

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

TROTT FOR CONGRESS, INC.

ADDRESS (number and street)

2085 E. WEST MAPLE ROAD

A-101

Check if different than previously reported. (ACC)

COMMERCE

MI

48390

2. FEC IDENTIFICATION NUMBER

C C00548941

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MI

11

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY 04 / 01 / 2014

through

MM / DD / YYYY 06 / 30 / 2014

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 THOMAS J. MCCARTHY

Signature of Treasurer THOMAS J. MCCARTHY

[Electronically Filed]

Date

MM / DD / YYYY 11 / 19 / 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
TROTT FOR CONGRESS, INC.

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))....	1478980.00	3165351.79
(b) Total Contribution Refunds (from Line 20(d))	0.00	2400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1478980.00	3162951.79
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1302589.42	1945087.85
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	48.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1302589.42	1945039.85
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1467911.94	
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).....	305570.07	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

TROTT FOR CONGRESS, INC.

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).....	96480.00	948900.15
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	96480.00	948900.15
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	17500.00	43050.00
(d) The Candidate.....	1365000.00	2173401.64
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1478980.00	3165351.79
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	250000.00	250000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	250000.00	250000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	48.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1728980.00	3415399.79

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1302589.42	1945087.85
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	2400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2400.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1302589.42	1947487.85

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1041521.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1728980.00
25. SUBTOTAL (add Line 23 and Line 24).....	2770501.36
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1302589.42
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1467911.94

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DENISE ALEXANDER

Mailing Address 600 SOUTH ADAMS ROAD
SUITE 100

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer ALEXANDER, EISENBERG & SPILMAN Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.6713

Amount of Each Receipt this Period
250.00

PARTNERSHIP ATTRIBUTION - ALEXANDER, EISENBERG & SPILMAN
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ALEXANDER, EISENBERG & SPILMAN

Mailing Address 600 SOUTH ADAMS ROAD
SUITE 100

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.6708

Amount of Each Receipt this Period
250.00

PARTNERSHIP CONTRIBUTION - SEE ATTRIBUTION

C. Full Name (Last, First, Middle Initial)
HENRY J ANDRIES

Mailing Address 1776 WINTHROP LANE

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer STROBL & SHARP PC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 12 / 2014

Transaction ID : SA11AI.6558

Amount of Each Receipt this Period
500.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT JOSEPH BARDEN

Mailing Address 311 NORTH MAIN

City State Zip Code
ANN ARBOR MI 48104

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

Name of Employer Occupation
ANN ARBOR CREDIT BUREAU INCORPORAT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 07 / 2014

Transaction ID : SA11AI.6737

Amount of Each Receipt this Period
 200.00

B. Full Name (Last, First, Middle Initial)
TERRENCE A. BARR

Mailing Address 2779 INDIAN MOUND S.

City State Zip Code
BLOOMFIELD MI 48301

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

Name of Employer Occupation
TERRY BARR SALES SALES/OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.6638

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
CARL F BERRY

Mailing Address 45000 GOV. BRADFORD

City State Zip Code
PLYMOUTH MI 48170

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

Name of Employer Occupation
SELF SECURITY CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.6782

Amount of Each Receipt this Period
 75.00

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

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

1275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
GREGORY D BILL

Mailing Address 1441 SAINT ANTOINE ST
STE 701

City State Zip Code
DETROIT MI 48226-2363

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
75.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11A1.6784

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
BARBARA J. BREINING

Mailing Address 7610 WISTFUL VISTA DRIVE
UNIT 1302

City State Zip Code
WEST DES MOINES IA 50266

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
20.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 16 / 2014

Transaction ID : SA11A1.6814

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
MALCOLM D BROWN

Mailing Address BUTZEL LONG
41000 WOODWARD AVE, STONERIDGE WES

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2014

Transaction ID : SA11A1.6740

Amount of Each Receipt this Period
200.00

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

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

295.00

**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 8 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
RICHARD BURKE

Mailing Address 10128 CHANNEL ISLAND DR

City State Zip Code
AUSTIN TX 78747

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6820

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
DELBERT K CHENAULT

Mailing Address 1026 NORTHLAWN AVE

City State Zip Code
EAST LANSING MI 48823

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

Name of Employer Occupation
CLARK HILL PLC DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11AI.6598

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JUSTIN A CIALELLA

Mailing Address 1265 LEGACY CT

City State Zip Code
CANTON MI 48187

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

Name of Employer Occupation
SELF EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
75.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6786

Amount of Each Receipt this Period
75.00

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

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

335.00

**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 9 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JAMES V CLARKE

Mailing Address 2731 W HICKORY GROVE RD

City State Zip Code
BLOOMFIELD HILLS MI 48302

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

Name of Employer Occupation
ROBERTSON BROS. BUILDER AND DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2014

Transaction ID : SA11AI.6570

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
SOLOMON L COGAN

Mailing Address 24100 DRAKE ROAD

City State Zip Code
FARMINGTON MI 48335

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

Name of Employer Occupation
HEALTH QUEST CHIROPRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.6661

Amount of Each Receipt this Period
500.00

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

Mailing Address 2205 WINDSOR ROAD

City State Zip Code
ALEXANDRIA VA 22307

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

Name of Employer Occupation
NAVIGATORS GLOBAL LLC PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6670

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 10 OF 161
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MARGARET CURRIER

Mailing Address 19670 BEVERLY RD

City State Zip Code
BEVERLY HILLS MI 48025

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

Name of Employer Occupation
BANK OF BIRMINGHAM BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.6677

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
GARY D'ALESSANDRO

Mailing Address 28135 GROESBECK HWY

City State Zip Code
ROSEVILLE MI 48066

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

Name of Employer Occupation
LANZO HOLDING CO. CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.6587

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
GREGORY D DEGRAZIA

Mailing Address 2534 PEMBROKE ROAD

City State Zip Code
BIRMINGHAM MI 48009

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

Name of Employer Occupation
WARNER, NORCROSS AND JUDD ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.6563

Amount of Each Receipt this Period
500.00

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

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

1250.00

**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 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
W PATRICK DEISIG

Mailing Address 5556 CRABTREE

City State Zip Code
BLOOMFIELD HILLS MI 48301

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 10 / 2014

Transaction ID : SA11A1.6744

Amount of Each Receipt this Period
150.00

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

Mailing Address 2232 SUDBURY WAY

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer Occupation
A.J. DESMOND FUNERAL DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 06 / 2014

Transaction ID : SA11A1.6604

Amount of Each Receipt this Period
250.00

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

Mailing Address 1047 MADISON

City State Zip Code
BIRMINGHAM MI 48009

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

Name of Employer Occupation
BUTZEL LONG ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 06 / 2014

Transaction ID : SA11A1.6742

Amount of Each Receipt this Period
150.00

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

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

550.00

**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 12 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) ELAINE DICKERSON		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 527 S LYNNWOOD TRAIL		Transaction ID : SA11AI.6807	
City CEDAR PARK	State TX	Zip Code 78613	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee.		C	
Name of Employer BEST EFFORTS ATTEMPTED	Occupation BEST EFFORTS ATTEMPTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 25.00		

Full Name (Last, First, Middle Initial) ELAINE DICKERSON		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 527 S LYNNWOOD TRAIL		Transaction ID : SA11AI.6808	
City CEDAR PARK	State TX	Zip Code 78613	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee.		C	
Name of Employer BEST EFFORTS ATTEMPTED	Occupation BEST EFFORTS ATTEMPTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 50.00		

Full Name (Last, First, Middle Initial) GORDON W DIDIER		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2014	
Mailing Address 13060 BEACON HILL DR		Transaction ID : SA11AI.6647	
City PLYMOUTH	State MI	Zip Code 48170	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer BUTZEL LONG	Occupation ATTORNEY		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 300.00
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 13 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT FARR

Mailing Address **22518 FIDDLERS COVE**

City **BEVERLY HILLS** State **MI** Zip Code **48025**

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

Name of Employer **BANK OF BIRMINGHAM** Occupation **BANKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 16 / 2014

Transaction ID : SA11AI.6566

Amount of Each Receipt this Period
1000.00

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

Mailing Address **15444 HIDDEN OAKS LANE**

City **CARMEL** State **IN** Zip Code **46033**

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

Name of Employer **FEIWELL HANNOY P.C.** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.6555

Amount of Each Receipt this Period
2600.00

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

Mailing Address **15444 HIDDEN OAKS LANE**

City **CARMEL** State **IN** Zip Code **46033**

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

Name of Employer **FEIWELL HANNOY P.C.** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.6556

Amount of Each Receipt this Period
2600.00

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

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

6200.00

**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 14 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) JAY S FELDMAN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2014	
Mailing Address 633 HARMON STREET		Transaction ID : SA11AI.6565	
City BIRMINGHAM	State MI	Zip Code 48009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer FELDMAN AUTOMOTIVE	Occupation AUTO DEALER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) TIMOTHY J FORRESTER		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 4366 RISDON CT		Transaction ID : SA11AI.6689	
City BLOOMFIELD HILLS	State MI	Zip Code 48302	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer BEST EFFORTS ATTEMPTED	Occupation BEST EFFORTS ATTEMPTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) STEVE FOWLER		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2014	
Mailing Address 14955 SHERWOOD PARK DRIVE		Transaction ID : SA11AI.6590	
City SHELBY TOWNSHIP	State MI	Zip Code 48315	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer DETROIT LEGAL NEWS COMPANY	Occupation CHIEF FINANCIAL OFFICER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00		

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	1250.00

**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 15 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DAVID FRENKEL

Mailing Address 53 GIBSON STREET

City State Zip Code
BAY SHORE NY 11706

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

Name of Employer Occupation
FENKEL LAMBERT ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.6710

Amount of Each Receipt this Period
2600.00

PARTNERSHIP ATTRIBUTION - FRENKEL LAMBERT WEISS WEISMAN & GORDON, LLP
[MEMO ITEM]

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

Mailing Address 53 GIBSON STREET

City State Zip Code
BAY SHORE NY 11706

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

Name of Employer Occupation
FENKEL LAMBERT ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.6711

Amount of Each Receipt this Period
2400.00

PARTNERSHIP ATTRIBUTION - FRENKEL LAMBERT WEISS WEISMAN & GORDON, LLP
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
FRENKEL LAMBERT WEISS WEISMAN & GORDON, LLP

Mailing Address 53 GIBSON STREET

City State Zip Code
BAY SHORE NY 11706

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.6705

Amount of Each Receipt this Period
2600.00

PARTNERSHIP CONTRIBUTION - SEE ATTRIBUTION

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

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

2600.00

**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 16 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
FRENKEL LAMBERT WEISS WEISMAN & GORDON, LLP

Mailing Address 53 GIBSON STREET

City State Zip Code
BAY SHORE NY 11706

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.6706

Amount of Each Receipt this Period
2400.00

PARTNERSHIP CONTRIBUTION - SEE ATTRIBUTION

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

Mailing Address 11100 ANDENWOOD DR

City State Zip Code
AUSTIN TX 78726-1344

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6812

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
JAMES O FUTTERKNECHT

Mailing Address 2911 HEATHER CT.

