

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

FRIENDS OF WAYNE STATE

ADDRESS (number and street) PO BOX 44406

Check if different than previously reported. (ACC)

DETROIT MI 48244

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00452961

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 15 / 2019 through M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Trott, Taylor, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Trott, Taylor, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

FRIENDS OF WAYNE STATE

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="2019"/>		9146.49
(b) Cash on Hand at Beginning of Reporting Period.....	7886.69	
(c) Total Receipts (from Line 19)	2310.00	6810.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	10196.69	15956.49
7. Total Disbursements (from Line 31).....	3506.00	9265.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	6690.69	6690.69
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

FRIENDS OF WAYNE STATE

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

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).....	2310.00	6210.00
(ii) Unitemized	0.00	600.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2310.00	6810.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2310.00	6810.00
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)).....▶	2310.00	6810.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2310.00	6810.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1106.00	2665.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1106.00	2665.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	250.00	1750.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	2150.00	4850.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	3506.00	9265.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3506.00	9265.80

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	2310.00	6810.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2310.00	6810.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1106.00	2665.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1106.00	2665.80

**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 17
	<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	

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)
FRIENDS OF WAYNE STATE

A. Bank, Jason, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 Woodward Ave, Suite 2500

City Detroit	State MI	Zip Code 48226
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Kerr Russell Law Firm	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2019

Transaction ID : SA11AI.4572

Amount of Each Receipt this Period
50.00

Memo Item
PAC contribution

B. Bank, Jason, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 Woodward Ave, Suite 2500

City Detroit	State MI	Zip Code 48226
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Kerr Russell Law Firm	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2019

Transaction ID : SA11AI.4575

Amount of Each Receipt this Period
50.00

Memo Item
PAC contribution

C. Bank, Jason, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 Woodward Ave, Suite 2500

City Detroit	State MI	Zip Code 48226
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Kerr Russell Law Firm	Occupation (for Individual) Attorney
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2019

Transaction ID : SA11AI.4579

Amount of Each Receipt this Period
50.00

Memo Item
contribution

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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:	PAGE 7 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
FRIENDS OF WAYNE STATE

A. Bank, Jason, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 Woodward Ave, Suite 2500

City Detroit	State MI	Zip Code 48226
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Kerr Russell Law Firm	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2019

Transaction ID : SA11AI.4583

Amount of Each Receipt this Period
50.00

Memo Item contribution

B. Lindsey, Patrick, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17165 Parkside

City Detroit	State MI	Zip Code 48221
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Wayne State University	Occupation (for Individual) Administrator
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	05	/	2019

Transaction ID : SA11AI.4573

Amount of Each Receipt this Period
100.00

Memo Item PAC contribution

C. Lindsey, Patrick, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17165 Parkside

City Detroit	State MI	Zip Code 48221
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Wayne State University	Occupation (for Individual) Administrator
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2019

Transaction ID : SA11AI.4577

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 17
<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)
FRIENDS OF WAYNE STATE

A. Lindsey, Patrick, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17165 Parkside

City Detroit	State MI	Zip Code 48221
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Wayne State University	Occupation (for Individual) Administrator
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2019

Transaction ID : SA11AI.4580

Amount of Each Receipt this Period
100.00

Memo Item

B. Lindsey, Patrick, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17165 Parkside

City Detroit	State MI	Zip Code 48221
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Wayne State University	Occupation (for Individual) Administrator
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2019

Transaction ID : SA11AI.4584

Amount of Each Receipt this Period
100.00

Memo Item contribution

C. Lindsey, Patrick, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17165 Parkside

City Detroit	State MI	Zip Code 48221
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Wayne State University	Occupation (for Individual) Administrator
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2019

Transaction ID : SA11AI.4587

Amount of Each Receipt this Period
100.00

Memo Item contribution

SUBTOTAL of Receipts This Page (optional).....	300.00
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 9 OF 17
<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)
FRIENDS OF WAYNE STATE

A. Rosenberg, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31800 Nottingham Drive
 City Franklin State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 08 / 14 / 2019
Transaction ID : SA11AI.4574
 Amount of Each Receipt this Period 200.00
 Memo Item
 PAC contribution

B. Rosenberg, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31800 Nottingham Drive
 City Franklin State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 14 / 2019
Transaction ID : SA11AI.4578
 Amount of Each Receipt this Period 200.00
 Memo Item
 PAC contribution

C. Rosenberg, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31800 Nottingham Drive
 City Franklin State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 10 / 14 / 2019
Transaction ID : SA11AI.4582
 Amount of Each Receipt this Period 200.00
 Memo Item
 contribution

SUBTOTAL of Receipts This Page (optional).....	600.00
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 10 OF 17
	<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)
FRIENDS OF WAYNE STATE

