

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

STABENOW VICTORY FUND

ADDRESS (number and street)

PO BOX 4462

Check if different than previously reported. (ACC)

EAST LANSING

MI

48826

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00495580

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

MI

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2016

through

M M /

D D /

Y Y Y Y 2016

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

Type or Print Name of Treasurer

Bergman, Cheryl, , ,

Signature of Treasurer

Bergman, Cheryl, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2017

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								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
STABENOW VICTORY FUND

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	148160.00	521835.00
(b) Total Contribution Refunds (from Line 20(d))	27000.00	27000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	121160.00	494835.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7405.74	20275.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	7405.74	20275.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	108744.33	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

STABENOW VICTORY FUND

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	146150.00	517200.00
(ii) Unitemized.....	10.00	635.00
(iii) TOTAL of contributions from individuals ▶	146160.00	517835.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	4000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	148160.00	521835.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	3.36	3.36
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	148163.36	521838.36

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7405.74	20275.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	388235.00	390645.92
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	26000.00	26000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	27000.00	27000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	422640.74	437921.09

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	383221.71
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	148163.36
25. SUBTOTAL (add Line 23 and Line 24).....	531385.07
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	422640.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	108744.33

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

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

FOR LINE NUMBER: PAGE 5 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Transaction ID : SA11AI.5414

Amount of Each Receipt this Period
2000.00

Memo Item
Stanford Blanck

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Transaction ID : SA11AI.5417

Amount of Each Receipt this Period
5400.00

Memo Item
Ahmad Chebbani

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Transaction ID : SA11AI.5420

Amount of Each Receipt this Period
1000.00

Memo Item
Joanne Faycurry

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 6 OF 31
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
ACTBLUE
Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Transaction ID : SA11AI.5422

Amount of Each Receipt this Period
2700.00

Memo Item
Zina Kramer

B. Full Name (Last, First, Middle Initial)
ACTBLUE
Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Transaction ID : SA11AI.5425

Amount of Each Receipt this Period
1000.00

Memo Item
Michael Kramer

C. Full Name (Last, First, Middle Initial)
ACTBLUE
Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Transaction ID : SA11AI.5428

Amount of Each Receipt this Period
250.00

Memo Item
Ali Moiin

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Transaction ID : SA11AI.5431

Amount of Each Receipt this Period
2000.00

Memo Item
Diane Orley

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Transaction ID : SA11AI.5434

Amount of Each Receipt this Period
500.00

Memo Item
Lana Pollack

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Transaction ID : SA11AI.5436

Amount of Each Receipt this Period
2000.00

Memo Item
Reginald Turner

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Transaction ID : SA11AI.5445

Amount of Each Receipt this Period
2000.00

Memo Item
Robert Floden

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2016

Transaction ID : SA11AI.5457

Amount of Each Receipt this Period
1000.00

Memo Item
Lila Cherri

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2016

Transaction ID : SA11AI.5460

Amount of Each Receipt this Period
2500.00

Memo Item
Marjorie Magner

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 31
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2016

Transaction ID : SA11AI.5390

Amount of Each Receipt this Period
7300.00

Memo Item
David Rich

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2016

Transaction ID : SA11AI.5440

Amount of Each Receipt this Period
500.00

Memo Item
Brian Athey

C. Full Name (Last, First, Middle Initial)
Athey, Brian, , ,

Mailing Address 6166 First St

City Ypsilanti State MI Zip Code 48198

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

Name of Employer Occupation
University of Michigan Professor

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2016

Transaction ID : SA11AI.5393

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Beydoun, Fay, , ,
Mailing Address 7849 Hartwell

City Dearborn State MI Zip Code 48126

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

Name of Employer AACC Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2016

Transaction ID : SA11AI.5381

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Blanck, Stanford, , ,
Mailing Address 31305 Woodside Dr

City Franklin State MI Zip Code 48025

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

Name of Employer Wallside Windows Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 29 / 2016

Transaction ID : SA11AI.5412

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Chebbani, Ahmad, , ,
Mailing Address 5282 Elmgate Dr

