

**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

Grand Traverse County Democratic Committee

ADDRESS (number and street)

P.P. Box 1532

309 E Front Street

Traverse City

MI

49684

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00402842

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

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

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2019

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Klein, Leonard, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Klein, Leonard, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
05 28 2020

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Grand Traverse County Democratic Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2019 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2019</span>		13741.22
(b) Cash on Hand at Beginning of Reporting Period.....	10551.40	
(c) Total Receipts (from Line 19) .....	23230.00	26974.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	33781.40	40715.22
7. Total Disbursements (from Line 31).....	23507.75	30441.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	10273.65	10273.65
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Grand Traverse County Democratic Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	9

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	9

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).....	6424.00	6424.00
(ii) Unitemized .....	12828.00	16572.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	19252.00	22996.00
(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) .....	19252.00	22996.00
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).....	3978.00	3978.00
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)) .....	23230.00	26974.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	23230.00	26974.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

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)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	23507.75	30441.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	23507.75	30441.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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)) ..	23507.75	30441.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23507.75	30441.57

**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) .....	19252.00	22996.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19252.00	22996.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	23507.75	30441.57
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3978.00	3978.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	19529.75	26463.57

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

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

FOR LINE NUMBER: PAGE 6 OF 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. Bieber, Ronald, , ,**

Mailing Address 8405 Parkside

City  
Grand Blanc

State  
MI

Zip Code  
48439

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AFLCIO

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
09 / 27 / 2019

Transaction ID : SA11AI.7843

Amount of Each Receipt this Period

250.00

☐ Memo Item  
donation

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

**B. Brickman, Ralph, , ,**

Mailing Address 14610 Pyatt Rd

City  
Traverse City

State  
MI

Zip Code  
49686

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 ▼

715.00

Date of Receipt

MM / DD / YYYY  
09 / 28 / 2019

Transaction ID : SA11AI.7902

Amount of Each Receipt this Period

670.00

☐ Memo Item  
donation ab

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

**C. Brickman, Ralph, , ,**

Mailing Address 14610 Pyatt Rd

City  
Traverse City

State  
MI

Zip Code  
49686

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 ▼

755.00

Date of Receipt

MM / DD / YYYY  
10 / 03 / 2019

Transaction ID : SA11AI.8019

Amount of Each Receipt this Period

40.00

☐ Memo Item  
donation pp

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

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

960.00

# **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 42

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. Brickman, Ralph, , ,**

Mailing Address 14610 Pyatt Rd

City  
Traverse City

State  
MI

Zip Code  
49686

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 ▼

775.00

Date of Receipt

MM / DD / YYYY  
11 / 05 / 2019

**Transaction ID : SA11AI.8060**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
membership

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

**B. Bruehl, Hans, , ,**

Mailing Address 200 River Place

City  
Traverse City

State  
MI

Zip Code  
48207

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 ▼

500.00

Date of Receipt

MM / DD / YYYY  
09 / 28 / 2019

**Transaction ID : SA11AI.7922**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
donation ck5440

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

**C. Carlson, Edward, , ,**

Mailing Address 2133 E Timberlane dr

City  
Traverse City

State  
MI

Zip Code  
49686

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 ▼

225.00

Date of Receipt

MM / DD / YYYY  
09 / 28 / 2019

**Transaction ID : SA11AI.7921**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
donation ck1055

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

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

720.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse County Democratic Committee

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

A. Carruthers, James, , ,

Mailing Address 218 w front st

City

Traverse City

State

MI

Zip Code

49684

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Traverse City

Occupation (for Individual)

mayor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2019

Transaction ID : SA11AI.8054

Amount of Each Receipt this Period

40.00

☐ Memo Item  
donations

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

B. Casler, Joel, R., ,

Mailing Address 7552 N. Long Lake Rd

City

Traverse City

State

MI

Zip Code

49685

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

343.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 08 / 2019

Transaction ID : SA11AI.7990

Amount of Each Receipt this Period

60.00

☐ Memo Item  
donation ab

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

C. Cook, Joseph, , ,

Mailing Address 5684 Ravens Roost Ln

City

Traverse City

State

MI

Zip Code

49684

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Munson Healthcare Family Pract

Occupation (for Individual)

Physician

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 28 / 2019

Transaction ID : SA11AI.7920

Amount of Each Receipt this Period

240.00

☐ Memo Item  
donation ck2631

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

340.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. Cracchiolo, Chris, J., ,**

