

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

ADDRESS (number and street) 7575 E FULTON ROAD  
Attn: Scott Smoes 56-3S  
 Check if different than previously reported. (ACC) ADA MI 49355

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00034884 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2013 through 06 / 30 / 2013

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 Scott E Smoes

Signature of Treasurer Scott E Smoes [Electronically Filed] Date 07 / 03 / 2013

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**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="3845.81"/>	<input type="text" value="3845.81"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3845.81"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="11123.28"/>	<input type="text" value="11123.28"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="14969.09"/>	<input type="text" value="14969.09"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11850.00"/>	<input type="text" value="11850.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3119.09"/>	<input type="text" value="3119.09"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Report Covering the Period: From: 01 / 01 / 2013 To: 06 / 30 / 2013

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10604.72	10604.72
(ii) Unitemized .....	518.56	518.56
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11123.28	11123.28
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11123.28	11123.28
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	11123.28	11123.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11123.28	11123.28

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11850.00	11850.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11850.00	11850.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11850.00	11850.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11123.28	11123.28
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11123.28	11123.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

**A. Christine Abdo**  
Full Name (Last, First, Middle Initial)

Mailing Address 7575 Fulton Street East

City	State	Zip Code
Ada	MI	49355

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

Name of Employer	Occupation
Alticor Inc	Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.99

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

**Transaction ID : SA11AI.5412**

Amount of Each Receipt this Period  
249.99

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

Mailing Address 6414 127th Ave

City	State	Zip Code
Fennville	MI	49408

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

Name of Employer	Occupation
Alticor Inc.	Manager - R & D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
749.97

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

**Transaction ID : SA11AI.5410**

Amount of Each Receipt this Period  
749.97

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

Mailing Address 5698 Blakely Rd

City	State	Zip Code
Belmont	MI	49306

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

Name of Employer	Occupation
Alticor Inc.	VP Deputy General Counsel - Legal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
130.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

**Transaction ID : SA11AI.5405**

Amount of Each Receipt this Period  
130.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1129.96
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 19  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)  
**A. Kenneth Binkley**

Mailing Address 472 Timberlake Dr E

City State Zip Code  
 Holland MI 49424

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

Name of Employer Occupation  
 Alticor Employee

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 249.99

Date of Receipt  
 06 / 30 / 2013  
**Transaction ID : SA11AI.5414**

Amount of Each Receipt this Period  
 249.99

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

Mailing Address 7575 Fulton Street East

City State Zip Code  
 Ada MI 49355

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

Name of Employer Occupation  
 Alticor Government Affairs

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 06 / 30 / 2013  
**Transaction ID : SA11AI.5397**

Amount of Each Receipt this Period  
 260.00

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

Mailing Address 7575 Fulton Street East

City State Zip Code  
 Ada MI 49355

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

Name of Employer Occupation  
 Alticor, Inc. EVP-CFO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1499.94

Date of Receipt  
 06 / 30 / 2013  
**Transaction ID : SA11AI.5415**

Amount of Each Receipt this Period  
 1499.94

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2009.93

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial) <b>A. Laura Davis</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5409</b>
Mailing Address 3010 Indian Lakes		Amount of Each Receipt this Period 249.99
City Cedar Springs	State MI	Zip Code 49319
FEC ID number of contributing federal political committee. C	Name of Employer Alticor Inc.	Occupation Director - Talent Acq & Engagement
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) <b>B. Alison Hague</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5413</b>
Mailing Address 7659 Hidden Lake Drive		Amount of Each Receipt this Period 249.99
City Hudsonville	State MI	Zip Code 49426
FEC ID number of contributing federal political committee. C	Name of Employer Amway North America	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) <b>C. Robert W. Hamilton</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5396</b>
Mailing Address 7575 Fulton Street East		Amount of Each Receipt this Period 249.99
City Ada	State MI	Zip Code 49355
FEC ID number of contributing federal political committee. C	Name of Employer Alticor	Occupation Industry Relations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	749.97
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial) <b>A. Richard N. Holwill</b>		Date of Receipt MM / DD / YYYY 05 / 13 / 2013 <b>Transaction ID : SA11AI.5454</b>
Mailing Address 624 Maryland Ave. NE #3		Amount of Each Receipt this Period 2500.00
City Washington DC	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Alticor	Occupation Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Cary Justice</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5400</b>
Mailing Address 2328 Gatetree Lane SE		Amount of Each Receipt this Period 130.00
City Grand Rapids	State MI	Zip Code 49546
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Alticor, Inc	Occupation Corporate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 130.00	