A. Rosenberg, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31800 Nottingham Drive
 City Franklin State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 17 / 2019
Transaction ID : SA11AI.4586
 Amount of Each Receipt this Period 200.00
 Memo Item contribution

B. Rosenberg, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31800 Nottingham Drive
 City Franklin State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 12 / 14 / 2019
Transaction ID : SA11AI.4589
 Amount of Each Receipt this Period 200.00
 Memo Item contribution

C. Skrzyniarz, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 802 Shady Hollow Circle
 City Bloomfield Hills State MI Zip Code 48304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Instructor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 03 / 2019
Transaction ID : SA11AI.4576
 Amount of Each Receipt this Period 310.00
 Memo Item PAC contribution

SUBTOTAL of Receipts This Page (optional).....▶	710.00
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 11 OF 17
<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)
FRIENDS OF WAYNE STATE

A. Skrzyniarz, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 802 Shady Hollow Circle
 City Bloomfield Hills State MI Zip Code 48304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Instructor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 07 / 2019
Transaction ID : SA11AI.4581
 Amount of Each Receipt this Period 100.00
 Memo Item contribution

B. Skrzyniarz, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 802 Shady Hollow Circle
 City Bloomfield Hills State MI Zip Code 48304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Instructor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 11 / 07 / 2019
Transaction ID : SA11AI.4585
 Amount of Each Receipt this Period 100.00
 Memo Item contribution

C. Skrzyniarz, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 802 Shady Hollow Circle
 City Bloomfield Hills State MI Zip Code 48304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Instructor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 12 / 07 / 2019
Transaction ID : SA11AI.4588
 Amount of Each Receipt this Period 100.00
 Memo Item contribution

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	2310.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

Full Name (Last, First, Middle Initial)

A. Inland Press

Mailing Address 2001 Lafayette Blvd

City Detroit State MI Zip Code 48216

Purpose of Disbursement printing mailing materials

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 20 / 2019

FEC Identification Number C

Transaction ID : SB21B.4526

Amount of Each Disbursement this Period 477.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Nationbuilder

Mailing Address 520 S. Grand Aveue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement operating expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 07 / 22 / 2019

FEC Identification Number C

Transaction ID : SB21B.4595

Amount of Each Disbursement this Period 59.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Nationbuilder

Mailing Address 520 S. Grand Aveue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement operating expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 20 / 2019

FEC Identification Number C

Transaction ID : SB21B.4594

Amount of Each Disbursement this Period 59.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 595.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

Full Name (Last, First, Middle Initial)

A. Nationbuilder

Mailing Address 520 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement operating expense

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 20 / 2019

FEC Identification Number

Transaction ID : SB21B.4593
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Nationbuilder

Mailing Address 520 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement operating expense

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
10 / 21 / 2019

FEC Identification Number

Transaction ID : SB21B.4592
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Nationbuilder

Mailing Address 520 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement operating expense

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
11 / 20 / 2019

FEC Identification Number

Transaction ID : SB21B.4591
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

A. Nationbuilder

Full Name (Last, First, Middle Initial)

Mailing Address 520 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement operating expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 20 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4590

Amount of Each Disbursement this Period: 59.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	59.00
TOTAL This Period (last page this line number only).....▶	831.00

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

A. Walberg for Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1362

City Jackson State MI Zip Code 49204

Purpose of Disbursement contribution
Candidate Name **Walberg for Congress**
Office Sought: House Senate President
State: MI District: 07

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 23 / 2019

FEC Identification Number: C C00390724
Transaction ID : **SB23.4531**
Amount of Each Disbursement this Period: 250.00

Category/Type: 011

Memo Item

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: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Category/Type

Memo Item

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: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Category/Type

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

Full Name (Last, First, Middle Initial)

A. Committee to Elect Tenisha Yancey

Mailing Address PO Box 36522

City Grosse Pointe State MI Zip Code 48236

Purpose of Disbursement direct contribution

Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
09 / 08 / 2019

FEC Identification Number

Transaction ID : SB29.4560
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. House Republican Campaign Committee

Mailing Address PO Box 15035

City Lansing State MI Zip Code 48901

Purpose of Disbursement direct contribution

Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 11 / 2019

FEC Identification Number

Transaction ID : SB29.4533
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Senate Republican Campaign Committee

Mailing Address PO Box 12023

City Lansing State MI Zip Code 48901

Purpose of Disbursement direct contribution

Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 12 / 2019

FEC Identification Number

Transaction ID : SB29.4536
Amount of Each Disbursement this Period

Memo Item

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

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

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

Full Name (Last, First, Middle Initial)

A. Whiteford Leadership Fund

Mailing Address 404 Broadway Street

City
South Haven

State
MI

Zip Code
49090

Purpose of Disbursement
event ticket

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2019

FEC Identification Number

C []

Transaction ID : SB29.4602

Amount of Each Disbursement this Period

[] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

[] 500.00

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

[] 1750.00