Mailing Address 5140 Arrowhead Court

City  
Williamsburg

State  
MI

Zip Code  
49690

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

J. Allan Reynolds

Occupation (for Individual)

Director of Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
09 / 28 / 2019

Transaction ID : SA11AI.7924

Amount of Each Receipt this Period

240.00

☐ Memo Item  
donation ck2055

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

**B. Davidson, Robert, , ,**

Mailing Address 332 East Bay Blvd S

City  
Traverse City

State  
MI

Zip Code  
49686

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 ▼

550.00

Date of Receipt

MM / DD / YYYY  
09 / 28 / 2019

Transaction ID : SA11AI.7900

Amount of Each Receipt this Period

550.00

☐ Memo Item  
donation ab

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

**C. DeGabriele, Robert, , ,**

Mailing Address 4359 Foxfire Dr

City  
Traverse City

State  
MI

Zip Code  
49684

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Century Extrusion

Occupation (for Individual)  
Buyer/Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.00

Date of Receipt

MM / DD / YYYY  
10 / 03 / 2019

Transaction ID : SA11AI.8040

Amount of Each Receipt this Period

81.00

☐ Memo Item  
donation

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

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

871.00

# 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 42

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse County Democratic Committee

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

A. DeSpelder, John, , ,

Mailing Address 542 Hidden Ridge Dr

City  
Traverse City

State  
MI

Zip Code  
49686

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 08 / 2019

Transaction ID : SA11AI.7989

Amount of Each Receipt this Period

250.00

☐ Memo Item  
donation ab

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

B. Gribi, Kim, , ,

Mailing Address 7822 Peaceful Valley rd

City  
Williamsburg

State  
MI

Zip Code  
49690

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Traverse City Area Public Scho

Occupation (for Individual)  
HR generalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

Transaction ID : SA11AI.8044

Amount of Each Receipt this Period

35.00

☐ Memo Item  
donation

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

C. Haynes, Jeanne, , ,

Mailing Address 422 N Madison

City  
Traverse City

State  
MI

Zip Code  
49684

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2019

Transaction ID : SA11AI.7915

Amount of Each Receipt this Period

120.00

☐ Memo Item  
donation ck4460

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

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

405.00

# **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 42

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. Jones, Joseph, , ,**

Mailing Address 8860 Cedar Ridge Lane

City  
Fife Lake

State  
MI

Zip Code  
49633

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.7952**

Amount of Each Receipt this Period

65.00

☐ Memo Item  
donation ck1946

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

**B. Jones, Joseph, , ,**

Mailing Address 8860 Cedar Ridge Lane

City  
Fife Lake

State  
MI

Zip Code  
49633

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 ▼

281.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8049**

Amount of Each Receipt this Period

46.00

☐ Memo Item  
donation

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

**C. Ketola, Diana, , ,**

Mailing Address 6232 Selsey Lane

City  
Traverse City

State  
MI

Zip Code  
49684

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 09 / 2019

**Transaction ID : SA11AI.7877**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
donation ck9810

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

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

211.00

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

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

FOR LINE NUMBER: PAGE 12 OF 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse County Democratic Committee

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

A. Leonhardt, Jeffrey, A, ,

Mailing Address 1118 Pine Needle Ln

City

Traverse City

State

MI

Zip Code

49686

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

Transaction ID : SA11AI.8034

Amount of Each Receipt this Period

202.00

☐ Memo Item  
donation pp

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

B. Maller, Marcy, , ,

Mailing Address 4588 Hampshire Dr.

City

Williamsburg

State

MI

Zip Code

49690

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 09 / 2019

Transaction ID : SA11AI.7884

Amount of Each Receipt this Period

260.00

☐ Memo Item  
donation ab

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

C. McDonald, Gregory, S, ,

Mailing Address 8836 Wheeler Oaks

City

Williamsburg

State

MI

Zip Code

49690

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

Transaction ID : SA11AI.8025

Amount of Each Receipt this Period

100.00

☐ Memo Item  
donation pp

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

562.00

TOTAL 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: PAGE 13 OF 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