City State Zip Code
BLOOMFIELD HILLS MI 48302

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11AI.6703

Amount of Each Receipt this Period
250.00

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

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

2675.00

**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 161
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
STEVEN GANTZ

Mailing Address 3081 BAYSHORE DRIVE

City State Zip Code
ORCHARD LAKE MI 48324

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.6685

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
J. ROBERT GILLETTE

Mailing Address 6755 TELEGRAPH ROAD, SUITE 330

City State Zip Code
BLOOMFIELD HILLS MI 48301

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.6691

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MAZY E GILLIS

Mailing Address 13114 ELGIN AVE

City State Zip Code
HUNTINGTON WOODS MI 48070

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

Name of Employer Occupation
GUARDIAN INDUST PSYCHOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.6775

Amount of Each Receipt this Period
100.00

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

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

1600.00

**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 18 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
THOMAS A GITTER

Mailing Address **816 LAKE ANGELUS SHORES**

City **ANGELUS SHORES** State **MI** Zip Code **48326**

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

Name of Employer **RALCO INDUSTRIES INC.** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 17 / 2014

Transaction ID : SA11AI.6583

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
HARRY J GLANZ

Mailing Address **17170 W. 12 MILE ROAD**

City **SOUTHFIELD** State **MI** Zip Code **48076**

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

Name of Employer **IMAGINE THEATRES** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.6665

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
GEORGE D GOSTIAS ESQ

Mailing Address **32437 FIVE MILE RD**

City **LIVONIA** State **MI** Zip Code **48154**

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

Name of Employer **LAW OFFICES OF GEORGE D GOSTIAS** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **75.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6793

Amount of Each Receipt this Period
75.00

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

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

3175.00

**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 19 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) BETH S GOTTHELF		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2014	
Mailing Address 550 CHESTER ST		Transaction ID : SA11AI.6649	
City BIRMINGHAM	State MI	Zip Code 48009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer BUTZEL LONG	Occupation ATTORNEY		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) H. S GREENAWALT		Date of Receipt M M / D D / Y Y Y Y 04 / 01 / 2014	
Mailing Address 3954 MOSELLE DRIVE		Transaction ID : SA11AI.6752	
City WEST BLOOMFIELD	State MI	Zip Code 48323	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 850.00		

Full Name (Last, First, Middle Initial) STEVEN R. GUIDOS		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 4601 ARDMORE DRIVE		Transaction ID : SA11AI.6623	
City BLOOMFIELD HILLS	State MI	Zip Code 48302	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer CUNNINGHAM LIMP CONSTRUCTION	Occupation PARTNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 20 OF 161
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
CHARLES HAHN

Mailing Address 9125 BLUE RIDGE DRIVE

City BRIGHTON State MI Zip Code 48116

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

Name of Employer TROTT & TROTT, P.C. Occupation LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014

Transaction ID : SA11AI.6800

Amount of Each Receipt this Period
 _____ 50.00

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

Mailing Address 5920 SNOWSHOE CIRCLE

City BLOOMFIELD HILLS State MI Zip Code 48301

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

Name of Employer O2 INVESTMENT PARTNERS Occupation PRIVATE EQUITY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2014

Transaction ID : SA11AI.6632

Amount of Each Receipt this Period
 _____ 1000.00

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

Mailing Address 6740 COMMERCE ROAD

City WEST BLOOMFIELD State MI Zip Code 48324

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

Name of Employer MICHIGAN CHAMBER OF COMMERCE Occupation SMALL BUSINESSS ADVOCATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : SA11AI.6642

Amount of Each Receipt this Period
 _____ 2100.00

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

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

_____ 3150.00

**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 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) WILLIAM P HAYDEN		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 747 E. WHITCOMB AVE		Transaction ID : SA11AI.6687	
City MADISON HTS.	State MI	Zip Code 48071	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer BEST EFFORTS ATTEMPTED	Occupation BEST EFFORTS ATTEMPTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) J. C. HUIZENGA		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2014	
Mailing Address 3755 36TH STREET SE SUITE 100		Transaction ID : SA11AI.6602	
City GRAND RAPIDS	State MI	Zip Code 49512	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer HUIZENGA GROUP	Occupation EXECUTIVE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) KENDRA M. HURD		Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2014	
Mailing Address 3975 S. SHORE DRIVE		Transaction ID : SA11AI.6634	
City COMMERCE TOWNSHIP	State MI	Zip Code 48382	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer COLDWELL BANKER WEIR MANUEL	Occupation REALTOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2500.00
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 22 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
EARL D ISHBIA

Mailing Address 4406 S. BAY

City ORCHARD LAKE State MI Zip Code 48323

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

Name of Employer SHERWOOD FOODS Occupation BUSINESSMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11A1.6575

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1106 CHARRINGTON

City BLOOMFIELD HILLS State MI Zip Code 48301

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11A1.6640

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 1106 CHARRINGTON

City BLOOMFIELD HILLS State MI Zip Code 48301

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11A1.6641

Amount of Each Receipt this Period
 2600.00

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

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

6200.00

**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 23 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MATTHEW R ISHBLA		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 1465 QUARTON RIDGE CIRCLE		Transaction ID : SA11AI.6630	
City BLOOMFIELD HILLS	State MI	Zip Code 48301	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer UNITED SHORE FINANCIAL SERVICES, LLC	Occupation PRESIDENT AND CEO		
Receipt For: 2014 <input checked="" 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. ELLEN JACOBS		Date of Receipt M M / D D / Y Y Y Y 04 / 11 / 2014	
Mailing Address 3856 PINE LAKE KNOLL		Transaction ID : SA11AI.6779	
City WEST BLOOMFIELD	State MI	Zip Code 48324	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 75.00	
Name of Employer CONGRESS COLLECTION CORPORATION	Occupation SALES		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 75.00		

Full Name (Last, First, Middle Initial) C. SUSAN JOHNSON		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2014	
Mailing Address 816 SPRINGFIELD DR		Transaction ID : SA11AI.6545	
City NORTHVILLE	State MI	Zip Code 48167-1054	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer BUTZEL LONG	Occupation ATTORNEY		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	1325.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 24 OF 161
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
KAVEN KASHEF

Mailing Address **576 LAKE SHORE LANE**

City **GROSSE POINTE WOODS** State **MI** Zip Code **48236**

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

Name of Employer **BEST EFFORTS ATTEMPTED** Occupation **BEST EFFORTS ATTEMPTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11AI.6763

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
RAAD S. KATHAWA

Mailing Address **1224 HIDDEN LAKE DRIVE**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48302**

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

Name of Employer **RYANS FOODS** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.6738

Amount of Each Receipt this Period
200.00

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

Mailing Address **PO BOX 510436**

City **MILWAUKEE** State **WI** Zip Code **53203**

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

Name of Employer **KEELEY COMPANY LLC** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
30.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11AI.6805

Amount of Each Receipt this Period
25.00

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

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

325.00

**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 25 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JEFF KIRKPATRICK

Mailing Address 401 S. JACKSON STREET

City JACKSON State MI Zip Code 49201

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

Name of Employer AMERICAN FIDELITY GROUP Occupation INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 10 / 2014

Transaction ID : SA11AI.6606

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JUSTIN G KLIMKO

Mailing Address 990 SOUTH OXFORD

City GROSSE POINTE WOODS State MI Zip Code 48236

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

Name of Employer BUTZEL LONG Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11AI.6651

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROBERT KURNICK JR

Mailing Address 2555 TELEGRAPH ROAD

City BLOOMFIELD HILLS State MI Zip Code 48302

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

Name of Employer PENSKE CORPORATION Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : SA11AI.6626

Amount of Each Receipt this Period
1000.00

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

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

2250.00

**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 26 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
GREGORY KIM LAYCOCK

Mailing Address 1144 E FOREST AVE

City YPSILANTI State MI Zip Code 48198-3910

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

Name of Employer WASHTENAW COMMUNITY COLLEGE Occupation BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11A1.6774

Amount of Each Receipt this Period
 100.00

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

Mailing Address 3684 EMBARCADERO

City WATERFORD State MI Zip Code 48329

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

Name of Employer TROTT RECOVERY SERVICES, PLLC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : SA11A1.6802

Amount of Each Receipt this Period
 50.00

C. Full Name (Last, First, Middle Initial)
MARK R. LEZOTTE

Mailing Address 150 W. JEFFERSON SUITE 100

City DETROIT State MI Zip Code 48226

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

Name of Employer BUTZEL LONG Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : SA11A1.6541

Amount of Each Receipt this Period
 250.00

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

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

400.00

**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 27 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DANA M LOCHISKAR

Mailing Address 2600 W. BIG BEAVER ROAD, SUITE 500

City State Zip Code
TROY MI 48084

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

Name of Employer Occupation
MERRILL LYNCH MANAGING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2014

Transaction ID : SA11AI.6616

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROBIN LUCE HERRMANN

Mailing Address 4682 ROLLING RIDGE ROAD

City State Zip Code
WEST BLOOMFIELD MI 48323

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

Name of Employer Occupation
BUTZEL LONG ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.6543

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
J. THOMAS MACFARLANE

Mailing Address 3165 TUCKAHOE ROAD

City State Zip Code
BLOOMFIELD MI 48301

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

Name of Employer Occupation
CLARK HILL PLC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.6548

Amount of Each Receipt this Period
250.00

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

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

750.00

**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 28 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JEFFREY M. MACKINNON

Mailing Address 3753 OLIVER STREET NW

City WASHINGTON State DC Zip Code 20015

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

Name of Employer BEST EFFORTS ATTEMPTED Occupation BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : SA11AI.6693

Amount of Each Receipt this Period
 500.00

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

Mailing Address 313 EAST HUDSON AVE

City ROYAL OAK State MI Zip Code 48067

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

Name of Employer ROYAL OAK RECYCLING Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.6666

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER T MAZUR

Mailing Address 5165 LONGMEADOW ROAD

City BLOOMFIELD HILLS State MI Zip Code 48034

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

Name of Employer LIBERTY UNION LIFE Occupation BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.6679

Amount of Each Receipt this Period
 500.00

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

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

2000.00

**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 29 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
RICHARD P. MAZUR

Mailing Address 30451 LINCOLNSHIRE E.

City State Zip Code
BEVERLY HILLS MI 48025

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : SA11AI.6695

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MICHAEL D MCKENNA

Mailing Address 2080 RHINE

City State Zip Code
WEST BLOOMFIELD MI 48323

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

Name of Employer Occupation
M.D. MCKENNA REALTY, LLC LANDLORD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11AI.6612

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
PATRICK M MCQUEEN

Mailing Address 38505 WOODWARD AVENUE
SUITE 1300

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer Occupation
MCQUEEN FINANCIAL CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.6592

Amount of Each Receipt this Period
500.00

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

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

1500.00

**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 30 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JOEL MECKLENBURG

Mailing Address 1199 BANNOCK

City DENVER State CO Zip Code 80204

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

Name of Employer ASSOCIATION PROTECTION SERVICES, LLC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2014

Transaction ID : SA11AI.6537

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 1199 BANNOCK

City DENVER State CO Zip Code 80204

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

Name of Employer ASSOCIATION PROTECTION SERVICES, LLC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2014

Transaction ID : SA11AI.6538

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 8429 GERHARDT STREET

City SHELBY TOWNSHIP State MI Zip Code 48317

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

Name of Employer BANK OF BIRMINGHAM Occupation EXECUTIVE VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.6600

Amount of Each Receipt this Period
 500.00

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

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

5700.00

**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 31 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DANIEL P MEYER		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 2506 DUXBURY PLACE		Transaction ID : SA11AI.6628	
City ALEXANDRIA	State VA	Zip Code 22308	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer THE DUBERSTEIN GROUP, INC.	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. JASON A. MOON		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014	
Mailing Address 6211 BROMLEY COURT		Transaction ID : SA11AI.6816	
City WEST BLOOMFIELD	State MI	Zip Code 48322	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00	
Name of Employer STUDENT	Occupation STUDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15.00		

Full Name (Last, First, Middle Initial) C. MIDGE MORAN		Date of Receipt M M / D D / Y Y Y Y 04 / 01 / 2014	
Mailing Address 269 ARLINGTON		Transaction ID : SA11AI.6751	
City BIRMINGHAM	State MI	Zip Code 48009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer MAX BROOCK	Occupation REALTOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

SUBTOTAL of Receipts This Page (optional).....	615.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 32 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ABE A MUNFAKH

Mailing Address 9335 SADDLEBROOK COURT

City State Zip Code
PLYMOUTH MI 48170

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

Name of Employer Occupation
MUNFAKH & ASSOCIATES CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6578

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CHARLES E MURPHY

Mailing Address 913 BLOOMFIELD KNOLL

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer Occupation
CLARK HILL PLC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.6550

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROBERT J MYLOD JR

Mailing Address 538 LOST DISTRICT DRIVE

City State Zip Code
NEW CANAAN CT 06840

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

Name of Employer Occupation
ANNOX CAPITAL MANAGEMENT LLC INVESTMENT PROFESSIONAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6608

Amount of Each Receipt this Period
2600.00

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

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

3850.00

**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 33 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
CHAD A NEEL

Mailing Address 1251 BILTMORE DRIVE

City SOUTHLAKE State TX Zip Code 76092

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

Name of Employer MCCARTHY HOLTHUS, LLP Occupation MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11A1.6767

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
JAMES A. NICHOLS III

Mailing Address 490 MARTELL DRIVE

City BLOOMFIELD HILLS State MI Zip Code 48304

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

Name of Employer BEST EFFORTS ATTEMPTED Occupation BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11A1.6697

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
JOSEPH J O'CONNOR

Mailing Address 803 WEST BIG BEARER ROAD
SUITE 203

City TROY State MI Zip Code 48084

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

Name of Employer KALPA SYSTEMS, INC. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11A1.6624

Amount of Each Receipt this Period
 1000.00

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

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

1600.00

**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 34 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) PEGGY O'NEILL		Date of Receipt M M / D D / Y Y Y Y 04 / 11 / 2014	
Mailing Address 1429 GRAYTON		Transaction ID : SA11AI.6795	
City GROSSE POINT PARK	State MI	Zip Code 48230	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer CHE TRINITY HEALTH	Occupation PROGRAM MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00		

Full Name (Last, First, Middle Initial) THOMAS OLDANI		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 1618 HARBAL DRIVE		Transaction ID : SA11AI.6759	
City ANN ARBOR	State MI	Zip Code 48105	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer ANN ARBOR CREDIT BUREAU, INC.	Occupation EXECUTIVE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

Full Name (Last, First, Middle Initial) TOM PARKER		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014	
Mailing Address 356 N. CLIFTON		Transaction ID : SA11AI.6643	
City BLOOMFIELD HILLS	State MI	Zip Code 48301	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer INSURANCE EXECUTIVE	Occupation UNIVERSAL F&C INSURANCE CO.		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

