14 05 0000 M415

FE7AN014

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

2016 JUL 14 AH 9: L

Office Use Only TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 COMMITTEE (in full) over the lines. II,n, O,u,r, Mothers, Name Willson, Avenue ADDRESS (number and street) Check if different than previously M II 4 | 9 | 4 | 4 | 1 | - | 3 | 0 | 4 | 0 reported. (ACC) Mı uı sı kı eı gı oı nı CITY A STATE A ZIP CODE ▲ FEC IDENTIFICATION NUMBER ▼ NEW **AMENDED** 3. IS THIS 5 2 6 2 4 REPORT (N) OR (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Jan 31: (YE) Apr 20 (M4) Jul; 20 (M7) Oct 20 (M10) " April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) **PRE-**Election Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) 1... October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the:. Termination Report M in the (TER) Election on State of Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Julia Dennis Type or Print Name of Treasurer Signature of Treasurer Date 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 FEC FORM 3X Use Rev. 12/2004 Only

SUMMARY	PAGE
OF RECEIPTS AND DIS	SBURSEMENTS

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	
Write or Type Committee Name		
In Our Mothers Name		
Report Covering the Period: From:	0 4 0 1 2 0 1 6	To: 0 6 3 0 2 0 1 6
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2 0 1 6		9,8,1,0
(b) Cash on Hand at Beginning of Reporting Period	9810	·
(c) Total Receipts (from Line 19)	0_0_0	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	9810	9810
7. Total Disbursements (from Line 31)	9810	9810
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	. 0 0 0	0 0 0
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0 0 0	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0 0 0	
This committee has qualified as a mu	ulticandidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	T !! F	

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

FE6AN026

20-6-07-14-0M-0000001-5

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 06/2004)	of Receipt	s		Page 3
W	rite or Type Committee Name				
	In Our Mothers Name			·	
Re	eport Covering the Period: From: 0 4	' 0 1 ' 2 0	1 6 To:	0 6 3 0	2 0 1 6
	I. Receipts	COLU Total This		COLUMN Calendar Year-t	
	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)				0 0 0
13.	All Loans Received		0		0
	Loan Repayments Received		0		0
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		0		0
17.	Political Committees Other Federal Receipts		0		0
18.	(Dividends, Interest, etc.)		0		0
	(b) Levin Funds (from Schedule H5)		0		0
	(c) Total Transfers (add 18(a) and 18(b))		0		
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶		0		0
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶		0		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tills Pellou	Calendar Year-to-Date
	(i) Federal Share	0	0
	(ii) Non-Federal Share	<u> </u>	0
	(b) Other Federal Operating		
	Expenditures	0	0
	(c) Total Operating Expenditures		
00	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	U	0
22.	Committees	0	0
23.	Contributions to Federal Candidates/Committees		
	and Other Political Committees		
	Independent Expenditures		
25	(use Schedule E)	0	
	(52 U.S.C. § 30116(d)) (use Schedule F)	0	0
	(use scriedule i)		
26.	Loan Repayments Made	0	0
27. 28	Loans MadeRefunds of Contributions To:	0	0
20.	(a) Individuals/Persons Other		9 9 1 0
	Than Political Committees	9 8 1 0	
	(b) Political Party Committees	0	0
	(c) Other Political Committees		
	(such as PACs)	0	0
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	9 8 1 0	9810
29.	Other Disbursements	0	0
30.	Federal Election Activity (52 U.S.C. § 30101(20))	
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share	0	
	(ii) "Levin" Share	0	0
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0	0
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0	
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	9 8_1 0	9 8 1 0
32	Total Federal Disbursements		
J	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	0	0

(from Line 15, page 3).....

(subtract Line 37 from Line 36)

38. Net Operating Expenditures

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of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 **COLUMN A** III. Net Contributions/Operating Ex-**COLUMN B Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶ 37. Offsets to Operating Expenditures

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 1 (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) In Our Mothers Name	may not be sold or used by any pe d address of any political committee	erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mailing Address City State FEC ID number of contributing federal political committee. Name of Employer Occupat Receipt For: Primary General Other (specify) Aggregation	Zip Code tion ate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) B. Mailing Address City State FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼ Aggregat		Date of Receipt Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) C. Mailing Address City State FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Primary General Other (specify) Other (specify)		Date of Receipt Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	•	0
TOTAL This Period (last page this line number only)		0

01	CHEDULE B (FEC Form 3X)										_
	7	Use separate schedule(s)	FOR LINE NUMBER: PAGE 1			<u> </u>					
ΙT	EMIZED DISBURSEMENTS	for each category of the	the (Check Only One)		٦	=	_				
		Detailed Summary Page		21b	22	23	24		25		
				27	28a	28b	28	sc	29	30	0ъ
	ny information copied from such Reports and Statem for commercial purposes, other than using the name										
$\overline{}$	NAME OF COMMITTEE (In Full)										_
\rangle	In Our Mothers Name										
	Full Name (Last, First, Middle Initial)										_
Α.	Dennis, Julia B.				Date of	Disburs	ement		7 . 7	r V	
	Mailing Address 739 Wilson Avenue				0 6	2,	9	2	0_1	6	
	City	State Zip Code									
	Muskegon MI	49441									
	Purpose of Disbursement			-							
-	Refund partial contribution to close contribution contribution to close contribution contribution contribution contribution contribution contribution contribution contribution	ommittee	0.1 Categ	jory/	Amount	of Each			nt this		
	Office Sought: House Disbursen	nent For:	יאָרי	-	· · · · · ·			13		<u> </u>	4
	Senate	Primary General Other (specify) ▼								٠	
	State: District:										
_	Full Name (Last, First, Middle Initial)										
В.					Date of	Disburs	ement	Y	Y		
	Mailing Address										
	City	State Zip Code									
	Purpose of Disbursement			A A Factor Div		Diebur	isbursement this Period				
	Candidate Name				Amount	UI Eacii	DISDUI	Seme	11 (IIIS	renou	7
	Candidate Name		Categ Typ			L		T3		3_A	
	Office Sought: House Disbursen	nent For:									_
	Senate	Primary General									
	President	Other (specify) ▼									
	State: District:										
_	Full Name (Last, First, Middle Initial)										
C.					Date of	Disburs	ement	7	V • V	7 Y	
	Mailing Address							L.			
	City	State Zip Code			-	····	,,				
	Purpose of Disbursement			_							
	Candidate Name				Amount	of Each	Disbur	seme	nt this	Period	_
	Candidate Name		Cated Typ					W W		2 2	1
	Office Sought: House Disbursen	nent For:	171							Th	1
	Senate	Primary General									
	President	Other (specify) ▼									
	State: District:	· · · · ·		İ							
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٤	SUBTOTAL of Disbursements This Page (optional)			···· >					9 8	1 0	
י	TOTAL This Period (last page this line number only)			···· ▶					9 8	_1_0	

2016 JUL

MUSKGON, MI 49441 IN OUR MOTHERS NAME 739 WILSON AVENUE

WASHINGTON, DC 20463 999 E STREET NW FEDERAL ELECTIONS COMMISSION

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING E The FEC added this page to the end of this filing to indicate h	
Hand Delivered	Date of Receipt
USPS First Class Mail Postmarked 7/9/2016	Date of Receipt 7/14/2016
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	· ·
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
PREPARER (3/2015)	7/14/2016 DATE PREPARED
• /	