530.00

Date of Receipt

10 / 03 / 2019

Transaction ID : SA11AI.8297

Amount of Each Receipt this Period

150.00

☐ Memo Item

In-kind - African nativity

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

**B. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

380.00

Date of Receipt

10 / 03 / 2019

Transaction ID : SA11AI.8298

Amount of Each Receipt this Period

120.00

☐ Memo Item

In-kind - African Mahogany bowl

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

**C. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

1010.00

Date of Receipt

10 / 03 / 2019

Transaction ID : SA11AI.8301

Amount of Each Receipt this Period

50.00

☐ Memo Item

In-kind - African wooden necklace

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

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

320.00

# **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 14 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8302**

Amount of Each Receipt this Period

50.00

☐ Memo Item

In-kind - Afican wooden necklace

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

**B. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8303**

Amount of Each Receipt this Period

75.00

☐ Memo Item

In-kind - Malachite dish with egg

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

**c. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8304**

Amount of Each Receipt this Period

75.00

☐ Memo Item

In-kind - Nalachite dish with ball

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

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

200.00

# **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 15 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8305**

Amount of Each Receipt this Period

80.00

☐ Memo Item

In-kind - African ebony pair of heads

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

**B. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8306**

Amount of Each Receipt this Period

45.00

☐ Memo Item

In-kind - African ebony mask

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

**C. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

635.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8307**

Amount of Each Receipt this Period

60.00

☐ Memo Item

In-kind - Malachite pyramid

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

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

185.00

# **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 16 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8308**

Amount of Each Receipt this Period

15.00

☐ Memo Item

In-kind - ebony letter opener

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

**B. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8309**

Amount of Each Receipt this Period

15.00

☐ Memo Item

In-kind - bicolor letter opener

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

**C. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8310**

Amount of Each Receipt this Period

15.00

☐ Memo Item

In-kind - one color letter opener

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

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

45.00



# **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 17 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

1060.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2019

Transaction ID : SA11AI.8083

Amount of Each Receipt this Period

50.00

☐ Memo Item  
membership

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

**B. McNear, Mary, , ,**

Mailing Address 606 West 10th st

City  
Traverse City

State  
MI

Zip Code  
49684

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

Transaction ID : SA11AI.7865

Amount of Each Receipt this Period

400.00

☐ Memo Item  
donation ab

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

**C. McPhail, Ann, , ,**

Mailing Address 11896 Cabana Shores

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 08 / 2019

Transaction ID : SA11AI.7972

Amount of Each Receipt this Period

250.00

☐ Memo Item  
donation ab

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 18 OF 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse County Democratic Committee

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

A. Morgan, Matthew, , ,

Mailing Address 11777 Willow Pt dr

City

Traverse City

State

MI

Zip Code

49686

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2019

Transaction ID : SA11AI.7910

Amount of Each Receipt this Period

120.00

☐ Memo Item  
donation ck 3443

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

B. Smethells, Nicole, , ,

Mailing Address 10547 Bluff

City

Traverse City

State

MI

Zip Code

49686

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

Transaction ID : SA11AI.8122

Amount of Each Receipt this Period

240.00

☐ Memo Item  
In-kind - Print Horsehead Nebula

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

C. Spencer, Todd, , ,

Mailing Address 550 Quail Ridge dr

City

Traverse City

State

MI

Zip Code

48686

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OnupwebOccupation (for Individual)  
editor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

Transaction ID : SA11AI.8024

Amount of Each Receipt this Period

100.00

☐ Memo Item  
donation pp

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

460.00

TOTAL 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: PAGE 19 OF 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse County Democratic Committee

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

A. Spencer, Todd, , ,

Mailing Address 550 Quail Ridge dr

City

Traverse City

State

MI

Zip Code

48686

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Onupweb

Occupation (for Individual)

editor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2019

Transaction ID : SA11AI.8087

Amount of Each Receipt this Period

50.00

☐ Memo Item  
membership

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

B. Walter, Ashlea, , ,

Mailing Address 605 Fifth St

City

Traverse City

State

MI

Zip Code

49684

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Norte

Occupation (for Individual)

development director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

Transaction ID : SA11AI.7864

Amount of Each Receipt this Period

120.00

☐ Memo Item  
donation ab

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

C. Walter, Ashlea, , ,

Mailing Address 605 Fifth St

City

Traverse City

State

MI

Zip Code

49684

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Norte

Occupation (for Individual)

development director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

Transaction ID : SA11AI.8005

Amount of Each Receipt this Period

60.00

☐ Memo Item  
donation pp

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

230.00

TOTAL 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 20 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Grand Traverse County Democratic Committee**

