

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

Dykema Gossett Federal PAC

ADDRESS (number and street)

201 Townsend Street

Suite 900

☐Check if different
than previously
reported. (ACC)

Lansing

MI

48933

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00342113

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☒January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2009

through

12

31

2009

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

Type or Print Name of Treasurer

Ms. Wendy Siegel

Signature of Treasurer

Electronically Filed by Ms. Wendy Siegel

Date

01

21

2010

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

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

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 25

Write or Type Committee Name
Dykema Gossett Federal PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		
2009		40223.91
(b) Cash on Hand at Beginning of Reporting Period	133356.23	
(c) Total Receipts (from Line 19)	902.40	135761.90
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	134258.63	175985.81
7. Total Disbursements (from Line 31)	41514.90	83242.08
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	92743.73	92743.73
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Dykema Gossett Federal PAC

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	902.40	135761.90
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	902.40	135761.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	902.40	135761.90
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	902.40	135761.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	902.40	135761.90

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	139.90	2771.90	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	139.90	2771.90	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40225.00	78870.18	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	1150.00	1600.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	1150.00	1600.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	41514.90	83242.08	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41514.90	83242.08	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	902.40	135761.90
34. Total Contribution Refunds (from Line 28(d))	1150.00	1600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-247.60	134161.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	139.90	2771.90
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	139.90	2771.90

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

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

FOR LINE NUMBER: PAGE 6 / 25

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Dykema Gossett Federal PAC

A.

Full Name (Last, First, Middle Initial)

Charles M. Baum

Mailing Address 4207 Forest Ave.

City

Western Springs

State

IL

Zip Code

60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dykema Gossett PLLC

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

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

Transaction ID: SA11AI.8104

Amount of Each Receipt this Period

75.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Charles M. Baum

Mailing Address 4207 Forest Ave.

City

Western Springs

State

IL

Zip Code

60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dykema Gossett PLLC

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: SA11AI.8105

Amount of Each Receipt this Period

75.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Charles M. Baum

Mailing Address 4207 Forest Ave.

City

Western Springs

State

IL

Zip Code

60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dykema Gossett PLLC

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.8157

Amount of Each Receipt this Period

75.00

contribution

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 25

(check only one)

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

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NAME OF COMMITTEE (In Full)

Dykema Gossett Federal PAC

A.

Full Name (Last, First, Middle Initial)

Charles M. Baum

Mailing Address 4207 Forest Ave.

City

Western Springs

State

IL

Zip Code

60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dykema Gossett PLLC

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

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

Transaction ID: SA11AI.8184

Amount of Each Receipt this Period

75.00

contribution

B.

Full Name (Last, First, Middle Initial)

Charles M. Baum

Mailing Address 4207 Forest Ave.

City

Western Springs

State

IL

Zip Code

60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dykema Gossett PLLC

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

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

Transaction ID: SA11AI.8186

Amount of Each Receipt this Period

75.00

contribution

C.

Full Name (Last, First, Middle Initial)

RENAE MOORE

Mailing Address 201 TOWNSEND
SUITE 900

City

LANSING

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer
DYKEMA GOSSETT

Occupation
GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Transaction ID: SA11AI.8201

Amount of Each Receipt this Period

1606.50

Legal/Accounting

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 25

(check only one)

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

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NAME OF COMMITTEE (In Full)

Dykema Gossett Federal PAC

A.

Full Name (Last, First, Middle Initial)

Rena Moore

Mailing Address 201 Townsend, Suite 900

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dykema Gossett PLLC

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1741.50

Date of Receipt

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

Transaction ID: SA11AI.8202

Amount of Each Receipt this Period

121.50

In-kind - professional se-
rvices

B.

Full Name (Last, First, Middle Initial)

Mr. William J. Perrone

Mailing Address 5289 Bear Lake Drive

City

East Lansing

State

MI

Zip Code

48823

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dykema Gossett PLLC

Occupation

attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

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

Transaction ID: SA11AI.8103

Amount of Each Receipt this Period

387.50

Contribution

C.

Full Name (Last, First, Middle Initial)

Ms. WENDY SIEGEL

Mailing Address 201 TOWNSEND, SUITE 900

City

LANSING

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer
DYKEMA GOSSETT PLLC

Occupation

LEGISLATIVE ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Transaction ID: SA11AI.8199

Amount of Each Receipt this Period

1012.00

Legal/Accounting

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

509.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 25

(check only one)

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

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NAME OF COMMITTEE (In Full)

Dykema Gossett Federal PAC

A.