Full Name (Last, First, Middle Initial) <b>C. Kurt Ludlow</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5398</b>
Mailing Address 4957 Glen Oaks Drive		Amount of Each Receipt this Period 260.00
City Rockford	State MI	Zip Code 49341
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Alticor Inc.	Occupation VP - Global IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2890.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial) <b>A. Mike Mohr</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5402</b>
Mailing Address 7629 Silverthorn Drive		Amount of Each Receipt this Period 520.00
City Ada	State MI	Zip Code 49301
FEC ID number of contributing federal political committee. C	Name of Employer Alticor Inc	Occupation VP, General Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Angie Polsgrove</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5408</b>
Mailing Address 10986 Woodbushe		Amount of Each Receipt this Period 249.99
City Lowell	State MI	Zip Code 49331
FEC ID number of contributing federal political committee. C	Name of Employer Alticor Inc	Occupation Director - National Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) <b>C. Greg Schroeder</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5406</b>
Mailing Address 1432 Patterson Ave SE		Amount of Each Receipt this Period 199.94
City Grand Rapids	State MI	Zip Code 49546
FEC ID number of contributing federal political committee. C	Name of Employer Alticor Inc.	Occupation Director - Global Trade
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 199.94	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	969.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

**A. Jon Sherk**  
Full Name (Last, First, Middle Initial)

Mailing Address 6269 Clubview Court

City State Zip Code  
Ada MI 49301

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

Name of Employer Occupation  
Alticor Inc. Director & AGC/CLO North America

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.99

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2013  
**Transaction ID : SA11AI.5404**

Amount of Each Receipt this Period  
249.99

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

Mailing Address 1738 Secretariat Drive SE

City State Zip Code  
Grand Rapids MI 49546

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

Name of Employer Occupation  
Alticor VP - Global Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.99

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2013  
**Transaction ID : SA11AI.5395**

Amount of Each Receipt this Period  
249.99

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

Mailing Address 462 Enclave Ct SE

City State Zip Code  
Grand Rapids MI 49546

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

Name of Employer Occupation  
Access Business Group Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.99

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2013  
**Transaction ID : SA11AI.5416**

Amount of Each Receipt this Period  
249.99

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	749.97
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial) <b>A. Monica Stitt</b>			Date of Receipt
Mailing Address 7575 Fulton Street			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.5411</b>
Ada	MI	49355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="249.99"/>
Name of Employer	Occupation		
Amway North America	Director - Customer Support		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="249.99"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mitchell Urbytes</b>			Date of Receipt
Mailing Address 1378 Spinnaker Court			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.5401</b>
Holland	MI	49424	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="260.00"/>
Name of Employer	Occupation		
Alticor Inc.	Mgr, Durables Strategic Business Line		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. James Weaver</b>			Date of Receipt
Mailing Address 7575 Fulton St East Mail Code 49-2NN			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.5403</b>
Ada	MI	49355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="499.98"/>
Name of Employer	Occupation		
Alticor Inc.	VP - ACE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="499.98"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1009.97"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial) <b>A. Carl Wiegand</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5407</b>
Mailing Address 4505 Summit Forest Drive		Amount of Each Receipt this Period 249.99
City Rockford	State MI	Zip Code 49341
FEC ID number of contributing federal political committee. C	Name of Employer Alticor Inc.	Occupation Director - Database & IT Svc Mgmt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) <b>B. Michael J. Zarrelli</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5399</b>
Mailing Address 7575 Fulton Street East		Amount of Each Receipt this Period 520.00
City Ada	State MI	Zip Code 49355
FEC ID number of contributing federal political committee. C	Name of Employer Alticor	Occupation Government Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph Zeigler</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5394</b>
Mailing Address 7575 East Fulton Street		Amount of Each Receipt this Period 325.00
City Ada	State MI	Zip Code 49355
FEC ID number of contributing federal political committee. C	Name of Employer Alticor Inc.	Occupation Director - Quality Assurance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1094.99
<b>TOTAL</b> This Period (last page this line number only).....▶	10604.72