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

**A. Walter, Ashlea, , ,**

Mailing Address 605 Fifth St

City  
Traverse City

State  
MI

Zip Code  
49684

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Norte

Occupation (for Individual)  
development director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 30 / 2019

**Transaction ID : SA11AI.8078**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
membership

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

**B. Weaver, Cindy, , ,**

Mailing Address 2554 Chandler

City  
Traverse City

State  
MI

Zip Code  
49686

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
National Writers Series

Occupation (for Individual)  
Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA11AI.8016**

Amount of Each Receipt this Period

165.00

☐ Memo Item  
donation pp

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

**C. Wheaton, Marsha, , ,**

Mailing Address 2103 Avon

City  
Traverse City

State  
MI

Zip Code  
49685

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Dog Mom at Your Service

Occupation (for Individual)  
owner/operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 30 / 2019

**Transaction ID : SA11AI.8079**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
membership

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

215.00

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

6424.00

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

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

FOR LINE NUMBER: PAGE 21 OF 42  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. Casler, Joel, R., ,**

Mailing Address 7552 N. Long Lake Rd

City  
Traverse City

State  
MI

Zip Code  
49685

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 ▼

283.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA15.8184**

Amount of Each Receipt this Period

150.00

☐ Memo Item

In-kind - US mint sets

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

**B. Cracchiolo, Chris, J., ,**

Mailing Address 5140 Arrowhead Court

City  
Williamsburg

State  
MI

Zip Code  
49690

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

J. Allan Reynolds

Occupation (for Individual)

Director of Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA15.8185**

Amount of Each Receipt this Period

15.00

☐ Memo Item

In-kind - TCFF puzzle

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

**C. Formative Fitness**

Mailing Address 131 E Front st

City  
Traverse City

State  
MI

Zip Code  
49684

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA15.8154**

Amount of Each Receipt this Period

240.00

☐ Memo Item

In-kind - 2 gift certificates

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

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

405.00

# **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 22 OF 42

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

**A. Larson, Lynn, , ,**

Mailing Address 2735 Forest Lodge

City  
Traverse City

State  
MI

Zip Code  
49685

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA15.8142**

Amount of Each Receipt this Period

120.00

☐ Memo Item

In-kind - two paintings

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

**B. Leher, Klaus, , ,**

Mailing Address 8358 Elk Lake Rd

City  
Williamsburg

State  
MI

Zip Code  
49690

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA15.8141**

Amount of Each Receipt this Period

250.00

☐ Memo Item

In-kind - Oil Painting

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

**C. Leonhardt, Jeffrey, A, ,**

Mailing Address 1118 Pine Needle Ln

City  
Traverse City

State  
MI

Zip Code  
49686

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 ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA15.8187**

Amount of Each Receipt this Period

50.00

☐ Memo Item

In-kind - two books, Snowball, Saving Arcadia

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

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

420.00

# **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 23 OF 42

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

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

## **A. Nolan's**

Mailing Address 336 E Front st

City  
Traverse City

State  
MI

Zip Code  
49684

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 ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA15.8148**

Amount of Each Receipt this Period

228.00

☐ Memo Item

In-kind - cigars, Pedron and Ashton samplers

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

## **B. Sanok, Richard, , ,**

Mailing Address 84 Wakulat Ln

City  
Traverse City

State  
MI

Zip Code  
49686

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA15.8146**

Amount of Each Receipt this Period

35.00

☐ Memo Item

In-kind - Pen and Water color painting

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

## **C. Sunglass Shop**

Mailing Address 137 E Front St

City  
Traverse City

State  
MI

Zip Code  
49684

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2019

**Transaction ID : SA15.8201**

Amount of Each Receipt this Period

220.00

☐ Memo Item

In-kind - Oakley Sunglasses

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

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

483.00

1308.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. 309 E Front St Associates**

Mailing Address 309 E Front St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
office rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2019

FEC Identification Number

**C****Transaction ID : SB21B.7791**

Amount of Each Disbursement this Period

550.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. 309 E Front St Associates**

Mailing Address 309 E Front St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
office rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2019

FEC Identification Number

**C****Transaction ID : SB21B.7929**

Amount of Each Disbursement this Period

550.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. 309 E Front St Associates**