City Orchard Lake State MI Zip Code 48324

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

Name of Employer Omnex Corporation Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 29 / 2016

Transaction ID : SA11AI.5415

Amount of Each Receipt this Period
5400.00

Memo Item

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

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

8400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Cherri, Lila, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2016	
Mailing Address 551 Ridgedale			Transaction ID : SA11AI.5455	
City Birmingham	State MI	Zip Code 48009	Amount of Each Receipt this Period _____ 1000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Primis Healthcare		Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 1000.00		

Full Name (Last, First, Middle Initial) B. Davidson, Ethan, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2016	
Mailing Address 444 Arlington St			Transaction ID : SA11AI.5484	
City Birmingham	State MI	Zip Code 48009	Amount of Each Receipt this Period _____ 15000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Self-employed		Occupation Businessman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 15000.00		

Full Name (Last, First, Middle Initial) C. Davidson, Gretchen, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2016	
Mailing Address 444 Arlington St			Transaction ID : SA11AI.5503	
City Birmingham	State MI	Zip Code 48009	Amount of Each Receipt this Period _____ 10000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer .		Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 10000.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 26000.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 31
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Eisenberg, Kenneth, , ,

Mailing Address 8223 W Warren Ave

City Dearborn State MI Zip Code 48126

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

Name of Employer Kenwal Steel Corporation Occupation Chairman/Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2016

Transaction ID : SA11AI.5401

Amount of Each Receipt this Period
10000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Fakh, Nabil, H, ,

Mailing Address 25308 Marshall St

City Dearborn State MI Zip Code 48124

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

Name of Employer Dearborn Heights Pharmacy Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2016

Transaction ID : SA11AI.5384

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Faycurry, Joanne, , ,

Mailing Address 811 Robinhood Rd

City Bloomfield Hills State MI Zip Code 48304

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

Name of Employer Schiff Hardin Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2016

Transaction ID : SA11AI.5418

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 12000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Floden, Robert, , ,
Mailing Address 510 Walbridge Dr

City: East Lansing State: MI Zip Code: 48823

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

Name of Employer: Michigan State University Occupation: Professor

Receipt For: Primary General Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 12 / 02 / 2016
Transaction ID : SA11AI.5443

Amount of Each Receipt this Period: 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Grosfeld, Nancy, , ,
Mailing Address 420 Martell Dr

City: Bloomfield Hills State: MI Zip Code: 48304-3452

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

Name of Employer: Occupation: Volunteer

Receipt For: Primary General Other (specify)
Election Cycle-to-Date: 2700.00

Date of Receipt: 12 / 06 / 2016
Transaction ID : SA11AI.5405

Amount of Each Receipt this Period: 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Halpern, Eli, , ,
Mailing Address 21340 Glenmorra St

City: Southfield State: MI Zip Code: 48076

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

Name of Employer: Self-employed Occupation: Attorney

Receipt For: Primary General Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 06 / 2016
Transaction ID : SA11AI.5406

Amount of Each Receipt this Period: 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5700.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 31
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Keller, Donald, , ,
Mailing Address 454 Craemer Dr
City Frankenmuth State MI Zip Code 48734
FEC ID number of contributing federal political committee. C
Name of Employer Frankenmuth Bavarian Inn Inc Occupation Executive
Receipt For: Primary General Other (specify)
Election Cycle-to-Date 2000.00

Date of Receipt 11 / 29 / 2016
Transaction ID : SA11AI.5481
Amount of Each Receipt this Period 2000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Kheder Davis & Associates PAC
Mailing Address 201 N Washington Sq Ste 905
City Lansing State MI Zip Code 48933
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt 12 / 05 / 2016
Transaction ID : SA11AI.5403
Amount of Each Receipt this Period 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Kramer, Michael, , ,
Mailing Address 1600 Apple Ln
City Bloomfield Hills State MI Zip Code 48302
FEC ID number of contributing federal political committee. C
Name of Employer Dickinson Wright Occupation Attorney
Receipt For: Primary General Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt 11 / 29 / 2016
Transaction ID : SA11AI.5423
Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 4000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 31
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Kramer, Zina, , ,
 Mailing Address 1600 Apple Ln
 City Bloomfield Hills State MI Zip Code 48302-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Events Marketing Occupation Owner
 Receipt For: Primary General Other (specify) ▼
 Election Cycle-to-Date 2700.00