SUBTOTAL of Receipts This Page (optional).....	1150.00
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 35 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BRUCE PATTERSON

Mailing Address 42479 REDFERN STREET

City CANTON State MI Zip Code 48187

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.6675

Amount of Each Receipt this Period
250.00

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

Mailing Address 42479 REDFERN STREET

City CANTON State MI Zip Code 48187

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6749

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
PAUL J PEREIRA

Mailing Address 543 HENRIETTA STREET

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer MINOWITZ MANUFACTURING Occupation EXECUTIVE/OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.6663

Amount of Each Receipt this Period
2000.00

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

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

2375.00

**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 36 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT V PETERSON

Mailing Address 550 HERITAGE DRIVE

City ANN ARBOR State MI Zip Code 48105

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

Name of Employer DICKINSON WRIGHT PLLC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 06 / 2014

Transaction ID : SA11AI.6553

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
MEGAN J. PIWOWAR

Mailing Address P.O. BOX 1128

City WALLED LAKE State MI Zip Code 48390

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

Name of Employer TROTT FOR CONGRESS, INC. Occupation CAMPAIGN MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 01 / 2014

Transaction ID : SA11AI.6804

Amount of Each Receipt this Period
 25.00

C. Full Name (Last, First, Middle Initial)
RICHARD POLING JR

Mailing Address 5455 CORPORATE DRIVE SUITE 104

City TROY State MI Zip Code 48098

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

Name of Employer POLING MCGAW & POLING PC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.6772

Amount of Each Receipt this Period
 100.00

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

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

375.00

**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 37 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DAVID W POTTS

Mailing Address 600 S ADAMS
STE 100

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer DAVID W. POTTS, PLLC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11AI.6769

Amount of Each Receipt this Period
 100.00

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

Mailing Address 33 BLOOMFIELD HILLS PKWY

City BLOOMFIELD HILLS State MI Zip Code 48301

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

Name of Employer PULTE CAPITAL PARTNERS Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 20 / 2014

Transaction ID : SA11AI.6580

Amount of Each Receipt this Period
 2550.00

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

Mailing Address 33 BLOOMFIELD HILLS PKWY

City BLOOMFIELD HILLS State MI Zip Code 48301

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

Name of Employer PULTE CAPITAL PARTNERS Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 20 / 2014

Transaction ID : SA11AI.6581

Amount of Each Receipt this Period
 1850.00

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

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

4500.00

**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 38 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
THOMAS RADOM

Mailing Address 2924 LONG WINTER LANE

City State Zip Code
OAKLAND MI 48363

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

Name of Employer Occupation
BUTZEL LONG ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11Al.6653

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ABDUL K RAHAL

Mailing Address 8 WOODBIRDGE CT

City State Zip Code
DEARBORN MI 48124

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

Name of Employer Occupation
UNITED SHORE FINANCIAL SERVICES VICE CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11Al.6645

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JOHN RAKOLTA JR.

Mailing Address 1876 RATHMOR ROAD

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer Occupation
WALBRIDGE CHAIRMAN & FOUNDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11Al.6589

Amount of Each Receipt this Period
2600.00

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

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

3350.00

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

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

FOR LINE NUMBER: PAGE 39 OF 161
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
TERRY L. RAKOLTA

Mailing Address 1876 RATHMOR ROAD

City State Zip Code
BLOOMFIELD HILLS MI 48304

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.6636

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
PATRICK J. REDDY

Mailing Address 47441 EDINBURGH

City State Zip Code
PLYMOUTH MI 48170

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : SA11AI.6765

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
PETER G REMINGTON

Mailing Address 777 PURDY

City State Zip Code
BIRMINGHAM MI 48009

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

Name of Employer Occupation
THE REMINGTON GROUP CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11AI.6594

Amount of Each Receipt this Period
250.00

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

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

2950.00

**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 40 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MICAH EL J RIORDAN

Mailing Address 12516 LOCHNESS COURT

City State Zip Code
PLYMOUTH MI 48170

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

Name of Employer Occupation
STATE OF MICHIGAN MICHIGAN COURT OF APPEALS JUDGE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.6761

Amount of Each Receipt this Period
100.00

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

Mailing Address 779 S. BATES STREET

City State Zip Code
BIRMINGHAM MI 48009

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

Name of Employer Occupation
ROBERTSON BROTHERS BUILDER/DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 06 / 2014

Transaction ID : SA11AI.6571

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BARBARA A RODEN

Mailing Address 39551 LEGEND COURT

City State Zip Code
NORTHVILLE MI 48167

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

Name of Employer Occupation
SENIOR HELPERS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 08 / 2014

Transaction ID : SA11AI.6621

Amount of Each Receipt this Period
500.00

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

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

1100.00

**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 41 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MARLA M RONDO

Mailing Address 2337 CLAYMONT DRIVE

City State Zip Code
TROY MI 48098

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

Name of Employer Occupation
TROTT & TROTT, P.C. EXECUTIVE ASSISTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11Al.6798

Amount of Each Receipt this Period
50.00

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

Mailing Address 25132 PARKWOOD DRIVE

City State Zip Code
HUNTINGTON WOODS MI 48070

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

Name of Employer Occupation
BUTZEL LONG ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
125.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2014

Transaction ID : SA11Al.6748

Amount of Each Receipt this Period
125.00

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

Mailing Address 1866 KINMORE ST

City State Zip Code
DEARBORN HEIGHTS MI 48127

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

Name of Employer Occupation
ANTONIO'S CUCINA ITALIANA RESTAURANT OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11Al.6674

Amount of Each Receipt this Period
1000.00

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

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

1175.00

**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 42 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JOHN N SANTIEU

Mailing Address 1139 INKSTER RD

City State Zip Code
GARDEN CITY MI 48135-3042

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
75.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6789

Amount of Each Receipt this Period
75.00

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

Mailing Address 6025 NORTHFIELD

City State Zip Code
WEST BLOOMFIELD MI 48322

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

Name of Employer Occupation
SCHAFER DEVELOPMENT DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 06 / 2014

Transaction ID : SA11AI.6596

Amount of Each Receipt this Period
250.00

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

Mailing Address 599 HIDDEN FOREST TRAIL

City State Zip Code
TRAVERSE CITY MI 49686

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

Name of Employer Occupation
COLDWELL BANKER SCHMIDT REALTORS CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11AI.6577

Amount of Each Receipt this Period
500.00

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

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

825.00

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

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

FOR LINE NUMBER: PAGE 43 OF 161
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
GREGORY J SCHWARTZ JR.

Mailing Address 1753 PINE STREET

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer SCHWARTZ & CO. Occupation DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2014

Transaction ID : SA11AI.6618

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
GREGORY J SCHWARTZ JR.

Mailing Address 1753 PINE STREET

City BIRMINGHAM State MI Zip Code 48009

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

Name of Employer SCHWARTZ & CO. Occupation DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2014

Transaction ID : SA11AI.6619

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
PETER F SCHWARTZ

Mailing Address 3707 W. MAPLE

City BLOOMFIELD HILLS State MI Zip Code 48301

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

Name of Employer SCHWARTZ & CO. Occupation PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 06 / 2014

Transaction ID : SA11AI.6610

Amount of Each Receipt this Period
 250.00

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

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

5450.00

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

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

FOR LINE NUMBER: PAGE 44 OF 161
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ROBERT H SCHWARTZ

Mailing Address **6449 PINECROFT**

City **WEST BLOOMFIELD** State **MI** Zip Code **48322**

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

Name of Employer **BEST EFFORTS ATTEMPTED** Occupation **BEST EFFORTS ATTEMPTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 10 / 2014

Transaction ID : SA11AI.6746

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
ROY C. SGROI

Mailing Address **12414 WHITE TAIL COURT**

City **PLYMOUTH** State **MI** Zip Code **48170-2875**

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

Name of Employer **SELF EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.6754

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
GLENN SHAW JR

Mailing Address **38110 EXECUTIVE DRIVE
SUITE 100**

City **WESTLAND** State **MI** Zip Code **48185**

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

Name of Employer **GLENN SHAW & ASSOC.** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6585

Amount of Each Receipt this Period
1000.00

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

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

1250.00

**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 45 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JOANN SHEKERUK

Mailing Address 18763 SAN DIEGO BOULEVARD

City LATHRUP VILLAGE State MI Zip Code 48076

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

Name of Employer JOBRUCE TRAINING ASSOCIATES Occupation CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.6757

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JAMES J SIMONE

Mailing Address 43 BURNIAH LANE

City LAKE ORION State MI Zip Code 48362

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

Name of Employer BANK OF BIRMINGHAM Occupation BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2014

Transaction ID : SA11AI.6568

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DOMINIC M. SIWIK

Mailing Address 10787 STONEY POINT DRIVE

City SOUTH LYON State MI Zip Code 48178

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

Name of Employer FIRST AMERICAN SECURITIES Occupation INVESTMENT BANKING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **75.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA11AI.6781

Amount of Each Receipt this Period
75.00

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

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

675.00

**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 46 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CHRIS SOWERS		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 5347 BRISTOL PARKE DRIVE		Transaction ID : SA11AI.6699	
City CLARKSTON	State MI	Zip Code 48348	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer BEST EFFORTS ATTEMPTED	Occupation BEST EFFORTS ATTEMPTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. CHARLES SPIES		Date of Receipt M M / D D / Y Y Y Y 05 / 07 / 2014	
Mailing Address 736 N COLUMBUS ST.		Transaction ID : SA11AI.6551	
City ALEXANDRIA	State VA	Zip Code 22314	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer CLARK HILL PLC	Occupation ATTORNEY		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. DAVID STANISLAW		Date of Receipt M M / D D / Y Y Y Y 05 / 06 / 2014	
Mailing Address 485 HARMON		Transaction ID : SA11AI.6573	
City BIRMINGHAM	State MI	Zip Code 48009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer STANISLAW CONSULTING, LLC	Occupation BUSINESS CONSULTANT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

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

**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 47 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ROBERT STEWART		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 16250 NORTHLAND DRIVE #325		Transaction ID : SA11AI.6668
City SOUHTFIELD	State MI	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1500.00
Name of Employer ADVANCE STEEL	Occupation PRINCIPAL	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) B. PAMELA STOLER		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 567 CHESTER		Transaction ID : SA11AI.6672
City BIRMINGHAM	State MI	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00
Name of Employer HALL & HUNTER	Occupation REALTOR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. THOMAS L STROUP		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 44540 BIRCHWOOD CT		Transaction ID : SA11AI.6787
City NORTHVILLE	State MI	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 75.00
Name of Employer VALASET SERVICES LLC	Occupation OWNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 125.00	

SUBTOTAL of Receipts This Page (optional).....	2575.00
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 48 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. JANICE TANSEL		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 1295 EASON		Transaction ID : SA11AI.6803	
City WATERFORD	State MI	Zip Code 48328	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer TROTT & TROTT, P.C.	Occupation SR. EXECUTIVE ASSISTANT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) B. DUANE L. TARNACKI		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address 39824 WOODSIDE DRIVE N		Transaction ID : SA11AI.6546	
City NORTHVILLE	State MI	Zip Code 48168	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer CLARK HILL	Occupation ATTORNEY		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. AMBER R TAYLOR		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 145 CHARRINGTON COURT		Transaction ID : SA11AI.6701	
City BEVERLY HILLS	State MI	Zip Code 48025	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer BEST EFFORTS ATTEMPTED	Occupation BEST EFFORTS ATTEMPTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1050.00
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 49 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
LOUIS THEROS

Mailing Address 333 CLOVERLY RD

City State Zip Code
GROSSE POINTE FARMS MI 48236-3305

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

Name of Employer Occupation
BUTZEL LONG ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11AI.6655

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. BRADLEY L THOMPSON II

Mailing Address 2001 W LAFAYETTE BLVD

City State Zip Code
DETROIT MI 48216-1852

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

Name of Employer Occupation
DETROIT LEGAL NEWS CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11AI.6659

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
PEGGY L TOMPKINS

Mailing Address 807 ST FRANCIS LANE

City State Zip Code
HOUSTON TX 77079

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

Name of Employer Occupation
BEST EFFORTS ATTEMPTED BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.6810

Amount of Each Receipt this Period
25.00

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

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

525.00

**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 50 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MINDA TURNBULL

Mailing Address 128 MAGPIE GOOSE LANE

City LEANDER State TX Zip Code 78641

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

Name of Employer BEST EFFORTS ATTEMPTED Occupation BEST EFFORTS ATTEMPTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6818

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
GEORGE L. VANANTWERP III

Mailing Address 27971 ROLLCREST ROAD
APT 15

City FARMINGTON HILLS State MI Zip Code 48334-4062

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

Name of Employer MUNIDEALS COMPUTING SOURCE Occupation ACCOUNT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 20 / 2014

Transaction ID : SA11AI.6797

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. THOMAS VAN DUSEN

Mailing Address 3811 OAKHILLS DR.

