**B. NATIONAL CAB**

Full Name (Last, First, Middle Initial)  
Mailing Address 1810 EDWIN ST NE

City Washington State DC Zip Code 20018-3624

Purpose of Disbursement  
E MILES REIMBURSEMENT: TAXI/CAB FARE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 13 / 2015

Amount of Each Disbursement this Period: 23.65

Transaction ID : B52E7638DEAF54D5B9B0

[MEMO ITEM]

**C. DOLLAR TREE STORE**

Full Name (Last, First, Middle Initial)  
Mailing Address 2037 W MAPLE ROAD

City Troy State MI Zip Code 48084-7100

Purpose of Disbursement  
E MILES REIMBURSEMENT: FUNDRAISING EVENT SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 13 / 2015

Amount of Each Disbursement this Period: 31.84

Transaction ID : B4FB1EAE822F446608C5

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. DC TAXI</b>		M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 2235 SHANNON PLACE SE		Amount of Each Disbursement this Period
City Washington	State DC	Zip Code 20020-5739
Purpose of Disbursement E MILES REIMBURSEMENT: TAXI/CAB FARE		Category/Type
Candidate Name		Transaction ID : BA67C7454DE8F468CA02
Office Sought:	Disbursement For: 2016	[MEMO ITEM]
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. ONE CITY CAB</b>		M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 2041 MARTIN LUTHER KING JR. AVE SE		Amount of Each Disbursement this Period
City Washington	State DC	Zip Code 20020-7024
Purpose of Disbursement E MILES REIMBURSEMENT: TAXI/CAB FARE		Category/Type
Candidate Name		Transaction ID : B111C79BA655C4C918ED
Office Sought:	Disbursement For: 2016	[MEMO ITEM]
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. DELTA AIR LINES</b>		M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 1030 DELTA BLVD		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30354-1989
Purpose of Disbursement E MILES REIMBURSEMENT: AIRFARE		Category/Type
Candidate Name		Transaction ID : B0AC03A7D72C14FDF908
Office Sought:	Disbursement For: 2016	[MEMO ITEM]
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL HOTEL</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 200 C STREET SE		Amount of Each Disbursement this Period 1758.72
City Washington State DC Zip Code 20003-1909	Purpose of Disbursement E MILES REIMBURSEMENT: LODGING/HOTEL	
Candidate Name	Category/Type	Transaction ID : BA25B0235BF904232B9E <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. U.S. POST OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 6725 DALY ROAD		Amount of Each Disbursement this Period 490.00
City West Bloomfield State MI Zip Code 48322-3420	Purpose of Disbursement E MILES REIMBURSEMENT: POSTAGE	
Candidate Name	Category/Type	Transaction ID : BA005CDBC4A1A4863A0A <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. EMILY MILES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 6510 COMMERCE ROAD		Amount of Each Disbursement this Period 159.52
City West Bloomfield State MI Zip Code 48324-2714	Purpose of Disbursement E MILES REIMBURSEMENT: MILEAGE	
Candidate Name	Category/Type	Transaction ID : B2E665C822A4C4B60812 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. HYATT REGENGY HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 400 NEW JERSEY AVE NW			Amount of Each Disbursement this Period 64.27
City Washington	State DC	Zip Code 20001-2002	
Purpose of Disbursement E MILES REIMBURSEMENT: FOOD/BEVERAGE		Category/ Type	<b>Transaction ID : BBAE6540417294A389B4</b>
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. GRILLE DISTRICT</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address REAGAN INTERNATIONAL AIRPORT			Amount of Each Disbursement this Period 48.00
City ARLINGTON	State VA	Zip Code 22202	
Purpose of Disbursement E MILES REIMBURSEMENT: FOOD/BEVERAGE		Category/ Type	<b>Transaction ID : B23189B409BED4CA0A6A</b>
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. DELTA AIR LINES</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 1030 DELTA BLVD			Amount of Each Disbursement this Period 1140.20
City Atlanta	State GA	Zip Code 30354-1989	
Purpose of Disbursement E MILES REIMBURSEMENT: AIRFARE		Category/ Type	<b>Transaction ID : B9D3E6DEAC90E40DD9FF</b>
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. PARTY CITY</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 29305 ORCHARD LAKE RD		Amount of Each Disbursement this Period 104.82
City Farmington Hills State MI Zip Code 48334-2968	Purpose of Disbursement E MILES REIMBURSEMENT: FUNDRAISING EVENT SUPPLIES	
Candidate Name	Category/Type	<b>Transaction ID : B2DBDE42D21C241B7991</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GRILLE DISTRICT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address REAGAN INTERNATIONAL AIRPORT		Amount of Each Disbursement this Period 15.20
City ARLINGTON State VA Zip Code 22202	Purpose of Disbursement E MILES REIMBURSEMENT: FOOD/BEVERAGE	
Candidate Name	Category/Type	<b>Transaction ID : BC595D4EF56014B6D8FD</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. OFFICE DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 31219 W. 14 MILE ROAD		Amount of Each Disbursement this Period 140.03
City Farmington Hills State MI Zip Code 48334-1402	Purpose of Disbursement E MILES REIMBURSEMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	<b>Transaction ID : B1E71F56723B74CB78B6</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. EMILY MILES</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 6510 COMMERCE ROAD			Amount of Each Disbursement this Period 2447.14 <b>Transaction ID : B5E9167933F9944568CE</b>
City West Bloomfield	State MI	Zip Code 48324-2714	
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. EMILY MILES</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 6510 COMMERCE ROAD			Amount of Each Disbursement this Period 157.60 <b>Transaction ID : B690A4F697AC7449BA36</b> <b>[MEMO ITEM]</b>
City West Bloomfield	State MI	Zip Code 48324-2714	
Purpose of Disbursement E MILES REIMBURSEMENT: MILEAGE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. BILL BERTAKIS</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 2120 PARK CIRCLE			Amount of Each Disbursement this Period 100.00 <b>Transaction ID : BE32C83B4146347DDA29</b> <b>[MEMO ITEM]</b>
City Keego Harbor	State MI	Zip Code 48320-1220	
Purpose of Disbursement E MILES REIMBURSEMENT: PHOTOGRAPHY SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2447.14
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial)  
**A. INTERNATIONAL MINUTE PRESS**