Mailing Address 309 E Front St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
office rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.7837**

Amount of Each Disbursement this Period

550.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1650.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. 309 E Front St Associates**

Mailing Address 309 E Front St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
office rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2019

FEC Identification Number

**C****Transaction ID : SB21B.7838**

Amount of Each Disbursement this Period

550.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. 309 E Front St Associates**

Mailing Address 309 E Front St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
office rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2019

FEC Identification Number

**C****Transaction ID : SB21B.8066**

Amount of Each Disbursement this Period

550.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. 309 E Front St Associates**

Mailing Address 309 E Front St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
office rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2019

FEC Identification Number

**C****Transaction ID : SB21B.8067**

Amount of Each Disbursement this Period

550.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1650.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address 366 Summer st

City  
SomervilleState  
MDZip Code  
02144Purpose of Disbursement  
proc fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2019

FEC Identification Number

**C** **Transaction ID : SB21B.7868**

Amount of Each Disbursement this Period

 70.71☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address 366 Summer st

City  
SomervilleState  
MDZip Code  
02144Purpose of Disbursement  
proc fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		28		2019

FEC Identification Number

**C** **Transaction ID : SB21B.7889**

Amount of Each Disbursement this Period

 9.68☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address 366 Summer st

City  
SomervilleState  
MDZip Code  
02144Purpose of Disbursement  
proc fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		28		2019

FEC Identification Number

**C** **Transaction ID : SB21B.7890**

Amount of Each Disbursement this Period

 86.91☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 167.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address 366 Summer st

City  
SomervilleState  
MDZip Code  
02144Purpose of Disbursement  
proc fee c

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2019

FEC Identification Number

**C****Transaction ID : SB21B.7933**

Amount of Each Disbursement this Period

3.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address 366 Summer st

City  
SomervilleState  
MDZip Code  
02144Purpose of Disbursement  
proc fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2019

FEC Identification Number

**C****Transaction ID : SB21B.7992**

Amount of Each Disbursement this Period

64.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address 366 Summer st

City  
SomervilleState  
MDZip Code  
02144Purpose of Disbursement  
proce fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2019

FEC Identification Number

**C****Transaction ID : SB21B.8062**

Amount of Each Disbursement this Period

0.79

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.53

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address 366 Summer st

City  
SomervilleState  
MDZip Code  
02144Purpose of Disbursement  
proc fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2019					

FEC Identification Number

**C****Transaction ID : SB21B.8107**

Amount of Each Disbursement this Period

0.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address 366 Summer st

City  
SomervilleState  
MDZip Code  
02144Purpose of Disbursement  
proc fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				09				2019					

FEC Identification Number

**C****Transaction ID : SB21B.8108**

Amount of Each Disbursement this Period

4.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address 366 Summer st

City  
SomervilleState  
MDZip Code  
02144Purpose of Disbursement  
proc fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				15				2019					

FEC Identification Number

**C****Transaction ID : SB21B.8109**

Amount of Each Disbursement this Period

3.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.68

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Copy Central**

Mailing Address 314 E. 8th St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
printing of invites

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	1	9		

FEC Identification Number

**C****Transaction ID : SB21B.7826**

Amount of Each Disbursement this Period

341.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Copy Central**

Mailing Address 314 E. 8th St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
printing membership letters

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	4			2	0	1	9		

FEC Identification Number

**C****Transaction ID : SB21B.8113**

Amount of Each Disbursement this Period

420.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Copy Central**

Mailing Address 314 E. 8th St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
printing envelopes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	9			2	0	1	9		

FEC Identification Number

**C****Transaction ID : SB21B.8111**

Amount of Each Disbursement this Period

57.24

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

819.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Copy Central**

Mailing Address 314 E. 8th St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
printing membership envelopes

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		23		2019

FEC Identification Number

**C****Transaction ID : SB21B.8112**

Amount of Each Disbursement this Period

113.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Formative Fitness**

Mailing Address 131 E Front st

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
In-kind - 2 gift certificates

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8163**

Amount of Each Disbursement this Period

240.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lawson Printers**

Mailing Address 685 West Colmbia ave

City  
Battle CreekState  
MIZip Code  
49015Purpose of Disbursement  
printing of Business cards