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. LAMAR ALEXANDER FOR SENATE 2014 INC**

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: TN District: 00

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2013

Transaction ID : SB23.5419

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. INC. ANDY BARR FOR CONGRESS**

Mailing Address PO BOX 2059

City LEXINGTON State KY Zip Code 40588

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: KY District: 06

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2013

Transaction ID : SB23.5432

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. ROY BLUNT**

Mailing Address PO BOX 50100

City SPRINGFIELD State MO Zip Code 65805

Purpose of Disbursement  
Void check 1005

Candidate Name

Office Sought:  House  Senate  President  
State: MO District: 00

Disbursement For: 2012  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 01 / 2013

Transaction ID : SB23.5417

Amount of Each Disbursement this Period

-1000.00

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

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. CANDICE CANDICE MILLER FOR CONGRESS**

Mailing Address PO BOX 182152

City State Zip Code  
SHELBY TOWNSHIP MI 48318

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MI District: 10

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : SB23.5442

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. SHELLY MOORE CAPITO FOR WEST VIRGINIA**

Mailing Address PO BOX 11519

City State Zip Code  
CHARLESTON WV 25339

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: WV District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	3

Transaction ID : SB23.5426

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. MIKE COFFMAN FOR CONGRESS**

Mailing Address 4950 S YOSEMITE STREET F2 #511

City State Zip Code  
GREENWOOD VILLAGE CO 80111

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CO District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	3

Transaction ID : SB23.5430

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0
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3	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

### A. DAVE DAVE CAMP FOR CONGRESS

Mailing Address 5915 EASTMAN AVENUE  
SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MI District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : SB23.5436

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

### B. THE FRIENDS OF ERIK PAULSEN

Mailing Address P.O. BOX 44369  
250 PRAIRIE CENTER DRIVE

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MN District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : SB23.5446

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

### C. THE FRIENDS OF JASON CHAFFETZ

Mailing Address 315 WESTFIELD CIRCLE

City ALPINE State UT Zip Code 84004

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: UT District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : SB23.5438

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3	0	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

3	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. ORRIN G HATCH**

Mailing Address 175 SOUTH WEST TEMPLE SUITE 650

City State Zip Code  
SALT LAKE CITY UT 84101

Purpose of Disbursement  
Void check 1007

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: UT District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	3

**Transaction ID : SB23.5418**

Amount of Each Disbursement this Period

-	1	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. RICHARD HUDSON FOR CONGRESS**

Mailing Address PO BOX 5053

City State Zip Code  
CONCORD NC 28027

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NC District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : SB23.5440**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Marty Jackley for Attorney General**

Mailing Address PO Box 86

City State Zip Code  
Pierre SD 57501

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	3

**Transaction ID : SB23.5428**

Amount of Each Disbursement this Period

3	5	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3	5	0	0	0	0	0	0	0	0
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3	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. THE JOE WILSON FOR CONGRESS COMM**

Mailing Address PO BOX 2145

City WEST COLUMBIA State SC Zip Code 29171

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: SC District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

Transaction ID : SB23.5450

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. KRISTI KRISTI FOR CONGRESS**

Mailing Address PO BOX 852

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: SD District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

Transaction ID : SB23.5444

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. LOU LOU BARLETTA FOR CONGRESS**

Mailing Address P.O. BOX 128

City HAZLETON State PA Zip Code 18201

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: PA District: 11

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

Transaction ID : SB23.5434

Amount of Each Disbursement this Period

1000.00
---------

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

3000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

### A. TOM PRICE FOR CONGRESS

Mailing Address P.O. BOX 425

City ROSWELL State GA Zip Code 30077

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: GA District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

Transaction ID : SB23.5448

Amount of Each Disbursement this Period

1500.00
---------

### B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

--

### C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

1500.00
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11850.00
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