

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2018 NOV 29 AM 11:19 Office Use Only

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

MICHIGAN DEMOCRATIC PARTY 6TH DISTRICT  
FEDERAL COMMITTEE

ADDRESS (number and street) 1914 FOREST DR  
 Check if different than previously reported. (ACC) PORTAGE MI 49002

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C00590455

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 checked="" 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 /            in the State of           

- (d) 30-Day POST-Election Report for the:
- |   |                                       |  |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on 11 / 06 / 2018 in the State of MI

5. Covering Period 10 / 01 / 2018 through 11 / 26 / 2018

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 Meredith Place

Signature of Treasurer Meredith Place Date 11 / 29 / 2018

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

Office Use Only							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Michigan Democratic Party 6<sup>th</sup> District Federal Committee

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="2018"/>		<input type="text" value="8,293.13"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1,141.14"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="30.00"/>	<input type="text" value="555.00"/>
(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="1,141.14"/>	<input type="text" value="8,848.13"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1,099.20"/>	<input type="text" value="8,806.19"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="41.94"/>	<input type="text" value="41.94"/>
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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

*Michigan Democratic Party 6<sup>th</sup> District Federal Committee*

Report Covering the Period: From:

*10 / 01 / 2018*

To:

*11 / 26 / 2018*

**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).....

*30.00*

*555.00*

(ii) Unitemized .....

*0.00*

*0.00*

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

*30.00*

*555.00*

(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) .....

*30.00*

*555.00*

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)).....▶

*30.00*

*555.00*

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

*30.00*

*555.00*

COMMISSIONER OF REVENUE

**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	6.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1.20	<del>8.19</del> 8.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1.20	8.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	7,700.00
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).....	1,098.00	1,098.00
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 .....	6.00	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)) .....	1,099.20	8,806.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1.20	7,708.19

NON-FEDERAL DONATIONS

**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) .....	30.00	555.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30.00	555.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1.20	8.19
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1.20	8.19

NONDISBURSEMENT

**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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)  
*Michigan Democratic Party 6<sup>th</sup> District Federal Commi Hee*

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
*Sahu, Saura*

Mailing Address  
*2513 Outlook*

City *Kalamazoo* State *MI* Zip Code *49001*

FEC ID number of contributing federal political committee.  C

Name of Employer (for Individual) *Clancy PC* Occupation (for Individual) *Lawyer*

Receipt For:  
 Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ *100.00*

Date of Receipt  
*10 / 18 / 2018*

Amount of Each Receipt this Period  
*10.00*

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
*Pierman, Bette*

Mailing Address  
*2033 Paw Paw Ave*

City *Benton Harbor* State *MI* Zip Code *49022*

FEC ID number of contributing federal political committee.  C

Name of Employer (for Individual) Occupation (for Individual) *NOT EMPLOYED*

Receipt For:  
 Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ *70.00*

Date of Receipt  
*10 / 30 / 2018*

Amount of Each Receipt this Period  
*10.00*

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
*Sahu, Saura*

Mailing Address  
*2513 Outlook*

City *Kalamazoo* State *MI* Zip Code *49001*

FEC ID number of contributing federal political committee.  C

Name of Employer (for Individual) *Clancy PC* Occupation (for Individual) *Lawyer*

Receipt For:  
 Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ *110.00*

Date of Receipt  
*11 / 18 / 2018*

Amount of Each Receipt this Period  
*10.00*

Memo Item

SUBTOTAL of Receipts This Page (optional) ..... ▶ *300.00*

TOTAL This Period (last page this line number only) ..... ▶ *300.00*

2018-11-15 10:00:00 AM

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF	
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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NAME OF COMMITTEE (In Full)  
*Michigan Democratic Party 6<sup>th</sup> District Federal Committee*

**A.** Full Name (Last, First, Middle Initial) *Act Blue*

Mailing Address *PO Box 44146*

City *Somerville* State *MA* Zip Code *02144-0051*

Purpose of Disbursement *Actblue merchant fees - October* Category/Type *001*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement *10 / 30 / 2018*

FEC Identification Number *C*

Amount of Each Disbursement this Period *0.80*

Memo Item

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

Mailing Address *PO Box 44146*

City *Somerville* State *MA* Zip Code *02144-0031*

Purpose of Disbursement *Actblue merchant fees - November* Category/Type *001*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement *11 / 18 / 2018*

FEC Identification Number *C*

Amount of Each Disbursement this Period *0.90*

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).....▶ *1.20*

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

ACCEPTED FOR DEPOSIT

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF	
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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NAME OF COMMITTEE (In Full)  
*Michigan Democratic Party 6th District Federal Committee*

A. *St. Joseph County Democratic Party*

Date of Disbursement: *10 / 12 / 2018*

Mailing Address: *73 N Main*

City: *Three Rivers* State: *MI* Zip Code: *49093*

Purpose of Disbursement:  C

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: \_\_\_\_\_

Amount of Each Disbursement this Period: *183.00*

Memo Item

B. *Van Buren County Democratic Party*

Date of Disbursement: *10 / 12 / 2018*

Mailing Address: *202 A E Michigan Ave*

City: *Paw Paw* State: *MI* Zip Code: *49079*

Purpose of Disbursement:  C

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: \_\_\_\_\_

Amount of Each Disbursement this Period: *183.00*

Memo Item

C. *Berrien County Democratic Party*

Date of Disbursement: *10 / 12 / 2018*

Mailing Address: *2517 Niles Ave*

City: *St Joseph* State: *MI* Zip Code: *49085*

Purpose of Disbursement:  C

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: \_\_\_\_\_

Amount of Each Disbursement this Period: *183.00*

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... *549.00*

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)						PAGE	OF	
	<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 type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
*Michigan Democratic Party 6<sup>th</sup> District Federal Committee*

Full Name (Last, First, Middle Initial) A. <i>Kalamazoo County Democratic Party</i>			Date of Disbursement MM / DD / YYYY <i>10 / 12 / 2018</i>		
Mailing Address <i>3254 Westridge Ave</i>			FEC Identification Number <i>C</i>		
City <i>Kalamazoo</i>	State <i>MI</i>	Zip Code <i>49008</i>	Amount of Each Disbursement this Period <i>183.00</i>		
Purpose of Disbursement			Memo Item <input type="checkbox"/>		
Candidate Name			Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) B. <i>Allegan County Democratic Party</i>			Date of Disbursement MM / DD / YYYY <i>10 / 12 / 2018</i>		
Mailing Address <i>315 Hubbard St</i>			FEC Identification Number <i>C</i>		
City <i>Allegan</i>	State <i>MI</i>	Zip Code <i>49010</i>	Amount of Each Disbursement this Period <i>183.00</i>		
Purpose of Disbursement			Memo Item <input type="checkbox"/>		
Candidate Name			Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) C. <i>Cass County Democratic Party</i>			Date of Disbursement MM / DD / YYYY <i>10 / 12 / 2018</i>		
Mailing Address <i>804 E State St</i>			FEC Identification Number <i>C</i>		
City <i>Cassopolis</i>	State <i>MI</i>	Zip Code <i>49031</i>	Amount of Each Disbursement this Period <i>183.00</i>		
Purpose of Disbursement			Memo Item <input type="checkbox"/>		
Candidate Name			Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....▶	<i>549.00</i>
TOTAL This Period (last page this line number only).....▶	<i>1,099.20</i>

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Label 229, March 2016

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

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<input checked="" type="checkbox"/> USPS Priority Mail	Postmarked 11-26-18
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*mf*  
 PREPARER

11-29-18  
 DATE PREPARED

20181129 11:00:00 AM