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2019

FEC Identification Number

**C****Transaction ID : SB21B.7828**

Amount of Each Disbursement this Period

97.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

450.71

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 31 OF 42

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Lawson Printers**

Mailing Address 685 West Colmbia ave

City  
Battle Creek

State  
MI

Zip Code  
49015

Purpose of Disbursement  
printing of name stickers

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 Y Y  
08 / 29 / 2019

FEC Identification Number

C [ ]

**Transaction ID : SB21B.7840**

Amount of Each Disbursement this Period

[ ] 364.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Leher, Klaus, , ,**

Mailing Address 8358 Elk Lake Rd

City  
Williamsburg

State  
MI

Zip Code  
49690

Purpose of Disbursement  
In-kind - Oil Painting

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 Y Y  
10 / 03 / 2019

FEC Identification Number

C [ ]

**Transaction ID : SB21B.8174**

Amount of Each Disbursement this Period

[ ] 250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
Williamsburg

State  
MI

Zip Code  
49690

Purpose of Disbursement  
In-kind - African Mahogany bowl

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 Y Y  
10 / 03 / 2019

FEC Identification Number

C [ ]

**Transaction ID : SB21B.8299**

Amount of Each Disbursement this Period

[ ] 120.00

☐ Memo Item

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

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

[ ] 734.20

[ ]

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
WilliamsburgState  
MIZip Code  
49690Purpose of Disbursement  
In-kind - one color letter opener

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8312**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
WilliamsburgState  
MIZip Code  
49690Purpose of Disbursement  
In-kind - bicolor letter opener

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8313**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
WilliamsburgState  
MIZip Code  
49690Purpose of Disbursement  
In-kind - ebony letter opener

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8314**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
WilliamsburgState  
MIZip Code  
49690Purpose of Disbursement  
In-kind - Malachite pyramid

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8315**

Amount of Each Disbursement this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
WilliamsburgState  
MIZip Code  
49690Purpose of Disbursement  
In-kind - African ebony mask

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8316**

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
WilliamsburgState  
MIZip Code  
49690Purpose of Disbursement  
In-kind - African ebony pair of heads

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8317**

Amount of Each Disbursement this Period

80.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
WilliamsburgState  
MIZip Code  
49690Purpose of Disbursement  
In-kind - Nalachite dish with ball

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8318**

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
WilliamsburgState  
MIZip Code  
49690Purpose of Disbursement  
In-kind - Malachite dish with egg

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8319**

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
WilliamsburgState  
MIZip Code  
49690Purpose of Disbursement  
In-kind - Afican wooden necklace

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8320**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. McDonald, Gregory, S, ,**

Mailing Address 8836 Wheeler Oaks

City  
WilliamsburgState  
MIZip Code  
49690Purpose of Disbursement  
In-kind - Afican wooden necklace

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8321**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Nolan's**

Mailing Address 336 E Front st

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
In-kind - cigars, Pedron and Ashton samplers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8168**

Amount of Each Disbursement this Period

228.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OOMA Inc**

Mailing Address 525 Almanor Ave

City  
SunnyvaleState  
CAZip Code  
94085Purpose of Disbursement  
office phone service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		26		2019

FEC Identification Number

**C****Transaction ID : SB21B.7799**

Amount of Each Disbursement this Period

40.59

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

318.59

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. OOMA Inc**

Mailing Address 525 Almanor Ave

City  
SunnyvaleState  
CAZip Code  
94085Purpose of Disbursement  
office phone service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2019

FEC Identification Number

**C****Transaction ID : SB21B.7827**

Amount of Each Disbursement this Period

40.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OOMA Inc**

Mailing Address 525 Almanor Ave

City  
SunnyvaleState  
CAZip Code  
94085Purpose of Disbursement  
office phone

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2019

FEC Identification Number

**C****Transaction ID : SB21B.7834**

Amount of Each Disbursement this Period

40.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OOMA Inc**

Mailing Address 525 Almanor Ave

City  
SunnyvaleState  
CAZip Code  
94085Purpose of Disbursement  
office phone service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2019

FEC Identification Number

**C****Transaction ID : SB21B.7938**

Amount of Each Disbursement this Period

40.68

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

121.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. OOMA Inc**

Mailing Address 525 Almanor Ave

City  
SunnyvaleState  
CAZip Code  
94085Purpose of Disbursement  
office phone service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2019