Mailing Address 24409 HALSTED

City Farmington Hills State MI Zip Code 48335-1669

Purpose of Disbursement  
E MILES REIMBURSEMENT: PRINTING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 14 / 2015

Amount of Each Disbursement this Period: 958.83

Transaction ID : B3155C6D6C2424DB2B7A

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. OFFICE DEPOT**

Mailing Address 31219 W. 14 MILE ROAD

City Farmington Hills State MI Zip Code 48334-1402

Purpose of Disbursement  
E MILES REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 14 / 2015

Amount of Each Disbursement this Period: 74.16

Transaction ID : BDA0165DEA98B4ADEBD6

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. THE UPS STORE # 3011**

Mailing Address 37637 5 Mile Rd

City Livonia State MI Zip Code 48154-1543

Purpose of Disbursement  
E MILES REIMBURSEMENT: MAILING OF SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 14 / 2015

Amount of Each Disbursement this Period: 49.45

Transaction ID : BE24F211DA8F44736AB9

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CVS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 29425 ORCHARD LAKE ROAD		Amount of Each Disbursement this Period 24.84
City Farmington Hills State MI Zip Code 48334-2970	Category/Type	
Purpose of Disbursement E MILES REIMBURSEMENT: PHOTO PRINTING CHARGES		Transaction ID : BCD856BB13E414A22A75
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DELTA AIR LINES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 1030 DELTA BLVD		Amount of Each Disbursement this Period 25.00
City Atlanta State GA Zip Code 30354-1989	Category/Type	
Purpose of Disbursement E MILES REIMBURSEMENT: BAGGAGE CHECK FEE		Transaction ID : B903B31BD72F341AAB80
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DC TAXI</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 2235 SHANNON PLACE SE		Amount of Each Disbursement this Period 53.70
City Washington State DC Zip Code 20020-5739	Category/Type	
Purpose of Disbursement E MILES REIMBURSEMENT: TAXI/CAB FARE		Transaction ID : B7B43E1DACF824ECCA50
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. OFFICE DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 31219 W. 14 MILE ROAD		Amount of Each Disbursement this Period 99.79
City Farmington Hills State MI Zip Code 48334-1402	Purpose of Disbursement E MILES REIMBURSEMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : B74BD0E978C134B63B8B <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. DC TAXI</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 2235 SHANNON PLACE SE		Amount of Each Disbursement this Period 19.07
City Washington State DC Zip Code 20020-5739	Purpose of Disbursement E MILES REIMBURSEMENT: TAXI/CAB FARE	
Candidate Name	Category/Type	Transaction ID : BF2911E41A31C499681D <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. OFFICE DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 31219 W. 14 MILE ROAD		Amount of Each Disbursement this Period 20.48
City Farmington Hills State MI Zip Code 48334-1402	Purpose of Disbursement E MILES REIMBURSEMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : B16EBB90F388A4FA8A98 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. BUDDY'S PIZZA</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 31646 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 56.14
City Farmington Hills State MI Zip Code 48334-1656	Purpose of Disbursement E MILES REIMBURSEMENT: STAFF MEALS	
Candidate Name	Category/Type	Transaction ID : B598E6340592C4D93AB7
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. PAPER SOURCE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 115 W. MAPLE		Amount of Each Disbursement this Period 29.52
City Birmingham State MI Zip Code 48009-3323	Purpose of Disbursement E MILES REIMBURSEMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : B5174250F469C446581F
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. U.S. POST OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 6725 DALY ROAD		Amount of Each Disbursement this Period 736.25
City West Bloomfield State MI Zip Code 48322-3420	Purpose of Disbursement E MILES REIMBURSEMENT: POSTAGE	
Candidate Name	Category/Type	Transaction ID : B893FD551FC584EA5AD2
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. WHOLE FOODS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 7350 ORCHARD LAKE RD		Amount of Each Disbursement this Period 1442.37
City West Bloomfield State MI Zip Code 48322-3621	Purpose of Disbursement E MILES REIMBURSEMENT: FOOD/BEVERAGE	