City BLOOMFIELD HILLS State MI Zip Code 48301

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

Name of Employer BODMAN PLC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 16 / 2014

Transaction ID : SA11AI.6539

Amount of Each Receipt this Period
1000.00

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

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

1060.00

**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 51 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ADAM WAECHTER		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 20144 WELLESLEY COURT		Transaction ID : SA11A1.6777	
City BEVERLY HILLS	State MI	Zip Code 48025	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer BEST EFFORTS ATTEMPTED	Occupation BEST EFFORTS ATTEMPTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

Full Name (Last, First, Middle Initial) B. MARSHALL C WATSON		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 1800 NW 49TH STREET SUITE 120		Transaction ID : SA11A1.6681	
City FORT LAUDERDALE	State FL	Zip Code 33309	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer BEST EFFORTS ATTEMPTED	Occupation BEST EFFORTS ATTEMPTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) C. SUZANNE WATSON		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 1800 NW 49TH STREET SUITE 120		Transaction ID : SA11A1.6683	
City FORT LAUDERDALE	State FL	Zip Code 33309	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer BEST EFFORTS ATTEMPTED	Occupation BEST EFFORTS ATTEMPTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 52 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
PAUL F WELDAY

Mailing Address 26725 HOLLY HILL

City State Zip Code
FARMINGTON HILLS MI 48334

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

Name of Employer Occupation
SUPERIOR CAPITOL CONSULTING, L CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
75.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.6791

Amount of Each Receipt this Period
75.00

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

Mailing Address 45800 IRVINE DRIVE

City State Zip Code
NOVI MI 48374

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

Name of Employer Occupation
GENERAL MOTORS ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : SA11AI.6756

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DANA M WOTHE

Mailing Address 23291 TUMBLEWEED LN

City State Zip Code
BROWNSTOWN TWP MI 48183

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

Name of Employer Occupation
BUTZEL LONG COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11AI.6771

Amount of Each Receipt this Period
100.00

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

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

275.00

**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 53 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JOSEPH XUEREB

Mailing Address 17527 FARMCREST LANE

City NORTHVILLE State MI Zip Code 48168

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

Name of Employer XUEREB LAW GROUP Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.6564

Amount of Each Receipt this Period
 500.00

750.00

B. Full Name (Last, First, Middle Initial)
RANDE K. YEAGER

Mailing Address 427 FIELDSTONE DRIVE

City VENICE State FL Zip Code 34292

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

Name of Employer OLD REPUBLICTITLE.COM Occupation CEO/CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 16 / 2014

Transaction ID : SA11AI.6579

Amount of Each Receipt this Period
 250.00

1250.00

C. Full Name (Last, First, Middle Initial)
DAVID N ZACKS

Mailing Address 284 WOODWIND DRIVE

City BLOOMFIELD HILLS State MI Zip Code 48304

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

Name of Employer ISHBIA & GAGLEARD PC Occupation LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.6614

Amount of Each Receipt this Period
 1000.00

1000.00

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

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

1750.00

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 54 OF 161	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MARK ZAUSMER

Mailing Address **2298 LOCKLIN STREET**

City **WEST BLOOMFIELD** State **MI** Zip Code **48324**

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

Name of Employer **ZAUSMER KAUFFMAN AUGUST CALDWEL** Occupation **ATTORNEY/PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2014

Transaction ID : SA11Al.6657

Amount of Each Receipt this Period
1000.00

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

96480.00

**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 55 OF 161
	<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)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 509 2ND STREET, NE

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00034785**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 10 / 2014

Transaction ID : SA11C.6733

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
AMERICAN LAND TITLE ASSOCIATION TITLE INDUSTRY PAC (TIPAC)

Mailing Address 1828 L ST NW
SUITE 705

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00012914**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11C.6721

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 2300 WILSON BLVD.
SUITE 300

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C C00082917**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : SA11C.6719

Amount of Each Receipt this Period
 2500.00

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

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

5250.00

**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 56 OF 161
	<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)
TROTT FOR CONGRESS, INC.

A. BUSINESS-INDUSTRY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 888 16TH STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00001727**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.6729

Amount of Each Receipt this Period
 500.00

B. BUTZEL LONG FEDERAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 150 W JEFFERSON SUITE 100

City DETROIT State MI Zip Code 48226

FEC ID number of contributing federal political committee. **C C00375915**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.6731

Amount of Each Receipt this Period
 500.00

C. DETROIT REGIONAL CHAMBER FED PAC

Full Name (Last, First, Middle Initial)
Mailing Address ONE WOODWARD AVENUE, SUITE 1900

City DETROIT State MI Zip Code 48232

FEC ID number of contributing federal political committee. **C C00366872**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.6717

Amount of Each Receipt this Period
 3500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 57 OF 161
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Mailing Address **ONE POST STREET**
34TH FLOOR

City **SAN FRANCISCO** State **CA** Zip Code **94104**

FEC ID number of contributing federal political committee. **C C00108035**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11C.6715

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
MI ASSOC OF COLLECTION AGENCIES PAC

Mailing Address **PO BOX 182190**

City **SHELBY TOWNSHIP** State **MI** Zip Code **48318**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11C.6727

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

Mailing Address **7373 W. SAGINAW HIGHWAY**
P.O. BOX 30960

City **LANSING** State **MI** Zip Code **48917**

FEC ID number of contributing federal political committee. **C C00096362**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.6723

Amount of Each Receipt this Period
1000.00

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

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

6500.00

**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 58 OF 161
	<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)
TROTT FOR CONGRESS, INC.

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

Mailing Address **PO BOX 182520**

City **SHELBY TOWNSHIP** State **MI** Zip Code **48318-2520**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.6735

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
SERVICE CORPORATION INTERNATIONAL POLITICAL ACTION COMMITTEE (SCI/PAC)

Mailing Address **1929 ALLEN PARKWAY**

City **HOUSTON** State **TX** Zip Code **77019**

FEC ID number of contributing federal political committee. **C C00173096**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.6725

Amount of Each Receipt this Period

1000.00

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

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

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

Amount of Each Receipt this Period

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

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

1250.00

17500.00

**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 59 OF 161
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DAVID A. TROTT

Mailing Address 158 PARK LAKE DRIVE

City BIRMINGHAM State MI Zip Code 48009

FEC ID number of contributing federal political committee. **C H4MI11097**

Name of Employer TROTT & TROTT, P.C. Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1223401.64

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 06 / 2014

Transaction ID : SA11D.7011

Amount of Each Receipt this Period
165000.00

B. Full Name (Last, First, Middle Initial)
DAVID A. TROTT

Mailing Address 158 PARK LAKE DRIVE

City BIRMINGHAM State MI Zip Code 48009

FEC ID number of contributing federal political committee. **C H4MI11097**

Name of Employer TROTT & TROTT, P.C. Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2423401.64

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11D.7009

Amount of Each Receipt this Period
1200000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1365000.00

1365000.00

**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 60 OF 161
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DAVID A. TROTT

Mailing Address 158 PARK LAKE DRIVE

City State Zip Code
BIRMINGHAM MI 48009

FEC ID number of contributing federal political committee. **C H4MI11097**

Name of Employer Occupation
TROTT & TROTT, P.C. ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1058401.64

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : SA13A.7005

Amount of Each Receipt this Period
 250000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

