

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

Lance Enderle for Congress

ADDRESS (number and street)

P.O. Box 10029

Check if different than previously reported. (ACC)

Lansing

MI

48902-0029

2. **FEC IDENTIFICATION NUMBER**

C C00501734

CITY

STATE

ZIP CODE

STATE DISTRICT

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

MI

08

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)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on MM / DD / YYYY in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY  
04 / 01 / 2012

through

MM / DD / YYYY  
06 / 30 / 2012

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 Lance Enderle

Signature of Treasurer Lance Enderle

[Electronically Filed]

Date

MM / DD / YYYY  
07 / 31 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Lance Enderle for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2012 To: M M / D D / Y Y Y Y 06 / 30 / 2012

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	2025.00	2025.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	2025.00	2025.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	7509.52	7509.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	7509.52	7509.52
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>755.87</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>14198.00</b>	

**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 3 (Revised 12/2003)

Write or Type Committee Name

**Lance Enderle for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1550.00	1550.00
(ii) Unitemized.....	475.00	475.00
(iii) TOTAL of contributions from individuals ▶	2025.00	2025.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	2025.00	2025.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	6150.00	6150.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	8175.00	8175.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7509.52	7509.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	7509.52	7509.52

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	90.39
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8175.00
25. SUBTOTAL (add Line 23 and Line 24).....	8265.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7509.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	755.87

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Lance Enderle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kathy Carney</b>		Date of Receipt MM / DD / YYYY 06 / 22 / 2012
Mailing Address 6294 Kinyon		<b>Transaction ID : SA11AI.4103</b>
City Brighton	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation Retired	Election Cycle-to-Date 250.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Jill Thurtell</b>		Date of Receipt MM / DD / YYYY 05 / 15 / 2012
Mailing Address 130 E Kilborn St		<b>Transaction ID : SA11AI.4101</b>
City Lansing	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1050.00
Name of Employer self employed	Occupation self employed	Election Cycle-to-Date 1050.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Isabella Yardley</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2012
Mailing Address 482 Forest Dr		<b>Transaction ID : SA11AI.4117</b>
City Brighton	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation retired	Election Cycle-to-Date 250.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	1550.00

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

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

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

**A. April Fundraiser 4/15/2012**

Full Name (Last, First, Middle Initial)  
Mailing Address n/a

City n/a State MI Zip Code

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

Name of Employer n/a Occupation n/a

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : SA15.4185**

Amount of Each Receipt this Period  
 2300.00

Total for April of anonymous donations of \$50 or less

**B. May Fundraiser 5/20/2012**

Full Name (Last, First, Middle Initial)  
Mailing Address n/a

City n/a State MI Zip Code

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

Name of Employer n/a Occupation n/a

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2012

**Transaction ID : SA15.4187**

Amount of Each Receipt this Period  
 1700.00

Total for May of anonymous donations of \$50 or less

**C. June Fundraiser 6/28/2012**

Full Name (Last, First, Middle Initial)  
Mailing Address n/a

City n/a State MI Zip Code

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

Name of Employer n/a Occupation n/a

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA15.4191**

Amount of Each Receipt this Period  
 1650.00

Total for June of anonymous donations of \$50 or less

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

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

5650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Early June Fundraiser 6/3/2012**

Mailing Address n/a

City n/a State MI Zip Code

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

Name of Employer n/a Occupation n/a

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2012

**Transaction ID : SA15.4189**

Amount of Each Receipt this Period  
500.00

Total for June 3rd fundraiser of anonymous donations of \$50 or less

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

6150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 19			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Blodgett Oil</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2012
Mailing Address 1700 Waverly Rd		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : SB17.4145</b>
City Lansing	State MI	
Zip Code 48917	Purpose of Disbursement 002	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>B. Blodgett Oil</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2012
Mailing Address 1700 Waverly Rd		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : SB17.4148</b>
City Lansing	State MI	
Zip Code 48917	Purpose of Disbursement 002	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>c. Blodgett Oil</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2012
Mailing Address 1700 Waverly Rd		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : SB17.4149</b>
City Lansing	State MI	
Zip Code 48917	Purpose of Disbursement 002	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	180.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Blodgett Oil</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2012
Mailing Address 1700 Waverly Rd		Amount of Each Disbursement this Period 42.00 <b>Transaction ID : SB17.4164</b>
City Lansing	State MI	
Zip Code 48917	Purpose of Disbursement 002	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>B. Blodgett Oil</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2012
Mailing Address 1700 Waverly Rd		Amount of Each Disbursement this Period 55.05 <b>Transaction ID : SB17.4168</b>
City Lansing	State MI	
Zip Code 48917	Purpose of Disbursement 002	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>c. Brainwrap Website Design</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2012
Mailing Address 3711 Thornbriar Way		Amount of Each Disbursement this Period 1700.00 <b>Transaction ID : SB17.4194</b>
City Bloomfield Hills	State MI	
Zip Code 48302	Purpose of Disbursement 004	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1797.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2012
Mailing Address 41112 Concept Dr		Amount of Each Disbursement this Period 144.59 <b>Transaction ID : SB17.4159</b>
City Plymouth	State MI	
Zip Code 48170	Purpose of Disbursement 001	Category/ Type
Candidate Name <b>Lance Enderle for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>B. Credo Mobile</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2012
Mailing Address PO Box 480010		Amount of Each Disbursement this Period 145.00 <b>Transaction ID : SB17.4170</b>
City Atlanta	State GA	
Zip Code 30346	Purpose of Disbursement 001	Category/ Type
Candidate Name <b>Lance Enderle for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>c. Gone Wired Cafe</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2012
Mailing Address 2021 E Michigan Ave		Amount of Each Disbursement this Period 170.00 <b>Transaction ID : SB17.4177</b>
City Lansing	State MI	
Zip Code 48912	Purpose of Disbursement 003	Category/ Type
Candidate Name <b>Lance Enderle for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	459.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 19			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