Date of Receipt 11 / 30 / 2016
Transaction ID : SA11AI.5421
 Amount of Each Receipt this Period 2700.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Light, Timothy, , ,
 Mailing Address 1017 Essex Circle
 City Kalamazoo State MI Zip Code 49008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Election Cycle-to-Date 25000.00

Date of Receipt 12 / 29 / 2016
Transaction ID : SA11AI.5386
 Amount of Each Receipt this Period 25000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Lim, Henry, W, , MD
 Mailing Address 7 Elmsleigh Ln
 City Grosse Pointe State MI Zip Code 48230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Henry Ford Health System Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Election Cycle-to-Date 500.00

Date of Receipt 12 / 15 / 2016
Transaction ID : SA11AI.5453
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 28200.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 31
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Magner, Marjorie, , ,

Mailing Address 190 E 72nd St Apt 35D

City: New York State: NY Zip Code: 10021

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

Name of Employer: Brysam Global Partners Occupation: Partner

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2500.00

Date of Receipt: 12 / 05 / 2016

Transaction ID : SA11AI.5458

Amount of Each Receipt this Period: 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mahone, Barbara, , ,

Mailing Address PO Box 460

City: Birmingham State: MI Zip Code: 48012

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

Name of Employer: . Occupation: Retired

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 01 / 2016

Transaction ID : SA11AI.5486

Amount of Each Receipt this Period: 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Moin, Ali, , ,

Mailing Address 1175 Three Mile

City: Grosse Pointe Park State: MI Zip Code: 48230

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

Name of Employer: Self-employed Occupation: Physician

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 29 / 2016

Transaction ID : SA11AI.5426

Amount of Each Receipt this Period: 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 17 OF 31
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Mullany, Joseph, , ,

Mailing Address 2169 Tottenham Rd

City Bloomfield Hills State MI Zip Code 48301

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

Name of Employer Detroit Medical Center Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 13 / 2016

Transaction ID : SA11AI.5452

Amount of Each Receipt this Period
5400.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Nelson, Linden, D, ,

Mailing Address 1999 Centerpoint Parkway

City Pontiac State MI Zip Code 48341

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

Name of Employer Nelson Ventures Occupation Real Estate Investor

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 20 / 2016

Transaction ID : SA11AI.5398

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Olsman, Jules, , ,

Mailing Address 26341 Hendrie Blvd.

City Huntington Woods State MI Zip Code 48070

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

Name of Employer Olsman Mueller Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2016

Transaction ID : SA11AI.5466

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 10100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Orley, Diane, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2016	
Mailing Address 6379 Muirfield			Transaction ID : SA11AI.5429	
City Bloomfield Hills	State MI	Zip Code 48301	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer .		Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Penske, Kathryn, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	
Mailing Address 2555 Telegraph Rd			Transaction ID : SA11AI.5441	
City Bloomfield Hills	State MI	Zip Code 48302	Amount of Each Receipt this Period 15000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer .		Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 15000.00		

Full Name (Last, First, Middle Initial) C. Penske, Roger, S, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 06 / 2016	
Mailing Address 2555 Telegraph Rd			Transaction ID : SA11AI.5408	
City Bloomfield Hills	State MI	Zip Code 48302	Amount of Each Receipt this Period 15000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Penske Corporation		Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 15000.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	32000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Pollack, Lana, , ,

Mailing Address 345 Sumac Ln

City Ann Arbor	State MI	Zip Code 48105
-------------------	-------------	-------------------

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

Name of Employer International Joint Commission	Occupation Chair
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2016

Transaction ID : SA11AI.5432

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Premier Employee's Civic Action Fund