250000.00

250000.00

**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 61 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. A BREATH OF SPRING FLORIST		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 6636 TELEGRAPH ROAD		Amount of Each Disbursement this Period 68.90
City BLOOMFIELD HILLS State MI Zip Code 48301	Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: EVENT STAGING EXPENSE	
Candidate Name		Transaction ID : SB17.6877 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. A BREATH OF SPRING FLORIST		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 6636 TELEGRAPH ROAD		Amount of Each Disbursement this Period 58.30
City BLOOMFIELD HILLS State MI Zip Code 48301	Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: EVENT STAGING EXPENSE	
Candidate Name		Transaction ID : SB17.6880 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. A BREATH OF SPRING FLORIST		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 6636 TELEGRAPH ROAD		Amount of Each Disbursement this Period 58.30
City BLOOMFIELD HILLS State MI Zip Code 48301	Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: EVENT STAGING EXPENSE	
Candidate Name		Transaction ID : SB17.6881 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 62 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 222.24
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 230.55
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 70.05
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	522.84
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 63 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 203.98 Transaction ID : SB17.6424
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 30.15 Transaction ID : SB17.6425
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 387.67 Transaction ID : SB17.6426
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	621.80
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 64 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 5555 HILTON AVENUE SUITE 106		Amount of Each Disbursement this Period 141.00 Transaction ID : SB17.6427
City BATON ROUGE	State LA	
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 208 S. AKARD STREET		Amount of Each Disbursement this Period 102.14 Transaction ID : SB17.6428
City DALLAS	State TX	
Purpose of Disbursement UTILITIES	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 208 S. AKARD STREET		Amount of Each Disbursement this Period 76.65 Transaction ID : SB17.6429
City DALLAS	State TX	
Purpose of Disbursement UTILITIES	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	319.79
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 65 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 208 S. AKARD STREET		Amount of Each Disbursement this Period 910.70 Transaction ID : SB17.6430
City DALLAS State TX Zip Code 75202	Purpose of Disbursement UTILITIES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 208 S. AKARD STREET		Amount of Each Disbursement this Period 443.11 Transaction ID : SB17.6431
City DALLAS State TX Zip Code 75202	Purpose of Disbursement UTILITIES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 208 S. AKARD STREET		Amount of Each Disbursement this Period 365.45 Transaction ID : SB17.6432
City DALLAS State TX Zip Code 75202	Purpose of Disbursement UTILITIES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	910.70
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 66 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. BILL BERTAKIS		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 2120 PARK CIRCLE		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.6342
City KEEGO HARBOUR	State MI	
Purpose of Disbursement PHOTOGRAPHY SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. BEST CHOICE PRINTING		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 27001 NORTHLINE RD		Amount of Each Disbursement this Period 1702.12 Transaction ID : SB17.7001 [MEMO ITEM]
City TAYLOR	State MI	
Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: EVENT STAGING EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. BICYCLE STREET INN		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 7416 MAIN ST		Amount of Each Disbursement this Period 208.80 Transaction ID : SB17.6978 [MEMO ITEM]
City MACKINAC ISLAND	State MI	
Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: TRAVEL: LODGING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	400.00
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 67 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. BICYCLE STREET INN		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 7416 MAIN ST		Amount of Each Disbursement this Period 754.00
City MACKINAC ISLAND State MI Zip Code 49757	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: TRAVEL: LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.6980 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BLUE CROSS BLUE SHIELD		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 25 NORTH MICHIGAN AVENUE		Amount of Each Disbursement this Period 300.00
City CHICAGO State IL Zip Code 60601	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: INSURANCE	
Candidate Name	Category/Type	Transaction ID : SB17.6934 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. BLUE CROSS BLUE SHIELD		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 25 NORTH MICHIGAN AVENUE		Amount of Each Disbursement this Period 300.00
City CHICAGO State IL Zip Code 60601	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: INSURANCE	
Candidate Name	Category/Type	Transaction ID : SB17.6905 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 68 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. BLUE CROSS BLUE SHIELD		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 25 NORTH MICHIGAN AVENUE		Amount of Each Disbursement this Period 300.00
City CHICAGO State IL Zip Code 60601	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: INSURANCE	
Candidate Name	Category/Type	Transaction ID : SB17.6993 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHARLES L. BOGREN		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2015.76
City WALLED LAKE State MI Zip Code 48390	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	Transaction ID : SB17.6343
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CHARLES L. BOGREN		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2015.77
City WALLED LAKE State MI Zip Code 48390	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	Transaction ID : SB17.6344
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4031.53
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 69 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CHARLES L. BOGREN			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014		
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 2015.76		
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6345		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. CHARLES L. BOGREN			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014		
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 2015.76		
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6346		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. CHARLES L. BOGREN			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014		
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 2015.77		
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6347		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	6047.29
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 70 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CHARLES L. BOGREN		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2015.76 Transaction ID : SB17.6348
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHARLES L. BOGREN		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2015.75 Transaction ID : SB17.6349
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BOYS AND GIRLS CLUB OF TROY		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 3670 JOHN R ROAD		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.6846 [MEMO ITEM]
City TROY	State MI	
Zip Code 48083	Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: EVENT REGISTRATION FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4031.51
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 71 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ELENA N. BRENNAN		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.6352
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ELENA N. BRENNAN		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 106.00 Transaction ID : SB17.6351
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ELENA N. BRENNAN		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.6353
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2356.00
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 72 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ELENA N. BRENNAN			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 750.00	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6354	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. KATHERINE A. CAMPBELL			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 587.11	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6359	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. KATHERINE A. CAMPBELL			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 587.12	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6360	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1924.23
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 73 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. KATHERINE A. CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 664.28 Transaction ID : SB17.6357
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KATHERINE A. CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 65.02 Transaction ID : SB17.6358
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT - SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. KATHERINE A. CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 587.10 Transaction ID : SB17.6361
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	664.28
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 74 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. KATHERINE A. CAMPBELL		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 587.12 Transaction ID : SB17.6362
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 300 FIRST STREET, SE		Amount of Each Disbursement this Period 44.13 Transaction ID : SB17.6434 [MEMO ITEM]
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement RACHINSKY REIMBURSEMENT - MEETING EXPENSE: MEALS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CLARK HILL P.L.C.		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 601 PENNSYLVANIA AVE NW NORTH BUILDING, SUITE 1000		Amount of Each Disbursement this Period 157.50 Transaction ID : SB17.6442
City WASHINGTON	State DC	
Zip Code 20004	Purpose of Disbursement LEGAL CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	744.62
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 75 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CLARK HILL P.L.C.			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 601 PENNSYLVANIA AVE NW NORTH BUILDING, SUITE 1000			Amount of Each Disbursement this Period 3289.73	
City WASHINGTON	State DC	Zip Code 20004	Transaction ID : SB17.6443	
Purpose of Disbursement LEGAL CONSULTING		Category/Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. CLARK HILL P.L.C.			Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014	
Mailing Address 601 PENNSYLVANIA AVE NW NORTH BUILDING, SUITE 1000			Amount of Each Disbursement this Period 725.00	
City WASHINGTON	State DC	Zip Code 20004	Transaction ID : SB17.6444	
Purpose of Disbursement LEGAL CONSULTING		Category/Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. CLAWSON CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 425 N MAIN STREET			Amount of Each Disbursement this Period 300.00	
City CLAWSON	State MI	Zip Code 48017	Transaction ID : SB17.6446	
Purpose of Disbursement EVENT REGISTRATION FEE		Category/Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	4314.73
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 76 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. COMBAT DATA		M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 13262 BLAISDELL DRIVE		Amount of Each Disbursement this Period 2200.00
City DEWITT	State MI Zip Code 48820	
Purpose of Disbursement DATA MANAGEMENT	Category/Type	Transaction ID : SB17.6447
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. COMBAT DATA		M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 13262 BLAISDELL DRIVE		Amount of Each Disbursement this Period 2200.00
City DEWITT	State MI Zip Code 48820	
Purpose of Disbursement DATA MANAGEMENT	Category/Type	Transaction ID : SB17.6448
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. COMMERCE PLACE		M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 2071 E. WEST MAPLE ROAD		Amount of Each Disbursement this Period 2100.00
City COMMERCE TOWNSHIP	State MI Zip Code 48390	
Purpose of Disbursement RENT	Category/Type	Transaction ID : SB17.6449
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6500.00
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 77 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COMMERCE PLACE		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 2071 E. WEST MAPLE ROAD		Amount of Each Disbursement this Period 2100.00 Transaction ID : SB17.6450
City COMMERCE TOWNSHIP	State MI	
Zip Code 48390	Purpose of Disbursement RENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. COMMERCE PLACE		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 2071 E. WEST MAPLE ROAD		Amount of Each Disbursement this Period 2100.00 Transaction ID : SB17.6451
City COMMERCE TOWNSHIP	State MI	
Zip Code 48390	Purpose of Disbursement RENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. COMMERCE PLACE		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 2071 E. WEST MAPLE ROAD		Amount of Each Disbursement this Period 2100.00 Transaction ID : SB17.6452
City COMMERCE TOWNSHIP	State MI	
Zip Code 48390	Purpose of Disbursement RENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6300.00
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 78 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ZACHARY M. COMOS			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 500.00	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6364	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. ZACHARY M. COMOS			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 500.00	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6365	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. ZACHARY M. COMOS			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 500.00	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6366	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1500.00
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 79 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COMPANY FOLDERS		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 3297 ORCHARD LAKE RD		Amount of Each Disbursement this Period 351.92
City KEEGO HARBOR	State MI	
Zip Code 48320	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: PRINTING & DESIGN SERVICES	Transaction ID : SB17.6940
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. COMPANY FOLDERS		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 3297 ORCHARD LAKE RD		Amount of Each Disbursement this Period 212.00
City KEEGO HARBOR	State MI	
Zip Code 48320	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: PRINTING & DESIGN SERVICES	Transaction ID : SB17.6963
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. CONNECTIVIST MEDIA		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 544 E. OGDEN AVENUE SUITE 700-161		Amount of Each Disbursement this Period 3599.00
City MILWAUKEE	State WI	
Zip Code 53202	Purpose of Disbursement WEB DEVELOPMENT	Transaction ID : SB17.6453
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3599.00
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 80 OF 161			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CONNECTIVIST MEDIA			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014		
Mailing Address 544 E. OGDEN AVENUE SUITE 700-161			Amount of Each Disbursement this Period 3463.00		
City MILWAUKEE	State WI	Zip Code 53202	Transaction ID : SB17.6454		
Purpose of Disbursement WEB DEVELOPMENT		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. CONNECTIVIST MEDIA			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014		
Mailing Address 544 E. OGDEN AVENUE SUITE 700-161			Amount of Each Disbursement this Period 4199.00		
City MILWAUKEE	State WI	Zip Code 53202	Transaction ID : SB17.6455		
Purpose of Disbursement WEB DEVELOPMENT		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. CONSUMERS ENERGY			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014		
Mailing Address PO BOX 740786			Amount of Each Disbursement this Period 258.49		
City CINCINNATI	State OH	Zip Code 45274	Transaction ID : SB17.6456		
Purpose of Disbursement UTILITIES		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	7920.49
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 81 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CONSUMERS ENERGY		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address PO BOX 740786		Amount of Each Disbursement this Period 253.35 Transaction ID : SB17.6457
City CINCINNATI State OH Zip Code 45274	Purpose of Disbursement UTILITIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CONSUMERS ENERGY		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address PO BOX 740786		Amount of Each Disbursement this Period 88.16 Transaction ID : SB17.6458
City CINCINNATI State OH Zip Code 45274	Purpose of Disbursement UTILITIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 3000 COMMERCE CROSSING		Amount of Each Disbursement this Period 65.13 Transaction ID : SB17.6892 [MEMO ITEM]
City COMMERCE State MI Zip Code 48382	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	253.35
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 82 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 3000 COMMERCE CROSSING		Amount of Each Disbursement this Period 76.55
City COMMERCE	State MI	
Zip Code 48382	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: OFFICE FURNITURE	Transaction ID : SB17.6912
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 3000 COMMERCE CROSSING		Amount of Each Disbursement this Period 62.04
City COMMERCE	State MI	
Zip Code 48382	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES	Transaction ID : SB17.6925
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 3000 COMMERCE CROSSING		Amount of Each Disbursement this Period 80.91
City COMMERCE	State MI	
Zip Code 48382	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES	Transaction ID : SB17.6947
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 83 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 3000 COMMERCE CROSSING		Amount of Each Disbursement this Period 4,000.00 163.98
City COMMERCE	State MI	
Purpose of Disbursement 5/21 PIOWAR REIMBURSEMENT: OFFICE SUPPLIES		Transaction ID : SB17.6966
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 3000 COMMERCE CROSSING		Amount of Each Disbursement this Period 4,000.00 174.09
City COMMERCE	State MI	
Purpose of Disbursement 6/25 PIOWAR REIMBURSEMENT: OFFICE SUPPLIES		Transaction ID : SB17.6986
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 4,000.00 43.95
City FARMINGTON HILLS	State MI	
Purpose of Disbursement PAYROLL FEES		Transaction ID : SB17.6459
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	43.95
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 84 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 6144.88
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL TAXES	
Candidate Name	Category/Type	Transaction ID : SB17.6460
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 43.95
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name	Category/Type	Transaction ID : SB17.6461
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 4061.15
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL TAXES	
Candidate Name	Category/Type	Transaction ID : SB17.6462
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10249.98
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 85 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 43.95 Transaction ID : SB17.6463
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 4048.03 Transaction ID : SB17.6464
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL TAXES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 47.45 Transaction ID : SB17.6465
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4139.43
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 86 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CSS PAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014	
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102			Amount of Each Disbursement this Period 4314.09	
City FARMINGTON HILLS	State MI	Zip Code 48335	Transaction ID : SB17.6466	
Purpose of Disbursement PAYROLL TAXES		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. CSS PAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014	
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102			Amount of Each Disbursement this Period 57.95	
City FARMINGTON HILLS	State MI	Zip Code 48335	Transaction ID : SB17.6467	
Purpose of Disbursement PAYROLL FEES		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. CSS PAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014	
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102			Amount of Each Disbursement this Period 4314.00	
City FARMINGTON HILLS	State MI	Zip Code 48335	Transaction ID : SB17.6468	
Purpose of Disbursement PAYROLL TAXES		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	8686.04
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 87 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 54.95 Transaction ID : SB17.6469
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 4314.09 Transaction ID : SB17.6470
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 54.95 Transaction ID : SB17.6471
City FARMINGTON HILLS State MI Zip Code 48335	Purpose of Disbursement PAYROLL FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4423.99
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 88 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CSS PAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 34034 W. EIGHT MILE ROAD SUITE 102		Amount of Each Disbursement this Period 4314.09
City FARMINGTON HILLS	State MI Zip Code 48335	
Purpose of Disbursement PAYROLL TAXES	Category/Type	Transaction ID : SB17.6472
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DAC PARKING GARAGE		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 241 MADISON ST		Amount of Each Disbursement this Period 8.00
City DETROIT	State MI Zip Code 48226	
Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: PARKING SERVICES	Category/Type	Transaction ID : SB17.6911 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SARAH E. DAVIS		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1000.00
City WALLED LAKE	State MI Zip Code 48390	
Purpose of Disbursement PAYROLL	Category/Type	Transaction ID : SB17.6368
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5314.09
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 89 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. SARAH E. DAVIS		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.6369
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SARAH E. DAVIS		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.6370
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. DECIDER STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 2420 MULBERRY CT		Amount of Each Disbursement this Period 15000.00 Transaction ID : SB17.6473
City ANN ARBOR	State MI	
Zip Code 48104	Purpose of Disbursement STRATEGY CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	16000.00
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 90 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DECIDER STRATEGIES		Date of Disbursement
Mailing Address 2420 MULBERRY CT		M M / D D / Y Y Y Y 04 / 24 / 2014
City ANN ARBOR	State MI	Zip Code 48104
Purpose of Disbursement STRATEGY CONSULTING	Amount of Each Disbursement this Period 15000.00	
Candidate Name	Transaction ID : SB17.6474	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. DECIDER STRATEGIES		Date of Disbursement
Mailing Address 2420 MULBERRY CT		M M / D D / Y Y Y Y 05 / 21 / 2014
City ANN ARBOR	State MI	Zip Code 48104
Purpose of Disbursement STRATEGY CONSULTING	Amount of Each Disbursement this Period 15000.00	
Candidate Name	Transaction ID : SB17.6475	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. DECIDER STRATEGIES		Date of Disbursement
Mailing Address 2420 MULBERRY CT		M M / D D / Y Y Y Y 06 / 12 / 2014
City ANN ARBOR	State MI	Zip Code 48104
Purpose of Disbursement STRATEGY CONSULTING	Amount of Each Disbursement this Period 15600.00	
Candidate Name	Transaction ID : SB17.6476	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....	45600.00
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 91 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DELTA		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 1030 DELTA BLVD		Amount of Each Disbursement this Period 1444.00
City DELTA	State GA Zip Code 30354	
Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: TRAVEL: AIR		Transaction ID : SB17.6938
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. DETROIT NEWS PARKING		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 99 W FORT ST		Amount of Each Disbursement this Period 9.00
City DETROIT	State MI Zip Code 48226	
Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: PARKING SERVICES		Transaction ID : SB17.6996
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. DETROIT PARKING GARAGE		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 1206 WOODWARD AVE		Amount of Each Disbursement this Period 12.00
City DETROIT	State MI Zip Code 48226	
Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: PARKING SERVICES		Transaction ID : SB17.6936
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 92 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

A. DIETZ TROTT SPORTS & ENTERTAINMENT

Full Name (Last, First, Middle Initial)
Mailing Address 31440 NORTHWESTERN HIGHWAY
SUITE 320

City FARMINGTON HILLS State MI Zip Code 48334

Purpose of Disbursement APPEARANCE FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 14 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.6477

B. DOLLAR TREE STORES, INC.

Full Name (Last, First, Middle Initial)
Mailing Address 2425 HAGGERTY HIGHWAY

City COMMERCE TOWNSHIP State MI Zip Code 48390

Purpose of Disbursement 6/12 CAMPBELL REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 15 / 2014

Amount of Each Disbursement this Period: 13.78

Transaction ID : SB17.6829

[MEMO ITEM]

C. DOWNTOWN PUBLICATIONS

Full Name (Last, First, Middle Initial)
Mailing Address 124 W MAPLE RD

City BIRMINGHAM State MI Zip Code 48009

Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: PRINT ADVERTISEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 17 / 2014

