

# 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**  
**MISSION FIRST PEOPLE ALWAYS PAC**

ADDRESS (number and street) **PO BOX 585**  
Check if different than previously reported. (ACC) **ST. CLAIR SHORES MI 48080**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00774588** 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  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2024 through  /  /  2024

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 **QUICK, KIRSTEN, , ,**

Signature of Treasurer **QUICK, KIRSTEN, , ,** Date  /  /  2024

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

**MISSION FIRST PEOPLE ALWAYS PAC**

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="2024"/>		<input type="text" value="32225.54"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="24185.85"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="32282.76"/>	<input type="text" value="32514.76"/>
(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="56468.61"/>	<input type="text" value="64740.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="31828.10"/>	<input type="text" value="40099.79"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="24640.51"/>	<input type="text" value="24640.51"/>
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 the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

MISSION FIRST PEOPLE ALWAYS PAC

Report Covering the Period: From: 03 / 05 / 2024 To: 03 / 31 / 2024

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).....	0.00	0.00
(ii) Unitemized .....	116.00	348.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	116.00	348.00
(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) .....	116.00	348.00
12. Transfers From Affiliated/Other Party Committees.....	32166.76	32166.76
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)).....▶	32282.76	32514.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	32282.76	32514.76

**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 .....	9328.10	17599.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9328.10	17599.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	22500.00
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).....	0.00	0.00
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)) ..	31828.10	40099.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31828.10	40099.79

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	116.00	348.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	116.00	348.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	9328.10	17599.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9328.10	17599.79

# 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 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. JOHN JAMES FOR MICHIGAN**

Mailing Address P.O. BOX 628

City ST. CLAIR SHORES	State MI	Zip Code 48080-0628
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00806612

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32166.76

Date of Receipt  
MM / DD / YYYY  
03 / 11 / 2024

**Transaction ID : SA12.298010**

Amount of Each Receipt this Period  
32166.76

Memo Item  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DEVOS, DANIEL, G., ,**

Mailing Address 126 OTTAWA AVENUE NW  
STE 500

City GRAND RAPIDS	State MI	Zip Code 49503-2882
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RDV CORPORATION	Occupation (for Individual) EXECUTIVE
------------------------------------------------------	------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 30 / 2024

**Transaction ID : SA.270419.3.Q124**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM JJ4MI

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

Mailing Address 126 OTTAWA AVE NW  
STE 500

City GRAND RAPIDS	State MI	Zip Code 49503-2882
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RDV CORPORATION	Occupation (for Individual) EXECUTIVE
------------------------------------------------------	------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 29 / 2024

**Transaction ID : SA.270418.3.Q124**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM JJ4MI

<b>SUBTOTAL</b> of Receipts This Page (optional).....	32166.76
<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 7 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. FRANKLIN, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12500 SAN PEDRO AVE  
 City SAN ANTONIO State TX Zip Code 78216-2858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **01 / 05 / 2024**  
**Transaction ID : SA.262465.3.Q124**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM JJ4MI

**B. GROFF, SUSAN, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9832 CALVIN AVE  
 City NORTHRIDGE State CA Zip Code 91324-1619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2890.00

Date of Receipt **01 / 25 / 2024**  
**Transaction ID : SA.268132.3.Q124**  
 Amount of Each Receipt this Period 2890.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM JJ4MI

**C. JAMES, JOHN, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27945 W 14 MILE RD  
 City FARMINGTON HILLS State MI Zip Code 48334-1816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JAMES GROUP INTERNATIONAL Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA.266418.3.Q124**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 2023 AGGREGATE; TRANSFER FROM JJ4MI

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 8 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. JAMES, SHARON, N., ,**

Mailing Address **27945 W 14 MILE RD**

City <b>FARMINGTON HILLS</b>	State <b>MI</b>	Zip Code <b>48334-1816</b>
---------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>HOMEMAKER</b>	Occupation (for Individual) <b>HOMEMAKER</b>
-------------------------------------------------------	-------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**12 / 31 / 2023**

