

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

ADDRESS (number and street) 7575 E FULTON ROAD Attn: Scott Smoes 56-3S ADA MI 49355

2. FEC IDENTIFICATION NUMBER C00034884 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2009 through 12 31 2009

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 Scott E Smoes

Signature of Treasurer Electronically Filed by Scott E Smoes Date 01 14 2010

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

Office Use Only FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |         |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|---------|
| 6. (a) Cash on Hand<br>January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 9 |  | 3722.28 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |         |
| 2   | 0                       | 0                                 | 9 |   |   |   |   |   |  |         |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 8263.15                 |                                   |   |   |   |   |   |   |  |         |
| (c) Total Receipts (from Line 19) .....   | 5745.87                 | 10286.74                          |   |   |   |   |   |   |  |         |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 14009.02                | 14009.02                          |   |   |   |   |   |   |  |         |
| 7. Total Disbursements (from Line 31) .....   | 8500.00                 | 8500.00                           |   |   |   |   |   |   |  |         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 5509.02                 | 5509.02                           |   |   |   |   |   |   |  |         |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |         |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Report Covering the Period: From:    To:

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | 5339.93                       | 9429.86                           |
| (ii) Unitemized .....  | 405.94                        | 856.88                            |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 5745.87                       | 10286.74                          |
| (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) .....     | 5745.87                       | 10286.74                          |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 5745.87                       | 10286.74                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 5745.87                       | 10286.74                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 21. Operating Expenditures:  |                                       |   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |                                       |   |
| (i) Federal Share.....   | 0.00                                  | 0.00                                      |
| (ii) Non-Federal Share.....  | 0.00                                  | 0.00                                      |
| (b) Other Federal Operating Expenditures.....  | 0.00                                  | 0.00                                      |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶                        | 0.00                                  | 0.00                                      |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                                  | 0.00                                      |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 8500.00                               | 8500.00                                   |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00                                  | 0.00                                      |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00                                  | 0.00                                      |
| 26. Loan Repayments Made.....  | 0.00                                  | 0.00                                      |
| 27. Loans Made.....  | 0.00                                  | 0.00                                      |
| 28. Refunds of Contributions To:   |                                       |   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                                  | 0.00                                      |
| (b) Political Party Committees   | 0.00                                  | 0.00                                      |
| (c) Other Political Committees (such as PACs) .....  | 0.00                                  | 0.00                                      |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00                                  | 0.00                                      |
| 29. Other Disbursements.....   | 0.00                                  | 0.00                                      |
| 30. Federal Election Activity (2 U.S.C 431(20))  |                                       |   |
| (a) Shared Federal Election Activity (from Schedule H6)  |                                       |   |
| (i) Federal Share .....  | 0.00                                  | 0.00                                      |
| (ii) "Levin" Share .....   | 0.00                                  | 0.00                                      |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                                  | 0.00                                      |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 0.00                                  | 0.00                                      |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 8500.00                               | 8500.00                                   |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 8500.00                               | 8500.00                                   |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 5745.87                       | 10286.74                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 5745.87                       | 10286.74                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 0.00                          | 0.00                              |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 13  
(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 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)  
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

**A.**

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

Mailing Address 7575 Fulton Street East

City State Zip Code  
Ada MI 49355

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

Name of Employer Alticor Occupation Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4673

Amount of Each Receipt this Period  
260.00

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth Dornan

Mailing Address 7575 East Fulton Street

City State Zip Code  
Ada MI 49355

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

Name of Employer Alticor Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4672

Amount of Each Receipt this Period  
260.00

**C.**

Full Name (Last, First, Middle Initial)  
Russell Evans

Mailing Address 7575 Fulton Street East

City State Zip Code  
Ada MI 49355

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

Name of Employer Alticor Inc Occupation Exec VP & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1999.92

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4679

Amount of Each Receipt this Period  
999.96

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1519.96**

**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 7 / 13  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

**A.** Full Name (Last, First, Middle Initial)  
 Robert W. Hamilton  
 Mailing Address 7575 Fulton Street East  
 City State Zip Code  
**Ada MI 49355**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Alticor Occupation Industry Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **499.98**  
 Date of Receipt **12 / 31 / 2009**  
**Transaction ID: SA11AI.4671**  
 Amount of Each Receipt this Period **249.99**