Amount of Each Disbursement this Period: 371.00

Transaction ID : SB17.6999

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 1000.00

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 93 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.6373
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 185.60 Transaction ID : SB17.6372
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.6374
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1685.60
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 94 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. COLIN E. DRISCOLL		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.6375
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. DROPBOX INC.		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 185 BERRY STREET		Amount of Each Disbursement this Period 99.00 Transaction ID : SB17.6479 [MEMO ITEM]
City SAN FRANCISCO	State CA	
Zip Code 94107	Purpose of Disbursement CAMPBELL REIMBURSEMENT - SOFTWARE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. DTE ENERGY		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address P.O. BOX 740786		Amount of Each Disbursement this Period 156.05 Transaction ID : SB17.6480
City CINCINNATI	State OH	
Zip Code 45274	Purpose of Disbursement UTILITIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	656.05
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 95 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DTE ENERGY		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address P.O. BOX 740786		Amount of Each Disbursement this Period 140.19 Transaction ID : SB17.6481
City CINCINNATI	State OH Zip Code 45274	
Purpose of Disbursement UTILITIES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DTE ENERGY		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address P.O. BOX 740786		Amount of Each Disbursement this Period 122.36 Transaction ID : SB17.6482
City CINCINNATI	State OH Zip Code 45274	
Purpose of Disbursement UTILITIES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. DTW PARKING GARAGE		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address E SRV RD		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.6957 [MEMO ITEM]
City ROMULUS	State MI Zip Code 48242	
Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: PARKING SERVICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	262.55
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 96 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. EFAQ PLUS SERVICE		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 6922 HOLLYWOOD BLVD 5TH FLOOR		Amount of Each Disbursement this Period 16.95
City LOS ANGELES State CA Zip Code 90028	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: NETWORK SERVICE	
Candidate Name	Category/Type	Transaction ID : SB17.6895 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. EFAQ PLUS SERVICE		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 6922 HOLLYWOOD BLVD 5TH FLOOR		Amount of Each Disbursement this Period 16.95
City LOS ANGELES State CA Zip Code 90028	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: NETWORK SERVICE	
Candidate Name	Category/Type	Transaction ID : SB17.6916 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. EFAQ PLUS SERVICE		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2014
Mailing Address 6922 HOLLYWOOD BLVD 5TH FLOOR		Amount of Each Disbursement this Period 16.95
City LOS ANGELES State CA Zip Code 90028	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: NETWORK SERVICE	
Candidate Name	Category/Type	Transaction ID : SB17.6939 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 97 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. EFAK PLUS SERVICE		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 6922 HOLLYWOOD BLVD 5TH FLOOR		Amount of Each Disbursement this Period 16.95
City LOS ANGELES	State CA Zip Code 90028	
Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: NETWORK SERVICE	Category/Type	Transaction ID : SB17.6979
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. KATHLEEN A. EVANS		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1000.00
City WALLED LAKE	State MI Zip Code 48390	
Purpose of Disbursement PAYROLL	Category/Type	Transaction ID : SB17.6378
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. KATHLEEN A. EVANS		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 192.36
City WALLED LAKE	State MI Zip Code 48390	
Purpose of Disbursement TRAVEL: MILEAGE	Category/Type	Transaction ID : SB17.6377
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1192.36
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 98 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. KATHLEEN A. EVANS			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 500.00	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6379	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. KATHLEEN A. EVANS			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 500.00	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6380	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. FEDEX			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014	
Mailing Address 28844 NORTHWESTERN HIGHWAY			Amount of Each Disbursement this Period 15.24	
City SOUTHFIELD	State MI	Zip Code 48034	Transaction ID : SB17.6886	
Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" 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).....	