**Transaction ID : SA.266417.3.Q124**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**TRANSFER**

**2023 AGGREGATE; TRANSFER FROM JJ4MI**

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

Mailing Address **4740 DOW RIDGE ROAD**

City <b>ORCHARD LAKE</b>	State <b>MI</b>	Zip Code <b>48324-2327</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>DKW10</b>	Occupation (for Individual) <b>FOUNDER</b>
---------------------------------------------------	-----------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**12 / 28 / 2023**

**Transaction ID : SA.259262.3.Q124**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**TRANSFER**

**2023 AGGREGATE; TRANSFER FROM JJ4MI**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KARMANOS, PETER, , , JR.**

Mailing Address **4740 DOW RIDGE ROAD**

City <b>ORCHARD LAKE</b>	State <b>MI</b>	Zip Code <b>48324-2327</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>MADDOG TECHNOLOGY</b>	Occupation (for Individual) <b>CHAIRMAN</b>
---------------------------------------------------------------	------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**12 / 28 / 2023**

**Transaction ID : SA.259263.3.Q124**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**TRANSFER**

**2023 AGGREGATE; TRANSFER FROM JJ4MI**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>0.00</b>
<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 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. MOSS, DIANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3525 TURTLE CREEK BOULEVARD  
 APT 12A  
 City DALLAS State TX Zip Code 75219-5513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 05 / 2024  
**Transaction ID : SA.293128.3.Q124**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM JJ4MI

**B. POPOLO, JOSEPH, VICTOR, , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9002 DOUGLAS AVENUE  
 City DALLAS State TX Zip Code 75225-3009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHARLES & POTOMAC CAPITAL Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 19 / 2023  
**Transaction ID : SA.184113.3.Q124**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 TRANSFER  
 2023 AGGREGATE; TRANSFER FROM JJ4MI

**C. ROSE, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6632 TELEGRAPH RD  
 # 355  
 City BLOOMFIELD HILLS State MI Zip Code 48301-3012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 20 / 2023  
**Transaction ID : SA.249738.3.Q124**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 2023 AGGREGATE; TRANSFER FROM JJ4MI

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SCHWARZMAN, STEPHEN, A., ,</b>		Date of Receipt MM / DD / YYYY 02 / 29 / 2024 <b>Transaction ID : SA.280761.3.Q124</b>
Mailing Address 345 PARK AVE		Amount of Each Receipt this Period 5000.00
City NEW YORK	State NY	Zip Code 10154-0004
FEC ID number of contributing federal political committee. C		<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) BLACKSTONE	Occupation (for Individual) CHAIRMAN	TRANSFER FROM JJ4MI
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SMITH, SHERRY, V., ,</b>		Date of Receipt MM / DD / YYYY 03 / 05 / 2024 <b>Transaction ID : SA.293129.3.Q124</b>
Mailing Address 5610 BRIAR DRIVE		Amount of Each Receipt this Period 3400.00
City HOUSTON	State TX	Zip Code 77056-1004
FEC ID number of contributing federal political committee. C		<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	TRANSFER FROM JJ4MI
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. VOZZA, MARTHA, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 30 / 2023 <b>Transaction ID : SA.62781.3.Q124</b>
Mailing Address 1 CORPORATE WAY		Amount of Each Receipt this Period 900.00
City LANSING	State MI	Zip Code 48951-1001
FEC ID number of contributing federal political committee. C		<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	2023 AGGREGATE; TRANSFER FROM JJ4MI
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 11 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
WHITE, LYNN, T., ,

Mailing Address 1337 BALLYBUNION CT SE

City GRAND RAPIDS	State MI	Zip Code 49546-3800
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12	/	14	/	2023

**Transaction ID : SA.257683.3.Q124**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER

2023 AGGREGATE; TRANSFER FROM JJ4MI

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

Mailing Address 2280 E WEST MAPLE RD

City COMMERCE TOWNSHIP	State MI	Zip Code 48390-3828
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) WI	Occupation (for Individual) EXECUTIVE
-----------------------------------------	------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	14	/	2024