**B.** Full Name (Last, First, Middle Initial)  
 Richard N. Holwill  
 Mailing Address 624 Maryland Ave. NE #3  
 City State Zip Code  
**Washington DC 20002**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Alticor Occupation Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1000.00**  
 Date of Receipt **12 / 31 / 2009**  
**Transaction ID: SA11AI.4668**  
 Amount of Each Receipt this Period **1000.00**

**C.** Full Name (Last, First, Middle Initial)  
 Cary Justice  
 Mailing Address 2328 Gatetree Lane SE  
 City State Zip Code  
**Grand Rapids MI 49546**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Alticor, Inc Occupation Corporate Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **260.00**  
 Date of Receipt **12 / 31 / 2009**  
**Transaction ID: SA11AI.4676**  
 Amount of Each Receipt this Period **130.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1379.99**  
**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 8 / 13  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

**A.** Full Name (Last, First, Middle Initial)  
Mike Mohr

Mailing Address 7629 Silverthorn Drive

City State Zip Code  
Ada MI 49301

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

Name of Employer Alticor Inc      Occupation VP, General Counsel

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1040.00

Date of Receipt  

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

**Transaction ID:** SA11AI.4678

Amount of Each Receipt this Period  
520.00

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

Mailing Address 4289 Mulcaster Terr.

City State Zip Code  
Montclair VA 22025

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

Name of Employer      Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

**Transaction ID:** SA11AI.4666

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1738 Secretariat Drive SE

City State Zip Code  
Grand Rapids MI 49546

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

Name of Employer Alticor      Occupation VP - Global Services

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

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

**Transaction ID:** SA11AI.4670

Amount of Each Receipt this Period  
130.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

**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 9 / 13                  |
| (check only one)                        |                              |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
| <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

|   |   |                                    |   |  |  |
|---|---|------------------------------------|---|--|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Mitchell Urbytes     |                                    | Date of Receipt<br>MM / DD / YYYY<br>12 / 31 / 2009 |  |  |
|   | Mailing Address 1378 Spinnaker Court                            |                                    | <b>Transaction ID:</b> SA11AI.4677                  |  |  |
|   | City<br>Holland   | State<br>MI                        | Zip Code<br>49424                                   | Amount of Each Receipt this Period<br>260.00 |  |
|   | FEC ID number of contributing federal political committee.<br>C |                                    |   |  |  |
|   | Name of Employer<br>Alticor Inc.                                |                                    | Occupation<br>Mgr, Durables Strategic Business Line |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>520.00 |   |  |  |

|   |   |                                    |   |  |  |
|---|---|------------------------------------|---|--|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Craig V. Witcher     |                                    | Date of Receipt<br>MM / DD / YYYY<br>12 / 31 / 2009 |  |  |
|   | Mailing Address 6840 Bridgewater Drive SE                       |                                    | <b>Transaction ID:</b> SA11AI.4674                  |  |  |
|   | City<br>Grand Rapids  | State<br>MI                        | Zip Code<br>49546                                   | Amount of Each Receipt this Period<br>499.98 |  |
|   | FEC ID number of contributing federal political committee.<br>C |                                    |   |  |  |
|   | Name of Employer<br>Alticor                                     |                                    | Occupation<br>VP - Tax & General Counsel            |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>999.96 |   |  |  |

|   |   |                                     |   |  |  |
|---|---|-------------------------------------|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Michael J. Zarrelli  |                                     | Date of Receipt<br>MM / DD / YYYY<br>12 / 31 / 2009 |  |  |
|   | Mailing Address 7575 Fulton Street East                         |                                     | <b>Transaction ID:</b> SA11AI.4675                  |  |  |
|   | City<br>Ada   | State<br>MI                         | Zip Code<br>49355                                   | Amount of Each Receipt this Period<br>520.00 |  |
|   | FEC ID number of contributing federal political committee.<br>C |                                     |   |  |  |
|   | Name of Employer<br>Alticor                                     |                                     | Occupation<br>Government Affairs                    |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>1040.00 |   |  |  |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1279.98 |
| <b>TOTAL</b> 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 10 / 13  
(check only one)

|                                     |     |                          |     |                          |     |                          |    |                          |    |                          |    |                          |    |                          |    |                          |    |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> | 11c | <input type="checkbox"/> | 12 | <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 | <input type="checkbox"/> | 15 | <input type="checkbox"/> | 16 | <input type="checkbox"/> | 17 |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|

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NAME OF COMMITTEE (In Full)  
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A.