**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 99 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FEDEX		M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 34.21
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name		Transaction ID : SB17.6887
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. FEDEX		M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.37
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name		Transaction ID : SB17.6890
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. FEDEX		M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.03
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name		Transaction ID : SB17.6893
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 100 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.79
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6900 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.79
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6906 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.03
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6907 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 101 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.03
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6909 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 3.78
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6865 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 38.26
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6914 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 102 OF 161	
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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.79
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6915 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 40.84
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6920 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.79
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6921 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 103 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.03
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6922 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 16.48
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6923 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.37
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6924 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 104 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.37
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6929 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 14.92
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6930 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 0.94
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6931 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 105 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 39.50
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6932 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 21.15
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6933 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.79
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6942 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 106 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.06
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6952 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.06
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6971 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 21.47
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6983 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 107 OF 161	
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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.06
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6985 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 06 / 07 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 1.79
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6989 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.06
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6991 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 108 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 7.06
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6994 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 28844 NORTHWESTERN HIGHWAY		Amount of Each Disbursement this Period 0.94
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.7002 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FINCH MULTIMEDIA		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 1577 SOUTH ALLEN ROAD		Amount of Each Disbursement this Period 125.00
City ST. CLAIR State MI Zip Code 48079	Purpose of Disbursement DIGITAL CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.6483
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	125.00
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 109 OF 161	
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NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FINCH MULTIMEDIA		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 1577 SOUTH ALLEN ROAD		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.6484
City ST. CLAIR State MI Zip Code 48079	Purpose of Disbursement DIGITAL CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. GEPETTO CATERING, INC.		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 4505 QUEENSBURY ROAD		Amount of Each Disbursement this Period 421.87 Transaction ID : SB17.6486
City RIVERDALE State MD Zip Code 20737	Purpose of Disbursement RACHINSKY REIMBURSEMENT - CATERING SERVICES	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. GOGO IN AIR		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 303 S TECHNOLOGY CT #A		Amount of Each Disbursement this Period 3.50 Transaction ID : SB17.6954
City BROOMFIELD State CO Zip Code 80021	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: NETWORK SERVICE	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 110 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. GOGO IN AIR		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 303 S TECHNOLOGY CT #A		Amount of Each Disbursement this Period 3.50
City BROOMFIELD	State CO Zip Code 80021	
Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: NETWORK SERVICE		Transaction ID : SB17.6955
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. GREAT DANE MARKETING SERVICES		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 5833 BINGHAM DRIVE		Amount of Each Disbursement this Period 6250.00
City TROY	State MI Zip Code 48085	
Purpose of Disbursement MARKETING CONSULTING		Transaction ID : SB17.6487
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) C. GREAT DANE MARKETING SERVICES		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 5833 BINGHAM DRIVE		Amount of Each Disbursement this Period 6250.00
City TROY	State MI Zip Code 48085	
Purpose of Disbursement MARKETING CONSULTING		Transaction ID : SB17.6488
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12500.00
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 111 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. GREAT DANE MARKETING SERVICES		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 5833 BINGHAM DRIVE		Amount of Each Disbursement this Period 8650.00 Transaction ID : SB17.6489
City TROY State MI Zip Code 48085	Purpose of Disbursement MARKETING CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1151.77 Transaction ID : SB17.6382
City WALLED LAKE State MI Zip Code 48390	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1151.77 Transaction ID : SB17.6383
City WALLED LAKE State MI Zip Code 48390	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8553.54
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 112 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 780.48 Transaction ID : SB17.6381
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1151.78 Transaction ID : SB17.6384
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1151.77 Transaction ID : SB17.6385
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3084.03
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 113 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1151.79 Transaction ID : SB17.6386
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1151.78 Transaction ID : SB17.6387
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TROY W. HUDSON		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1151.77 Transaction ID : SB17.6388
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3455.34
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 114 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. IKEA		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 41640 FORD RD		Amount of Each Disbursement this Period 19.06
City CANTON State MI Zip Code 48187	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.6976 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 139.92
City NOVI State MI Zip Code 48375	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: PRINTING & DESIGN SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6903 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 1905.84
City NOVI State MI Zip Code 48375	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: PRINTING & DESIGN SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6908 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 115 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 646.50
City NOVI	State MI	
Zip Code 48375		Transaction ID : SB17.6918
Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: PRINTING & DESIGN SERVICES		
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) B. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 129.80
City NOVI	State MI	
Zip Code 48375		Transaction ID : SB17.6919
Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: PRINTING & DESIGN SERVICES		
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) C. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 6955.72
City NOVI	State MI	
Zip Code 48375		Transaction ID : SB17.6490
Purpose of Disbursement PRINTING & DESIGN SERVICES		
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	6955.72
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 116 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 574.52
City NOVI State MI Zip Code 48375	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: PRINTING & DESIGN SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6943 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 858.50
City NOVI State MI Zip Code 48375	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: PRINTING & DESIGN SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6944 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 413.40
City NOVI State MI Zip Code 48375	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.6972 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 117 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 636.00
City NOVI	State MI	
Zip Code 48375	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES	Transaction ID : SB17.6973
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 1086.50
City NOVI	State MI	
Zip Code 48375	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES	Transaction ID : SB17.6974
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 6335.20
City NOVI	State MI	
Zip Code 48375	Purpose of Disbursement PRINTING & DESIGN SERVICES	Transaction ID : SB17.6491
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6335.20
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 118 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. IMPACT MEDIA PROFESSIONALS, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2016
Mailing Address 23715 NILAN DRIVE		Amount of Each Disbursement this Period 367.82
City NOVI	State MI	
Zip Code 48375	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: PRINTING & DESIGN SERVICES	Transaction ID : SB17.6968
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. JIMMY JOHNS		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 32619 NORTHWESTERN HWY		Amount of Each Disbursement this Period 110.14
City FARMINGTON HILLS	State MI	
Zip Code 48334	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: MEETING EXPENSE: MEALS	Transaction ID : SB17.6949
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. KK INSURANCE		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 508 WESTFORD ST		Amount of Each Disbursement this Period 168.00
City LOWELL	State MA	
Zip Code 01851	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: INSURANCE	Transaction ID : SB17.6897
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 119 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LAKE ELECTRONICS GROUP, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 1350 E. WEST MAPLE ROAD		Amount of Each Disbursement this Period 149.70
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement SECURITY SERVICES	Transaction ID : SB17.6492
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LAKES AREA CHAMBER OF COMMERCE		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 305 N. PONTIAC TRAIL SUITE B		Amount of Each Disbursement this Period 30.00
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: EVENT REGISTRATION FEE	Transaction ID : SB17.6844
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. LASERCOMP, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 34013 SCHOOLCRAFT RD		Amount of Each Disbursement this Period 121.98
City LIVONIA	State MI	
Zip Code 48150	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: OFFICE EQUIPMENT	Transaction ID : SB17.6884
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	149.70
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 120 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LASERCOMP, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 34013 SCHOOLCRAFT RD		Amount of Each Disbursement this Period 127.85
City LIVONIA State MI Zip Code 48150	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: OFFICE EQUIPMENT	
Candidate Name	Category/Type	Transaction ID : SB17.6926 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LASERCOMP, INC.		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 34013 SCHOOLCRAFT RD		Amount of Each Disbursement this Period 141.18
City LIVONIA State MI Zip Code 48150	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: OFFICE EQUIPMENT	
Candidate Name	Category/Type	Transaction ID : SB17.6964 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. LASERCOMP, INC.		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 34013 SCHOOLCRAFT RD		Amount of Each Disbursement this Period 229.95
City LIVONIA State MI Zip Code 48150	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: EQUIPMENT RENTAL	
Candidate Name	Category/Type	Transaction ID : SB17.6990 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 121 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LEO'S CONEY ISLAND		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 5076 HIGHLAND ROAD		Amount of Each Disbursement this Period 20.00
City WATERFORD State MI Zip Code 48329	Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.6852
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. LIVONIA CHAMBER OF COMMERCE		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 33233 5 MILE ROAD		Amount of Each Disbursement this Period 56.00
City LIVONIA State MI Zip Code 48154	Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: EVENT REGISTRATION FEE	
Candidate Name	Category/Type	Transaction ID : SB17.6837
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. LOONEY BAKER		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 13931 FARMINGTON RD		Amount of Each Disbursement this Period 7.20
City LIVONIA State MI Zip Code 48154	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.6959
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 122 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LOWE'S		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 2745 WEST MAPLE ROAD		Amount of Each Disbursement this Period 42.32
City COMMERCE TOWNSHIP	State MI	
Purpose of Disbursement PAVLOV REIMBURSEMENT - OFFICE SUPPLIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. LOWE'S		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 2745 WEST MAPLE ROAD		Amount of Each Disbursement this Period 2.09
City COMMERCE TOWNSHIP	State MI	
Purpose of Disbursement 6/12 CAMPBELL REIMBURSEMENT: OFFICE SUPPLIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. MADONNA UNIVERSITY		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 36600 SCHOOLCRAFT ROAD		Amount of Each Disbursement this Period 30.00
City LIVONIA	State MI	
Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: EVENT REGISTRATION FEE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 123 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MAJORITY STRATEGIES, INC.			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014	
Mailing Address 135 PROFESSIONAL DRIVE SUITE 104			Amount of Each Disbursement this Period 9930.18	
City PONTE VEDRA BEACH	State FL	Zip Code 32082	Transaction ID : SB17.6495	
Purpose of Disbursement DIRECT MAIL PRINTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. MARRIOTT			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014	
Mailing Address 10400 FERNWOOD ROAD			Amount of Each Disbursement this Period 500.00	
City BETHESDA	State MD	Zip Code 20817	Transaction ID : SB17.6889	
Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: FACILITY RENTAL		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. MARRIOTT			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014	
Mailing Address 10400 FERNWOOD ROAD			Amount of Each Disbursement this Period 479.76	
City BETHESDA	State MD	Zip Code 20817	Transaction ID : SB17.6962	
Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: TRAVEL: LODGING		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	9930.18
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 124 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 10400 FERNWOOD ROAD		Amount of Each Disbursement this Period 559.61
City	State	
BETHESDA	MD	Zip Code 20817
Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: TRAVEL: LODGING		Transaction ID : SB17.6992
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) B. MARRIOTT HOUSTON AIRPORT		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 18700 JOHN F KENNEDY BLVD		Amount of Each Disbursement this Period 338.13
City	State	
HOUSTON	TX	Zip Code 77032
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: TRAVEL: LODGING		Transaction ID : SB17.6867
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) C. MARSHALLS		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 31145 ORCHARD LAKE RD		Amount of Each Disbursement this Period 28.61
City	State	
FARMINGTON HILLS	MI	Zip Code 48334
Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: MEDIA PRODUCTION		Transaction ID : SB17.6961
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 125 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEIJER		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 1703 HAGGERTY		Amount of Each Disbursement this Period 160.05
City COMMERCE	State MI	
Zip Code 48390	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: TRAVEL: FUEL	Transaction ID : SB17.6891
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. MEIJER		Date of Disbursement MM / DD / YYYY 05 / 16 / 2014
Mailing Address 1703 HAGGERTY		Amount of Each Disbursement this Period 49.15
City COMMERCE	State MI	
Zip Code 48390	Purpose of Disbursement 6/12 CAMPBELL REIMBURSEMENT: OFFICE SUPPLIES	Transaction ID : SB17.6830
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. MICHIGAN OUTLAWS		Date of Disbursement MM / DD / YYYY 04 / 10 / 2014
Mailing Address 5755 MAJESTIC OAKS DRIVE		Amount of Each Disbursement this Period 250.00
City COMMERCE	State MI	
Zip Code 48382	Purpose of Disbursement EVENT SPONSORSHIP	Transaction ID : SB17.6498
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	250.00
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 126 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. NATIONAL RESEARCH, INC.			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014		
Mailing Address 146 STATE HIGHWAY 34 SUITE 250			Amount of Each Disbursement this Period 18000.00		
City HOLMDEL	State NJ	Zip Code 07733	Transaction ID : SB17.6499		
Purpose of Disbursement POLLING		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. NATIONAL RESEARCH, INC.			Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014		
Mailing Address 146 STATE HIGHWAY 34 SUITE 250			Amount of Each Disbursement this Period 12500.00		
City HOLMDEL	State NJ	Zip Code 07733	Transaction ID : SB17.6500		
Purpose of Disbursement POLLING		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. NATIONWIDE CANDY, LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014		
Mailing Address P.O. BOX 90153			Amount of Each Disbursement this Period 85.52		
City ALBUQUERQUE	State NM	Zip Code 87199	Transaction ID : SB17.6502		
Purpose of Disbursement TROTT REIMBURSEMENT - MEETING EXPENSE: MEALS		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	30500.00
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 127 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. NATIONWIDE CANDY, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address P.O. BOX 90153		Amount of Each Disbursement this Period -18.45
City ALBUQUERQUE	State NM Zip Code 87199	
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: REFUND: MEETING EXPENSE: MEALS		Transaction ID : SB17.6872
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. NOVI CHAMBER OF COMMERCE		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 41875 W. 11 MILE ROAD UNIT 201		Amount of Each Disbursement this Period 140.00
City NOVI	State MI Zip Code 48375	
Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: EVENT REGISTRATION FEE		Transaction ID : SB17.6850
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. OAKLAND COUNTY CLERK		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 1200 N TELEGRAPH RD		Amount of Each Disbursement this Period 46.00
City PONTIAC	State MI Zip Code 48341	
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: PRINTING		Transaction ID : SB17.6863
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 128 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. OAKLAND COUNTY CLERK		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1200 N TELEGRAPH RD		Amount of Each Disbursement this Period 2.00
City PONTIAC State MI Zip Code 48341	Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.6875 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. OAKLAND COUNTY CLERK		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 1200 N TELEGRAPH RD		Amount of Each Disbursement this Period 54.00
City PONTIAC State MI Zip Code 48341	Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.6878 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. OAKLAND COUNTY CLERK		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 1200 N TELEGRAPH RD		Amount of Each Disbursement this Period 44.00
City PONTIAC State MI Zip Code 48341	Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.6879 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 129 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. OAKLAND COUNTY CLERK		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 1200 N TELEGRAPH RD		Amount of Each Disbursement this Period 986.36
City PONTIAC	State MI	
Zip Code 48341	Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: PRINTING	Transaction ID : SB17.6882
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. OAKLAND COUNTY REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 42611 WOODWARD AVENUE		Amount of Each Disbursement this Period 50.00
City BLOOMFIELD HILLS	State MI	
Zip Code 48304	Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: EVENT REGISTRATION FEE	Transaction ID : SB17.6833
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 986.36
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Transaction ID : SB17.6391
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	986.36
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 130 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 49.88 Transaction ID : SB17.6389
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 986.36 Transaction ID : SB17.6392
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 986.35 Transaction ID : SB17.6393
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2022.59
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 131 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 91.07 Transaction ID : SB17.6390
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT - SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 986.34 Transaction ID : SB17.6394
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 986.36 Transaction ID : SB17.6395
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2063.77
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 132 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 986.35 Transaction ID : SB17.6396
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LINDSEY L. PAVLOV		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 986.35 Transaction ID : SB17.6397
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PERFECT SETTINGS		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1851 SOUTH CLUB DRIVE SUITE A		Amount of Each Disbursement this Period 460.53 Transaction ID : SB17.6504 [MEMO ITEM]
City LANDOVER	State MD	
Zip Code 20785	Purpose of Disbursement RACHINSKY REIMBURSEMENT - CATERING SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1972.70
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 133 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 5921.12 Transaction ID : SB17.6404
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 84.80 Transaction ID : SB17.6398
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 5582.91 Transaction ID : SB17.6399
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT - SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	11588.83
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 134 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEGAN J. PIWOWAR			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 2960.50	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6405	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. MEGAN J. PIWOWAR			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 2960.55	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6406	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. MEGAN J. PIWOWAR			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014	
Mailing Address P.O. BOX 1128			Amount of Each Disbursement this Period 2960.56	
City WALLED LAKE	State MI	Zip Code 48390	Transaction ID : SB17.6407	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	8881.61
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 135 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 48.80 Transaction ID : SB17.6400
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 5676.52 Transaction ID : SB17.6401
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT - SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2960.55 Transaction ID : SB17.6408
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8685.87
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 136 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2960.55 Transaction ID : SB17.6409
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 2960.56 Transaction ID : SB17.6410
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 256.80 Transaction ID : SB17.6402
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6177.91
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 137 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MEGAN J. PIWOWAR		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 6833.94 Transaction ID : SB17.6403
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT - SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PORT ATWATER PARKING		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 200 BEAUBIEN ST		Amount of Each Disbursement this Period 14.00 Transaction ID : SB17.6988 [MEMO ITEM]
City DETROIT	State MI	
Zip Code 48226	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: PARKING SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PROFORMA		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address PO BOX 640814		Amount of Each Disbursement this Period 384.25 Transaction ID : SB17.6506
City CINCINNATI	State OH	
Zip Code 45264	Purpose of Disbursement DONOR MEMENTOS: BASEBALL BATS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7218.19
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 138 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. JOE RACHINSKY		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address THE CATALYST GROUP 600 PENNSYLVANIA AVE. SE		Amount of Each Disbursement this Period 926.53 Transaction ID : SB17.6411
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement REIMBURSEMENT - SEE MEMO ENTRIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 836.55 Transaction ID : SB17.6507
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.6508
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4163.08
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 139 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. RED CURVE SOLUTIONS		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 2442.90
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.6509
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 2400.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.6510
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SHEPLER'S PARKING		Date of Disbursement MM / DD / YYYY 05 / 27 / 2014
Mailing Address 556 E CENTRAL		Amount of Each Disbursement this Period 28.00
City MACKINAC ISLAND State MI Zip Code 49701	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: PARKING SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.6982 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4842.90
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 140 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. SHOWSPAN, INC.		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 2121 CELEBRATION DRIVE NE		Amount of Each Disbursement this Period 900.00
City GRAND RAPIDS	State MI Zip Code 49525	
Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: EVENT REGISTRATION FEE		Transaction ID : SB17.6839
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. SOCIAL KITCHEN		Date of Disbursement MM / DD / YYYY 04 / 07 / 2014
Mailing Address 225 E MAPLE RD		Amount of Each Disbursement this Period 37.80
City BIRMINGHAM	State MI Zip Code 48009	
Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: MEETING EXPENSE: MEALS		Transaction ID : SB17.6928
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. SPORTS SHOWS PROMOTIONS, INC.		Date of Disbursement MM / DD / YYYY 02 / 22 / 2014
Mailing Address P.O. BOX 404		Amount of Each Disbursement this Period 45.00
City MASON	State MI Zip Code 48854	
Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: EVENT REGISTRATION FEE		Transaction ID : SB17.6835
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 141 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ST. EDITH CATHOLIC SCHOOL		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 15089 NEWBURGH		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.6512
City LIVONIA State MI Zip Code 48154	Purpose of Disbursement EVENT REGISTRATION FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 122.93 Transaction ID : SB17.6899
City WALLED LAKE State MI Zip Code 48390	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: EVENT STAGING EXPENSE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 16.41 Transaction ID : SB17.6840
City WALLED LAKE State MI Zip Code 48390	Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	250.00
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 142 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 05 / 08 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 48.75
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement PAVLOV REIMBURSEMENT - OFFICE SUPPLIES	Transaction ID : SB17.6513 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 152.62
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES	Transaction ID : SB17.6965 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address 335 HAGGERTY		Amount of Each Disbursement this Period 21.72
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES	Transaction ID : SB17.6997 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 143 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. STARBUCKS		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 2254 NORTHWESTERN HWY		Amount of Each Disbursement this Period 14.31
City SOUTHFIELD State MI Zip Code 48034	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	Transaction ID : SB17.6951 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. STRATEGIC MEDIA PLACEMENT		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period 198075.00
City DELAWARE State OH Zip Code 43015	Purpose of Disbursement MEDIA PLACEMENT	
Candidate Name	Category/Type	Transaction ID : SB17.6515
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. STRATEGIC MEDIA PLACEMENT		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period 14250.00
City DELAWARE State OH Zip Code 43015	Purpose of Disbursement MEDIA PLACEMENT	
Candidate Name	Category/Type	Transaction ID : SB17.6516
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	212325.00
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 144 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. STRATEGIC MEDIA PLACEMENT		M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period
City DELAWARE State OH Zip Code 43015		204250.00
Purpose of Disbursement MEDIA PLACEMENT		Transaction ID : SB17.6517
Candidate Name		Category/Type
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. STRATEGIC MEDIA PLACEMENT		M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period
City DELAWARE State OH Zip Code 43015		47500.00
Purpose of Disbursement MEDIA PLACEMENT		Transaction ID : SB17.6518
Candidate Name		Category/Type
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. STRATEGIC MEDIA PLACEMENT		M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period
City DELAWARE State OH Zip Code 43015		100000.00
Purpose of Disbursement MEDIA PLACEMENT		Transaction ID : SB17.6519
Candidate Name		Category/Type
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	351750.00
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 145 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. STRATEGIC MEDIA PLACEMENT		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>12</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		12		2014
M M	/	D D	/	Y Y Y Y								
06		12		2014								
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>DELAWARE</td> <td>OH</td> <td>43015</td> </tr> </table>		City	State	Zip Code	DELAWARE	OH	43015	<table border="1"> <tr> <td>104250.00</td> </tr> </table>	104250.00			
City	State	Zip Code										
DELAWARE	OH	43015										
104250.00												
Purpose of Disbursement MEDIA PLACEMENT		Transaction ID : SB17.6520										
Candidate Name												
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/></td> <td>House</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Senate</td> </tr> <tr> <td><input type="checkbox"/></td> <td>President</td> </tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Category/ Type				
<input type="checkbox"/>	House											
<input type="checkbox"/>	Senate											
<input type="checkbox"/>	President											
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. STRATEGIC MEDIA PLACEMENT		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		18		2014
M M	/	D D	/	Y Y Y Y								
06		18		2014								
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>DELAWARE</td> <td>OH</td> <td>43015</td> </tr> </table>		City	State	Zip Code	DELAWARE	OH	43015	<table border="1"> <tr> <td>204250.00</td> </tr> </table>	204250.00			
City	State	Zip Code										
DELAWARE	OH	43015										
204250.00												
Purpose of Disbursement MEDIA PLACEMENT		Transaction ID : SB17.6521										
Candidate Name												
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/></td> <td>House</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Senate</td> </tr> <tr> <td><input type="checkbox"/></td> <td>President</td> </tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Category/ Type				
<input type="checkbox"/>	House											
<input type="checkbox"/>	Senate											
<input type="checkbox"/>	President											
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. STRATEGIC NATIONAL LLC		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	04		14		2014
M M	/	D D	/	Y Y Y Y								
04		14		2014								
Mailing Address 190 MONROE AVE NW 5TH FLOOR		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>GRAND RAPIDS</td> <td>MI</td> <td>49503</td> </tr> </table>		City	State	Zip Code	GRAND RAPIDS	MI	49503	<table border="1"> <tr> <td>20000.00</td> </tr> </table>	20000.00			
City	State	Zip Code										
GRAND RAPIDS	MI	49503										
20000.00												
Purpose of Disbursement STRATEGY CONSULTING		Transaction ID : SB17.6522										
Candidate Name												
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/></td> <td>House</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Senate</td> </tr> <tr> <td><input type="checkbox"/></td> <td>President</td> </tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Category/ Type				
<input type="checkbox"/>	House											
<input type="checkbox"/>	Senate											
<input type="checkbox"/>	President											
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	328500.00
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 146 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. STRATEGIC NATIONAL LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 190 MONROE AVE NW 5TH FLOOR		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.6523
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement STRATEGY CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. TARGET		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 495 HAGGERTY HWY		Amount of Each Disbursement this Period 34.66 Transaction ID : SB17.6946 [MEMO ITEM]
City COMMERCE TOWNSHIP State MI Zip Code 48390	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE STRATEGY GROUP		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 7669 STAGERS LOOP		Amount of Each Disbursement this Period 7500.00 Transaction ID : SB17.6524
City DELAWARE State OH Zip Code 43015	Purpose of Disbursement MEDIA PRODUCTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	17500.00
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 147 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. THE STRATEGY GROUP			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 7669 STAGERS LOOP			Amount of Each Disbursement this Period 21579.09 Transaction ID : SB17.6525
City DELAWARE	State OH	Zip Code 43015	
Purpose of Disbursement MEDIA PRODUCTION		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. THE STRATEGY GROUP			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 7669 STAGERS LOOP			Amount of Each Disbursement this Period 7500.00 Transaction ID : SB17.6526
City DELAWARE	State OH	Zip Code 43015	
Purpose of Disbursement MEDIA PRODUCTION		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. THE STRATEGY GROUP			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 7669 STAGERS LOOP			Amount of Each Disbursement this Period 14500.00 Transaction ID : SB17.6527
City DELAWARE	State OH	Zip Code 43015	
Purpose of Disbursement MEDIA PRODUCTION		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	43579.09
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 148 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. THE STRATEGY GROUP			Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014	
Mailing Address 7669 STAGERS LOOP			Amount of Each Disbursement this Period 7500.00	
City DELAWARE	State OH	Zip Code 43015	Transaction ID : SB17.6528	
Purpose of Disbursement MEDIA PRODUCTION		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. THE STRATEGY GROUP			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014	
Mailing Address 7669 STAGERS LOOP			Amount of Each Disbursement this Period 17000.00	
City DELAWARE	State OH	Zip Code 43015	Transaction ID : SB17.6529	
Purpose of Disbursement MEDIA PRODUCTION		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. THE STRATEGY GROUP			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014	
Mailing Address 7669 STAGERS LOOP			Amount of Each Disbursement this Period 22500.00	
City DELAWARE	State OH	Zip Code 43015	Transaction ID : SB17.6530	
Purpose of Disbursement MEDIA PRODUCTION		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional)	47000.00
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 149 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DOUG TIETZ		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 1427.41 Transaction ID : SB17.6412
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT - SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. DOUG TIETZ		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 262.00 Transaction ID : SB17.6413
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement REIMBURSEMENT - SEE MEMO ENTRIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. DOUG TIETZ		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address P.O. BOX 1128		Amount of Each Disbursement this Period 71.04 Transaction ID : SB17.6414
City WALLED LAKE	State MI	
Zip Code 48390	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1760.45
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 150 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 190 MONROE AVENUE NW SUITE 500		Amount of Each Disbursement this Period 707.62
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Transaction ID : SB17.6531
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 190 MONROE AVENUE NW SUITE 500		Amount of Each Disbursement this Period 5.00
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Transaction ID : SB17.6532
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. TROTT & TROTT, P.C.		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 31440 NORTHWESTERN HWY #300		Amount of Each Disbursement this Period 2818.00
City FARMINGTON HILLS State MI Zip Code 48334	Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES	
Candidate Name		Transaction ID : SB17.6534
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3530.62
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 151 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DAVID A TROTT		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 158 PARK LAKE DRIVE		Amount of Each Disbursement this Period 1381.02
City BIRMINGHAM	State MI	Zip Code 48009
Purpose of Disbursement REIMBURSEMENT - SEE MEMO ENTRIES		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 11	

