

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Michigan Independent Political Action Committee

ADDRESS (number and street) 150 W. Jefferson, Suite 2500
 Check if different than previously reported. (ACC)
City: Detroit State: MI ZIP CODE: 48226

2. **FEC IDENTIFICATION NUMBER** C00292367
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 Quarterly 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 (12G)
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 04 01 2008 through 06 30 2008

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 David Hoin

Signature of Treasurer Electronically Filed by David Hoin Date 07 14 2008

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 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Michigan Independent Political Action Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		26466.42
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	23906.56									
(c) Total Receipts (from Line 19)	10000.00	10000.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	33906.56	36466.42								
7. Total Disbursements (from Line 31)	7258.91	9818.77								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	26647.65	26647.65								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Michigan Independent Political Action Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	0.00	0.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	10000.00	10000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10000.00	10000.00
(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)	10000.00	10000.00
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 Transfer (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))	10000.00	10000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10000.00	10000.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	7200.00	9700.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	58.91	118.77
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	7258.91	9818.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7258.91	9818.77

DETAILED SUMMARY PAGE
of Disbursements

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)	10000.00	10000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	10000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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"/> 24	<input type="checkbox"/> 25	<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)
Michigan Independent Political Action Committee

A.

Full Name (Last, First, Middle Initial)
VERNON J EHLERS

Transaction ID: SB23.8242
Date of Disbursement

Mailing Address PO BOX 3340

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	0	8

City GRAND RAPIDS State MI Zip Code 49501

Amount of Each Disbursement this Period

Purpose of Disbursement Reception

011
Category/
Type

100.00

Candidate Name EHLERS FOR CONGRESS COMMITTEE

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: MI District: 03

B.

Full Name (Last, First, Middle Initial)
CAROLYN MS. KILPATRICK

Transaction ID: SB23.8238
Date of Disbursement

Mailing Address 7445 LaSalle Boulevard

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	0	8

City Detroit State MI Zip Code 48206

Amount of Each Disbursement this Period

Purpose of Disbursement Reception

011
Category/
Type

500.00

Candidate Name KILPATRICK FOR UNITED STATES CONGRESS

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: MI District: 15

C.

Full Name (Last, First, Middle Initial)
CARL LEVIN

Transaction ID: SB23.8241
Date of Disbursement

Mailing Address 1017 EAST CAPITOL ST SE

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

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement Reception

011
Category/
Type

1000.00

Candidate Name FRIENDS OF SENATOR CARL LEVIN

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: MI District: 00

SUBTOTAL of Disbursements This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

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**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Michigan Independent Political Action Committee

A.	Full Name (Last, First, Middle Initial) JOHN S MCCAIN	Transaction ID: SB23.8239 Date of Disbursement 04 / 25 / 2008
	Mailing Address 211 N UNION STREET	Amount of Each Disbursement this Period 5000.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement Reception Candidate Name MCCAIN VICTORY 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	011 Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) CANDICE S MILLER	Transaction ID: SB23.8235 Date of Disbursement 06 / 13 / 2008
	Mailing Address 28840 OLD NORTH RIVER ROAD	Amount of Each Disbursement this Period 300.00
	City HARRISON TOWNSHIP State MI Zip Code 48045	
	Purpose of Disbursement Reception Candidate Name CANDICE MILLER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 10	011 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) MICHAEL J ROGERS	Transaction ID: SB23.8237 Date of Disbursement 05 / 23 / 2008
	Mailing Address 6899 CORRIGAN DRIVE	Amount of Each Disbursement this Period 300.00
	City BRIGHTON State MI Zip Code 48116	
	Purpose of Disbursement Reception Candidate Name Rogers for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	011 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	5600.00
TOTAL This Period (last page this line number only)	7200.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Michigan Independent Political Action Committee

A.	Full Name (Last, First, Middle Initial) Comerica Bank	Transaction ID: SB29.8245 Date of Disbursement
	Mailing Address 211 W. Fort St	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Detroit State MI Zip Code 48226	Amount of Each Disbursement this Period
	Purpose of Disbursement Service Charge Candidate Name	<input type="text" value="20.81"/>
	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) ▼
		<input type="text" value="001"/> Category/ Type

B.	Full Name (Last, First, Middle Initial) Comerica Bank	Transaction ID: SB29.8246 Date of Disbursement
	Mailing Address 211 W. Fort St	<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Detroit State MI Zip Code 48226	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charge Candidate Name	<input type="text" value="22.00"/>
	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) ▼
		<input type="text" value="001"/> Category/ Type

C.	Full Name (Last, First, Middle Initial) Comerica Bank	Transaction ID: SB29.8247 Date of Disbursement
	Mailing Address 211 W. Fort St	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Detroit State MI Zip Code 48226	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charge Candidate Name	<input type="text" value="16.10"/>
	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) ▼
		<input type="text" value="001"/> Category/ Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="58.91"/>
TOTAL This Period (last page this line number only)	<input type="text" value="58.91"/>