Mailing Address 444 N Capitol St NW Ste 625

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00346288

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2016

Transaction ID : SA11AI.5467

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Rich, David, , ,

Mailing Address 649 Prospect St

City Maplewood	State NJ	Zip Code 07040
-------------------	-------------	-------------------

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

Name of Employer Greater New York Hospital Assc	Occupation Executive Vice President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 7300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2016

Transaction ID : SA11AI.5388

Amount of Each Receipt this Period
 _____ 7300.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 9800.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Schreiber, Michelle, , MD			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 06 / 2016	
Mailing Address 1500 W Long Lake Rd			Transaction ID : SA11AI.5410	
City Bloomfield Hills	State MI	Zip Code 48302	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Henry Ford Health System		Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2700.00		

Full Name (Last, First, Middle Initial) B. Turner, Reginald, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2016	
Mailing Address 500 Woodward Suite 3500			Transaction ID : SA11AI.5435	
City Detroit	State MI	Zip Code 48226	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Clark Hill		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Weeks, Julie, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 01 / 2016	
Mailing Address 13601 S Beaver Pond Rd			Transaction ID : SA11AI.5488	
City Empire	State MI	Zip Code 49630	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Womenable		Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	5700.00
TOTAL This Period (last page this line number only)..... ▶	146150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 31		
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
ACADIA HEALTHCARE COMPANY INC FEDPAC

Mailing Address 6100 TOWER CIRCLE ROAD
SUITE 1000

City FRANKLIN State TN Zip Code 37067

FEC ID number of contributing federal political committee. **C** C00496919

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 01 / 2016

Transaction ID : SA11C.5491

Amount of Each Receipt this Period
2000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 31			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2016		
Mailing Address 366 Summer St			FEC Identification Number C		
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 665.58		
Purpose of Disbursement Processing Fee		Category/ Type	Transaction ID : SB17.5438		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2016		
Mailing Address 366 Summer St			FEC Identification Number C		
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 79.00		
Purpose of Disbursement Processing Fee		Category/ Type	Transaction ID : SB17.5447		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016		
Mailing Address 366 Summer St			FEC Identification Number C		
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 138.25		
Purpose of Disbursement Processing Fee		Category/ Type	Transaction ID : SB17.5462		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	882.83
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement
Mailing Address 366 Summer St		M M / D D / Y Y Y Y 12 / 31 / 2016
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Processing Fee		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 288.35
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5392
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement
Mailing Address 366 Summer St		M M / D D / Y Y Y Y 12 / 31 / 2016
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Processing Fee		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 19.75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5396
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Amazon		Date of Disbursement
Mailing Address 410 Terry Ave North		M M / D D / Y Y Y Y 12 / 13 / 2016
City Seattle	State WA	Zip Code 98109
Purpose of Disbursement Books		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 430.67
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5495
State: District:		<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	308.10
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Darnell, Ella, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016	
Mailing Address 11074 Lochgreen Dr.			FEC Identification Number C	
City Lansing	State MI	Zip Code 48917	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Compliance Consultant Fee		Category/ Type	Transaction ID : SB17.5472	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Rodgers, Annette, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016	
Mailing Address 12405 Jennings Rd.			FEC Identification Number C	
City Linden	State MI	Zip Code 48451	Amount of Each Disbursement this Period 430.67	
Purpose of Disbursement Reimburse Books		Category/ Type	Transaction ID : SB17.5494	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Rodgers, Annette, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016	
Mailing Address 12405 Jennings Rd.			FEC Identification Number C	
City Linden	State MI	Zip Code 48451	Amount of Each Disbursement this Period 52.80	
Purpose of Disbursement Reimburse Mileage		Category/ Type	Transaction ID : SB17.5497	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1983.47
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Rodgers, Annette, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016	
Mailing Address 12405 Jennings Rd.			FEC Identification Number C	
City Linden	State MI	Zip Code 48451	Amount of Each Disbursement this Period 52.80	
Purpose of Disbursement Reimburse Mileage		Category/ Type	Transaction ID : SB17.5498	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Rodgers, Annette, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016	
Mailing Address 12405 Jennings Rd.			FEC Identification Number C	
City Linden	State MI	Zip Code 48451	Amount of Each Disbursement this Period 240.18	
Purpose of Disbursement Reimburse Postage		Category/ Type	Transaction ID : SB17.5499	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Rodgers, Annette, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016	
Mailing Address 12405 Jennings Rd.			FEC Identification Number C	
City Linden	State MI	Zip Code 48451	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement Fundraising Consultant Fee		Category/ Type	Transaction ID : SB17.5470	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3792.98
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Scott Nelson Inc			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016	
Mailing Address 30867 Leelane			FEC Identification Number C	
City Farmington Hills	State MI	Zip Code 48336	Amount of Each Disbursement this Period 340.00	
Purpose of Disbursement Fundraiser Entertainment		Category/ Type	Transaction ID : SB17.5473	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. The UPS Store			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016	
Mailing Address 17195 Silver Pkwy			FEC Identification Number C	
City Fenton	State MI	Zip Code 48430	Amount of Each Disbursement this Period 240.18	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : SB17.5500	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