Full Name (Last, First, Middle Initial) B. UNDERGROUND PRINTING		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 329 S. MAIN STREET		Amount of Each Disbursement this Period 111.90
City ANN ARBOR	State MI	Zip Code 48104
Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: PRINTING & DESIGN SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2013
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period 14.10
City WASHINGTON	State DC	Zip Code 20260
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	1381.02
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 152 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>30</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		30		2013
M M	/	D D	/	Y Y Y Y								
10		30		2013								
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>5.03</td> </tr> </table>	5.03			
City	State	Zip Code										
WASHINGTON	DC	20260										
5.03												
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Transaction ID : SB17.6854										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>05</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		05		2013
M M	/	D D	/	Y Y Y Y								
11		05		2013								
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>7.76</td> </tr> </table>	7.76			
City	State	Zip Code										
WASHINGTON	DC	20260										
7.76												
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Transaction ID : SB17.6855										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		05		2014
M M	/	D D	/	Y Y Y Y								
03		05		2014								
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>128.00</td> </tr> </table>	128.00			
City	State	Zip Code										
WASHINGTON	DC	20260										
128.00												
Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: DELIVERY SERVICES		Transaction ID : SB17.6901										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 153 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USPS		M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		4.22
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Transaction ID : SB17.6856
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USPS		M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		13.58
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Transaction ID : SB17.6857
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. USPS		M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		31.52
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Transaction ID : SB17.6858
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 154 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>11</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		11		2014
M M	/	D D	/	Y Y Y Y									
03		11		2014									
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>18.20</td> </tr> </table>		18.20			
City	State	Zip Code											
WASHINGTON	DC	20260											
18.20													
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Transaction ID : SB17.6859											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		13		2014
M M	/	D D	/	Y Y Y Y									
03		13		2014									
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>4.22</td> </tr> </table>		4.22			
City	State	Zip Code											
WASHINGTON	DC	20260											
4.22													
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Transaction ID : SB17.6860											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		17		2014
M M	/	D D	/	Y Y Y Y									
03		17		2014									
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>3.64</td> </tr> </table>		3.64			
City	State	Zip Code											
WASHINGTON	DC	20260											
3.64													
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Transaction ID : SB17.6861											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

SUBTOTAL of Disbursements This Page (optional)	0.00
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 155 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USPS		M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period
City	State	Zip Code
WASHINGTON	DC	20260
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Transaction ID : SB17.6864
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USPS		M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 475 L'ENFANT PLAZA, SW		Amount of Each Disbursement this Period
City	State	Zip Code
WASHINGTON	DC	20260
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: POSTAGE		Transaction ID : SB17.6868
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. VERIZON WIRELESS		M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 15505 SAND CANYON AVENUE		Amount of Each Disbursement this Period
City	State	Zip Code
IRVINE	CA	92618
Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: MOBILE PHONE EXPENSE		Transaction ID : SB17.6898
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 156 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 15505 SAND CANYON AVENUE		Amount of Each Disbursement this Period 138.34
City IRVINE State CA Zip Code 92618	Purpose of Disbursement 4/16 PIWOWAR REIMBURSEMENT: MOBILE PHONE EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.6917 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 15505 SAND CANYON AVENUE		Amount of Each Disbursement this Period 168.36
City IRVINE State CA Zip Code 92618	Purpose of Disbursement 5/21 PIWOWAR REIMBURSEMENT: MOBILE PHONE EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.6941 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 15505 SAND CANYON AVENUE		Amount of Each Disbursement this Period 237.30
City IRVINE State CA Zip Code 92618	Purpose of Disbursement 6/25 PIWOWAR REIMBURSEMENT: MOBILE PHONE EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.6984 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 157 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
A. WALLED LAKE POST OFFICE

Mailing Address 995 N PONTIAC TRAIL

City WALLED LAKE State MI Zip Code 48390

Purpose of Disbursement
5/21 PIWOWAR REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
05 / 14 / 2014

Amount of Each Disbursement this Period
4.83

Transaction ID : SB17.6970

[MEMO ITEM]

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

Mailing Address 26090 INGERSOL DR

City NOVI State MI Zip Code 48375

Purpose of Disbursement
4/16 PIWOWAR REIMBURSEMENT: OFFICE TABLES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 19 / 2014

Amount of Each Disbursement this Period
209.21

Transaction ID : SB17.6913

[MEMO ITEM]

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

Mailing Address 26090 INGERSOL DR

City NOVI State MI Zip Code 48375

Purpose of Disbursement
5/21 PIWOWAR REIMBURSEMENT: OFFICE EQUIPMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
05 / 16 / 2014

Amount of Each Disbursement this Period
96.40

Transaction ID : SB17.6967

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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 158 OF 161	
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WARREN DRUGSTORE		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 32910 MIDDLEBELT RD		Amount of Each Disbursement this Period 5.77
City State Zip Code FARMINGTON HILLS MI 48322	Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.6870 [MEMO ITEM]
Office Sought: House Senate President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. WATERFORD COALITION FOR YOUTH		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 5150 CIVIC CENTER DRIVE		Amount of Each Disbursement this Period 60.00
City State Zip Code WATERFORD MI 48329	Purpose of Disbursement 4/14 TIETZ REIMBURSEMENT: EVENT REGISTRATION FEE	
Candidate Name	Category/Type	Transaction ID : SB17.6848 [MEMO ITEM]
Office Sought: House Senate President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. WAYNE 11TH CDRC		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 2736 HOGAN WAY		Amount of Each Disbursement this Period 550.00
City State Zip Code CANTON MI 48188	Purpose of Disbursement EVENT REGISTRATION FEE	
Candidate Name	Category/Type	Transaction ID : SB17.6535
Office Sought: House Senate President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	550.00
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 159 OF 161			
	<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)
TROTT FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WILLARD INTERCONTINENTAL HOTEL		Date of Disbursement										
Mailing Address 1401 PENNSYLVANIA AVE NW		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		26		2014
M M	/	D D	/	Y Y Y Y								
03		26		2014								
City WASHINGTON	State DC	Zip Code 20004-1010										
Purpose of Disbursement 6/18 TROTT REIMBURSEMENT: TRAVEL: LODGING		Amount of Each Disbursement this Period										
Candidate Name		<table border="1"> <tr> <td>590.82</td> </tr> </table>	590.82									
590.82												
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.6874										
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:		[MEMO ITEM]										

Full Name (Last, First, Middle Initial) B.		Date of Disbursement										
Mailing Address		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
City	State	Zip Code										
Purpose of Disbursement		Amount of Each Disbursement this Period										
Candidate Name		<table border="1"> <tr> <td></td> </tr> </table>										
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										
Mailing Address		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
City	State	Zip Code										
Purpose of Disbursement		Amount of Each Disbursement this Period										
Candidate Name		<table border="1"> <tr> <td></td> </tr> </table>										
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).....	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td>1302084.90</td> </tr> </table>	1302084.90
1302084.90		

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

NAME OF COMMITTEE (In Full) **TROTT FOR CONGRESS, INC.** Transaction ID : **SC/10.7005**

LOAN SOURCE Full Name (Last, First, Middle Initial) DAVID A. TROTT	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 158 PARK LAKE DRIVE		

City	State	ZIP Code
BIRMINGHAM	MI	48009

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 06 / Y 2014	M M / D D / Y 11/04/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="250000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text" value="250000.00"/>

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 161 OF 161
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
TROTT FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MAJORITY STRATEGIES, INC.	Nature of Debt (Purpose): DIRECT MAIL
Mailing Address 135 PROFESSIONAL DRIVE SUITE 104	
City State Zip Code PONTE VEDRA BEACH FL 32082	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.7012	
Amount Incurred This Period 35818.45	Payment This Period 0.00	Outstanding Balance at Close of This Period 35818.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MAJORITY STRATEGIES, INC.	Nature of Debt (Purpose): DIRECT MAIL
Mailing Address 135 PROFESSIONAL DRIVE SUITE 104	
City State Zip Code PONTE VEDRA BEACH FL 32082	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.7013	
Amount Incurred This Period 19751.62	Payment This Period 0.00	Outstanding Balance at Close of This Period 19751.62

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	55570.07
2) TOTALS This Period (last page this line number only)	55570.07
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	250000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	305570.07