Full Name (Last, First, Middle Initial) <b>A. H &amp; H Mobil</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2012
Mailing Address 1500 Haslet Rd		Amount of Each Disbursement this Period 45.00 <b>Transaction ID : SB17.4161</b>
City East Lansing	State MI	
Zip Code 48823	Purpose of Disbursement 002	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>B. H &amp; H Mobil</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2012
Mailing Address 1500 Haslet Rd		Amount of Each Disbursement this Period 55.00 <b>Transaction ID : SB17.4153</b>
City East Lansing	State MI	
Zip Code 48823	Purpose of Disbursement 002	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>C. H &amp; H Mobil</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2012
Mailing Address 1500 Haslet Rd		Amount of Each Disbursement this Period 45.00 <b>Transaction ID : SB17.4175</b>
City East Lansing	State MI	
Zip Code 48823	Purpose of Disbursement 002	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	145.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Job Shop Ink, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address 2321 W Main St		Amount of Each Disbursement this Period 272.00 <b>Transaction ID : SB17.4135</b>
City Lansing	State MI	
Zip Code 48917	Purpose of Disbursement 006	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>B. Job Shop Ink, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2012
Mailing Address 2321 W Main St		Amount of Each Disbursement this Period 973.00 <b>Transaction ID : SB17.4193</b>
City Lansing	State MI	
Zip Code 48917	Purpose of Disbursement 006	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>c. Job Shop Ink, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 2321 W Main St		Amount of Each Disbursement this Period 675.00 <b>Transaction ID : SB17.4176</b>
City Lansing	State MI	
Zip Code 48917	Purpose of Disbursement 006	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1920.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 19			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michigan State University Computer Store</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2012
Mailing Address MI State Univ		Amount of Each Disbursement this Period 1233.84 <b>Transaction ID : SB17.4146</b>
City East Lansing	State MI	
Zip Code 48823	Purpose of Disbursement 001	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>B. Trowbridge Marathon</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2012
Mailing Address 1198 S Harrison Rd		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : SB17.4155</b>
City East Lansing	State MI	
Zip Code 48823	Purpose of Disbursement 002	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>c. Trowbridge Marathon</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2012
Mailing Address 1198 S Harrison Rd		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : SB17.4156</b>
City East Lansing	State MI	
Zip Code 48823	Purpose of Disbursement 002	
Candidate Name <b>Lance Enderle for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1353.84
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 19			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Trowbridge Marathon</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2012
Mailing Address 1198 S Harrison Rd		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.4158</b>
City East Lansing	State MI	
Purpose of Disbursement	Category/ Type 002	
Candidate Name <b>Lance Enderle for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>B. Trowbridge Marathon</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2012
Mailing Address 1198 S Harrison Rd		Amount of Each Disbursement this Period 45.00 <b>Transaction ID : SB17.4160</b>
City East Lansing	State MI	
Purpose of Disbursement	Category/ Type 002	
Candidate Name <b>Lance Enderle for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>c. Trowbridge Marathon</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2012
Mailing Address 1198 S Harrison Rd		Amount of Each Disbursement this Period 55.00 <b>Transaction ID : SB17.4165</b>
City East Lansing	State MI	
Purpose of Disbursement	Category/ Type 002	
Candidate Name <b>Lance Enderle for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Trowbridge Marathon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2012
Mailing Address 1198 S Harrison Rd		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : SB17.4167</b>
City East Lansing	State MI	
Zip Code 48823	Purpose of Disbursement 002	Candidate Name <b>Lance Enderle for Congress</b> Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>B. Trowbridge Marathon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 1198 S Harrison Rd		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.4169</b>
City East Lansing	State MI	
Zip Code 48823	Purpose of Disbursement 002	Candidate Name <b>Lance Enderle for Congress</b> Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

Full Name (Last, First, Middle Initial) <b>c. Trowbridge Marathon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 1198 S Harrison Rd		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : SB17.4171</b>
City East Lansing	State MI	
Zip Code 48823	Purpose of Disbursement 002	Candidate Name <b>Lance Enderle for Congress</b> Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	140.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Lance Enderle for Congress**

Full Name (Last, First, Middle Initial) <b>A. Trowbridge Marathon</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 29 / 2012</b>
Mailing Address 1198 S Harrison Rd		Amount of Each Disbursement this Period <b>65.00</b>
City East Lansing State MI Zip Code 48823	Purpose of Disbursement Transportation Expense Category/Type <b>002</b>	
Candidate Name <b>Lance Enderle for Congress</b>		<b>Transaction ID : SB17.4121</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>65.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>6210.48</b>



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Lance Enderle for Congress** Transaction ID : **SC/10.4320**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Lance Enderle</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 10029	

City	State	ZIP Code
Lansing	MI	48901

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7325.00	0.00	7325.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
01 / 15 / 2011	11/30/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	7325.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4295

Lance Enderle for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Lance Enderle

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
PO Box 10029

City State ZIP Code  
Lansing MI 48901

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
6373.00 0.00 6373.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 11 / D 15 / Y 2011 M M / D D / Y 11/30/12 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 6373.00  
**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Lance Enderle for Congress** Transaction ID : **SC/10.4244**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Lance Enderle</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 10029	

City	State	ZIP Code
Lansing	MI	48901

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0.00	500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
01 / 15 / 2012	n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	500.00
<b>TOTALS</b> This Period (last page in this line only).....	14198.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.