FEC Identification Number

**C****Transaction ID : SB21B.8064**

Amount of Each Disbursement this Period

40.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OOMA Inc**

Mailing Address 525 Almanor Ave

City  
SunnyvaleState  
CAZip Code  
94085Purpose of Disbursement  
office phone service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		26		2019

FEC Identification Number

**C****Transaction ID : SB21B.8117**

Amount of Each Disbursement this Period

40.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Park Place**

Mailing Address 300 East State Street

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.7941**

Amount of Each Disbursement this Period

9619.61

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9701.33

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Scharff, Sam, , ,**

Mailing Address 4548 Veley Rd

City  
DelawareState  
OHZip Code  
43015Purpose of Disbursement  
Intern payment

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		26		2019

FEC Identification Number

**C****Transaction ID : SB21B.7801**

Amount of Each Disbursement this Period

325.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Smethells, Nicole, , ,**

Mailing Address 10547 Bluff

City  
Traverse CityState  
MIZip Code  
49686Purpose of Disbursement  
In-kind - Print Horsehead Nebula

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8126**

Amount of Each Disbursement this Period

240.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 2631 Crossing Circle

City  
Traverse CityState  
MIZip Code  
49685Purpose of Disbursement  
office supplies paper schrider

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		13		2019

FEC Identification Number

**C****Transaction ID : SB21B.8110**

Amount of Each Disbursement this Period

201.39

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

766.39

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Sunglass Shop**

Mailing Address 137 E Front St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
In-kind - Oakley Sunglasses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

**C****Transaction ID : SB21B.8214**

Amount of Each Disbursement this Period

220.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. US Post Master**

Mailing Address 202 S. Union St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
Stamps

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2019

FEC Identification Number

**C****Transaction ID : SB21B.7819**

Amount of Each Disbursement this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. US Post Master**

Mailing Address 202 S. Union St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
Postage-stamps

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2019

FEC Identification Number

**C****Transaction ID : SB21B.7935**

Amount of Each Disbursement this Period

55.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

330.00

# **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)

PAGE 40 OF 42

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. US Post Master**

Mailing Address 202 S. Union St

City  
Traverse City

State  
MI

Zip Code  
49684

Purpose of Disbursement  
postage stamps

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2019

FEC Identification Number

**C**

**Transaction ID : SB21B.7936**

Amount of Each Disbursement this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. US Post Master**

Mailing Address 202 S. Union St

City  
Traverse City

State  
MI

Zip Code  
49684

Purpose of Disbursement  
postage stamps

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2019

FEC Identification Number

**C**

**Transaction ID : SB21B.7937**

Amount of Each Disbursement this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. US Post Master**

Mailing Address 202 S. Union St

City  
Traverse City

State  
MI

Zip Code  
49684

Purpose of Disbursement  
stamp

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2019

FEC Identification Number

**C**

**Transaction ID : SB21B.7939**

Amount of Each Disbursement this Period

1.15

☐ Memo Item

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

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

111.15



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. US Post Master**

Mailing Address 202 S. Union St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
postage stamps

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2019

FEC Identification Number

**C****Transaction ID : SB21B.7940**

Amount of Each Disbursement this Period

7.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. US Post Master**

Mailing Address 202 S. Union St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		13		2019

FEC Identification Number

**C****Transaction ID : SB21B.8114**

Amount of Each Disbursement this Period

47.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. US Post Master**

Mailing Address 202 S. Union St

City  
Traverse CityState  
MIZip Code  
49684Purpose of Disbursement  
postage mailings

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		20		2019

FEC Identification Number

**C****Transaction ID : SB21B.8115**

Amount of Each Disbursement this Period

90.78

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

145.89

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 42

<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

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NAME OF COMMITTEE (In Full)

**Grand Traverse County Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Wix.com**

Mailing Address 500 Terry Francois blvd

City  
San FranciscoState  
CAZip Code  
94158Purpose of Disbursement  
web site expanse

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2019

FEC Identification Number

**C****Transaction ID : SB21B.7794**

Amount of Each Disbursement this Period

111.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Wix.com**

Mailing Address 500 Terry Francois blvd

City  
San FranciscoState  
CAZip Code  
94158Purpose of Disbursement  
web site exp

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2019

FEC Identification Number

**C****Transaction ID : SB21B.7818**

Amount of Each Disbursement this Period

72.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

183.00

17659.08