Candidate Name	Category/Type	Transaction ID : <b>BF157144498F54897935</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CSS PAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 1442.37
City Farmington Hills State MI Zip Code 48335-5222	Purpose of Disbursement PAYROLL SERVICES/SALARY	
Candidate Name	Category/Type	Transaction ID : <b>B1A2878B5AE024BC8AB8</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. EMILY MILES</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 6510 COMMERCE ROAD		Amount of Each Disbursement this Period 1442.37
City West Bloomfield State MI Zip Code 48324-2714	Purpose of Disbursement SALARY	
Candidate Name	Category/Type	Transaction ID : <b>B2B65F1C6CE844CD688A</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1442.37
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. DECIDER STRATEGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address 2420 MULBERRY CT			Amount of Each Disbursement this Period 8000.00 <b>Transaction ID : B5FA83106BF134562B4B</b>
City Ann Arbor	State MI	Zip Code 48104-6390	
Purpose of Disbursement Debt Repayment: TELEMARKETING		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. CSS PAYROLL, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102			Amount of Each Disbursement this Period 1442.37 <b>Transaction ID : B3EE93AD54F324695AC7</b>
City Farmington Hills	State MI	Zip Code 48335-5222	
Purpose of Disbursement PAYROLL SERVICES/SALARY		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. EMILY MILES</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 6510 COMMERCE ROAD			Amount of Each Disbursement this Period 1442.37 <b>Transaction ID : BD03934EA7FD54E6C9D3</b> <b>[MEMO ITEM]</b>
City West Bloomfield	State MI	Zip Code 48324-2714	
Purpose of Disbursement SALARY		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9442.37
<b>TOTAL</b> This Period (last page this line number only).....	68851.09

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 84	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Trott for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. COMMITTEE TO ELECT KURT HEISE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 07 / 2015</b>
Mailing Address P.O. BOX 702012		Amount of Each Disbursement this Period <b>50.00</b> <b>Transaction ID : B53F5D64AEC9A4F5ABD5</b>
City Plymouth	State MI	
Zip Code 48170-0974		Category/ Type
Purpose of Disbursement Refund: REFUND OF CONTRIBUTION		
Candidate Name <b>COMMITTEE TO ELECT KURT HEISE</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>50.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>50.00</b>

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Trott for Congress, Inc.

Transaction ID : CEE57CAF398F845218EB

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
DAVID A. TROTT

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
158 LAKE PARK DRIVE

City State ZIP Code  
Birmingham MI 48009-1202

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

### TERMS

Date Incurred: M 06 / D 06 / Y 2014  
 Date Due: M / D / Y None  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	250000.00
<b>TOTALS</b> This Period (last page in this line only).....	250000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Trott for Congress, Inc.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DAVID A. TROTT</b>		Nature of Debt (Purpose): REIMBURSEMENT
Mailing Address 158 LAKE PARK DRIVE		
City	State	Zip Code
Birmingham	MI	48009-1202

Outstanding Balance Beginning This Period	Transaction ID : D37CB53B2ADEE44D5A7D	
<input type="text" value="1325.22"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1325.22"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DECIDER STRATEGIES</b>		Nature of Debt (Purpose): STRATEGY CONSULTING
Mailing Address 2420 MULBERRY CT		
City	State	Zip Code
Ann Arbor	MI	48104-6390

Outstanding Balance Beginning This Period	Transaction ID : DB55D0400CA434399AF3	
<input type="text" value="10000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="10000.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DECIDER STRATEGIES</b>		Nature of Debt (Purpose): TELEMARKETING
Mailing Address 2420 MULBERRY CT		
City	State	Zip Code
Ann Arbor	MI	48104-6390

Outstanding Balance Beginning This Period	Transaction ID : DDD6A1F8F25414299B57	
<input type="text" value="8000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="8000.00"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="0.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>