**Transaction ID : SA.276379.3.Q124**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM JJ4MI

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	32166.76

# 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

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)

**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

### A. CMDI

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22812

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	4

FEC Identification Number

**C** [Redacted]

Transaction ID : SB21B.I4945

Amount of Each Disbursement this Period

[Redacted] 5.25

Memo Item

Full Name (Last, First, Middle Initial)

### B. AMERICAN EXPRESS

Mailing Address 200 VESEY STREET

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** [Redacted]

Transaction ID : SB21B.I4960

Amount of Each Disbursement this Period

[Redacted] 5458.47

Memo Item

Full Name (Last, First, Middle Initial)

### C. DELTA AIRLINES

Mailing Address CORPORATE HQ  
1030 DELTA BLVD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** [Redacted]

Transaction ID : SB21B.I4963

Amount of Each Disbursement this Period

[Redacted] 4624.80

Memo Item

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

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

[Redacted] 5463.72

[Redacted]

# 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

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)

**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

### A. SRODEKS QUALITY POLISH FOODS

Mailing Address 40211 MOUND RD

City  
STERLING HEIGHTS

State  
MI

Zip Code  
48310

Purpose of Disbursement  
FOOD / BEVERAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4966

Amount of Each Disbursement this Period

[REDACTED] 404.23

Memo Item

Full Name (Last, First, Middle Initial)

### B. CMDI

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City  
TYSONS CORNER

State  
VA

Zip Code  
22812

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4946

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. CROSBY OTTENHOFF GROUP

Mailing Address 611 PENNSYLVANIA AVE SE  
STE 267

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4947

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

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

[REDACTED] 2250.00

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

[REDACTED]

# 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

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)

**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

**A. DICKINSON WRIGHT PLLC**

Mailing Address 1825 EYE STREET, N.W. SUITE 900

City  
WASHINGTON

State  
DC

Zip Code  
20006

Purpose of Disbursement

LEGAL FEES

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9					

FEC Identification Number

C

**Transaction ID : SB21B.I4948**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

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

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

1500.00

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

9213.72

# 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"/> 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

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)

**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

### A. TRUMP SAVE AMERICA JFC

Mailing Address PO BOX 13570

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	2	4

FEC Identification Number

**C** C00770941

**Transaction ID : SB23.I4967**

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. SALAZAR FOR CONGRESS

Mailing Address 3725 WEST FLAGLER STREET #281

City  
MIAMI

State  
FL

Zip Code  
33134

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

SALAZAR, MARIA, ELVIRA, ,

Office Sought:

<input checked="" type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: FL District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	4

FEC Identification Number

**C** C00714261

**Transaction ID : SB23.I4968**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. SCOTT BAUGH FOR CONGRESS

Mailing Address 4040 MACARTHUR BLVD SUITE 200

City  
NEWPORT BEACH

State  
CA

Zip Code  
92660

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

BAUGH, SCOTT, , ,

Office Sought:

<input checked="" type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: CA District: 47

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

**C** C00798322

**Transaction ID : SB23.I4971**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

17500.00

# 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

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)

**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

### A. TONY GONZALES FOR CONGRESS

Mailing Address PO BOX 700442

City  
SAN ANTONIO

State  
TX

Zip Code  
78270

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

GONZALES, ERNEST ANTHONY, TONY, , II

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: TX District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2024

FEC Identification Number

**C** C00706614

**Transaction ID : SB23.I4970**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. VICTORIA SPARTZ FOR CONGRESS

Mailing Address PO BOX 505

City  
NOBLESVILLE

State  
IN

Zip Code  
46061

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

SPARTZ, VICTORIA, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: IN District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2024

FEC Identification Number

**C** C00737767

**Transaction ID : SB23.I4969**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C.

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

M M M	/	D D D	/	Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

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

5000.00

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

22500.00