Full Name (Last, First, Middle Initial)  
Joseph Zeigler

Mailing Address 7575 East Fulton Street

City State Zip Code  
Ada MI 49355

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

Name of Employer Alticor Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4669

Amount of Each Receipt this Period  
260.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 260.00  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 5339.93 |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

|    |   |   |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial)<br><b>MICHELE BACHMANN</b>  | <b>Transaction ID: SB23.4692</b>  |
|    | Mailing Address <b>PO Box 25950</b>   | Date of Disbursement<br>MM / DD / YYYY<br><b>09 / 30 / 2009</b>   |
|    | City <b>Woodbury</b> State <b>MN</b> Zip Code <b>55125</b>  | Amount of Each Disbursement this Period<br><b>1000.00</b>   |
|    | Purpose of Disbursement   | Category/<br>Type   |
|    | Candidate Name  |   |
|    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    | State: <b>MN</b> District: <b>06</b>  |   |

|    |   |   |
|----|---|---|
| B. | Full Name (Last, First, Middle Initial)<br><b>MARY BONO</b>   | <b>Transaction ID: SB23.4684</b>  |
|    | Mailing Address <b>PO BOX 3370</b>  | Date of Disbursement<br>MM / DD / YYYY<br><b>09 / 30 / 2009</b>   |
|    | City <b>PALM SPRINGS</b> State <b>CA</b> Zip Code <b>92263</b>  | Amount of Each Disbursement this Period<br><b>1000.00</b>   |
|    | Purpose of Disbursement   | Category/<br>Type   |
|    | Candidate Name  |   |
|    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    | State: <b>CA</b> District: <b>45</b>  |   |

|    |   |   |
|----|---|---|
| C. | Full Name (Last, First, Middle Initial)<br><b>RICHARD BURR</b>  | <b>Transaction ID: SB23.4687</b>  |
|    | Mailing Address <b>POST OFFICE BOX 5928</b>   | Date of Disbursement<br>MM / DD / YYYY<br><b>12 / 21 / 2009</b>   |
|    | City <b>WINSTON-SALEM</b> State <b>NC</b> Zip Code <b>27113</b>   | Amount of Each Disbursement this Period<br><b>2000.00</b>   |
|    | Purpose of Disbursement   | Category/<br>Type   |
|    | Candidate Name  |   |
|    | Office Sought: <input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    | State: <b>NC</b> District: <b>00</b>  |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>4000.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/><b>WILLIAM P HUIZENGA</b></p> <p>Mailing Address 441 WILLIAM CT</p> <p>City ZEELAND State MI Zip Code 49464</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: MI District: 02</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> SB23.4694<br/><b>Date of Disbursement</b><br/>09 / 30 / 2009</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/><b>THADDEUS G MCCOTTER</b></p> <p>Mailing Address 18430 GOLFVIEW</p> <p>City LIVONIA State MI Zip Code 48152</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: MI District: 11</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB23.4697<br/><b>Date of Disbursement</b><br/>09 / 30 / 2009</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/><b>DAVE REICHERT</b></p> <p>Mailing Address P. O. Box 53322</p> <p>City Bellevue State WA Zip Code 98015</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: WA District: 08</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>     | <p><b>Transaction ID:</b> SB23.4685<br/><b>Date of Disbursement</b><br/>09 / 30 / 2009</p> <p>Amount of Each Disbursement this Period<br/>1500.00</p> |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>3500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

**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 13 / 13

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

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NAME OF COMMITTEE (In Full)  
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A.

Full Name (Last, First, Middle Initial)  
Tim WALBERG FOR CONGRESS

Transaction ID: SB23.4686

Date of Disbursement

Mailing Address 6769 Teachout Road

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 0 | 9 |

City Tipton State MI Zip Code 49287

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement

|  |
|--|
|  |
|--|

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MI District: 07

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

|         |
|---------|
| 1000.00 |
|---------|

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

|         |
|---------|
| 8500.00 |
|---------|