SUBTOTAL of Disbursements This Page (optional).....▶	340.00
TOTAL This Period (last page this line number only).....▶	7307.38

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 31	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Great Lakes PAC		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2016
Mailing Address 700 13TH STREET, NW SUITE 600		FEC Identification Number C C00375584
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement Transfer		Amount of Each Disbursement this Period 85000.00
Candidate Name		Transaction ID : SB18.5477
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016
Mailing Address 606 TOWNSEND ST.		FEC Identification Number C C00031054
City LANSING	State MI	Zip Code 48933
Purpose of Disbursement Transfer		Amount of Each Disbursement this Period 73100.00
Candidate Name		Transaction ID : SB18.5480
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. STABENOW FOR US SENATE		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016
Mailing Address P.O. BOX 4945		FEC Identification Number C C00344473
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement Transfer		Amount of Each Disbursement this Period 155775.00
Candidate Name		Transaction ID : SB18.5478
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MI District: 00		

SUBTOTAL of Disbursements This Page (optional).....▶	313875.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 31
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. STABENOW FOR US SENATE		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016
Mailing Address P.O. BOX 4945		FEC Identification Number C C00344473
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement Transfer		Amount of Each Disbursement this Period 74360.00
Candidate Name	Category/ Type	Transaction ID : SB18.5479
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MI District: 00		

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	74360.00
TOTAL This Period (last page this line number only).....▶	388235.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 31			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Davidson, Ethan, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016		
Mailing Address 444 Arlington St					
City Birmingham	State MI	Zip Code 48009	FEC Identification Number C		
Purpose of Disbursement Contribution Refund			Amount of Each Disbursement this Period 5000.00		
Candidate Name			Transaction ID : SB20A.5511		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B. Ford, Cynthia, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016		
Mailing Address 2000 Brush St. Ste 440					
City Detroit	State MI	Zip Code 48226	FEC Identification Number C		
Purpose of Disbursement Contribution Refund			Amount of Each Disbursement this Period 10000.00		
Candidate Name			Transaction ID : SB20A.5505		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) C. Ford, Edsel, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016		
Mailing Address 2000 Brush St. Ste 440					
City Detroit	State MI	Zip Code 48226	FEC Identification Number C		
Purpose of Disbursement Contribution Refund			Amount of Each Disbursement this Period 10000.00		
Candidate Name			Transaction ID : SB20A.5506		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	25000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 31			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Johnson, Vernon, R, ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016		
Mailing Address 264 George St			FEC Identification Number C		
City Birmingham	State MI	Zip Code 48009	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Contribution Refund		Category/ Type	Transaction ID : SB20A.5510		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	26000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 31	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Kheder Davis & Associates PAC			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016	
Mailing Address 201 N Washington Sq Ste 905			FEC Identification Number C	
City Lansing	State MI	Zip Code 48933	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Refund		Category/ Type	Transaction ID : SB20C.5502	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00