Full Name (Last, First, Middle Initial)

Ms. Wendy Siegel

Mailing Address 201 Townsend, Suite 900

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dykema Gossett PLLC

Occupation

Legislative Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.40

Date of Receipt

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

Transaction ID: SA11AI.8204

Amount of Each Receipt this Period

18.40

In-kind - professional se-
rvices

B.

Full Name (Last, First, Middle Initial)

Mr. W. ALAN WILK

Mailing Address 201 TOWNSEND, SUITE 900

City

LANSING

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer
DYKEMA GOSSETT PLLC

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Transaction ID: SA11AI.8200

Amount of Each Receipt this Period

320.00

Legal/Accounting

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

18.40

TOTAL This Period (last page this line number only)

902.40

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Dykema Gossett Federal PAC

A. Full Name (Last, First, Middle Initial)
DAVE CAMP FOR CONGRESS 2010

Mailing Address 5915 Eastman Avenue
Suite 100

City State Zip Code
Midland MI 48640

Purpose of Disbursement
In-Kind: Golf Balls

Candidate Name
DAVID LEE CAMP

Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 04

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8113

Date of Disbursement

/ /

Amount of Each Disbursement this Period

225.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Dykema Gossett PLLC

Mailing Address 201 Townsend Street
Suite 900

City State Zip Code
Lansing MI 48933

Purpose of Disbursement
In-kind: reception costs

Candidate Name
DEBBIE STABENOW

Office Sought: ☐ House ☒ Senate ☐ President
State: MI District: 00

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8144

Date of Disbursement

/ /

Amount of Each Disbursement this Period

114.50

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Dykema Gossett PLLC

Mailing Address 201 Townsend Street
Suite 900

City State Zip Code
Lansing MI 48933

Purpose of Disbursement
In-Kind: Room Rental

Candidate Name
DEBBIE STABENOW

Office Sought: ☐ House ☒ Senate ☐ President
State: MI District: 00

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8149

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Dykema Gossett Federal PAC

A.

Full Name (Last, First, Middle Initial)

Rena Moore

Mailing Address 201 Townsend, Suite 900

City
Lansing

State
MI

Zip Code
48933

Purpose of Disbursement
In-kind - professional services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.8203

Date of Disbursement

/ /

Amount of Each Disbursement this Period

121.50

B.

Full Name (Last, First, Middle Initial)

Ms. Wendy Siegel

Mailing Address 201 Townsend, Suite 900

City
Lansing

State
MI

Zip Code
48933

Purpose of Disbursement
In-kind - professional services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.8205

Date of Disbursement

/ /

Amount of Each Disbursement this Period

18.40

SUBTOTAL of Disbursements This Page (optional)

139.90

TOTAL This Period (last page this line number only)

139.90

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 25

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Dykema Gossett Federal PAC

A. Full Name (Last, First, Middle Initial)
CANDICE MILLER FOR CONGRESS

Mailing Address PO Box 182152

City State Zip Code
Shelby Township MI 48318

Purpose of Disbursement
Contribution

Candidate Name
CANDICE S. MILLER

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: SB23.8115

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
CITIZENS FOR ARLEN SPECTER

Mailing Address 426 C STREET NE CARRIAGE HOUSE
CARRIAGE HOUSE

City State Zip Code
WASHINGTON DC 20002

Purpose of Disbursement
Contribution

Candidate Name
ARLEN SPECTER

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.8121

Date of Disbursement

07 / 20 / 2009

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Coulson for Congress

Mailing Address P.O. Box 2354

City State Zip Code
Glenview IL 60025

Purpose of Disbursement
contribution

Candidate Name
Elizabeth Coulson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 10

Transaction ID: SB23.8192

Date of Disbursement

12 / 10 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

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

NAME OF COMMITTEE (In Full)
Dykema Gossett Federal PAC

A.	Full Name (Last, First, Middle Initial) DAN 10 <hr/> Mailing Address 1088 BISHOP STREET SUITE 1009 <hr/> <table> <tr> <td>City HONOLULU</td> <td>State HI</td> <td>Zip Code 96813</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement contribution</td> <td><input type="text" value="011"/> Category/ Type</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State: HI District: 00	City HONOLULU	State HI	Zip Code 96813	Purpose of Disbursement contribution	<input type="text" value="011"/> Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8181 Date of Disbursement <table> <tr> <td><input type="text" value="1"/>^M</td> <td><input type="text" value="1"/>^M</td> <td>/</td> <td><input type="text" value="0"/>^D</td> <td><input type="text" value="3"/>^D</td> <td>/</td> <td><input type="text" value="2"/>^Y</td> <td><input type="text" value="0"/>^Y</td> <td><input type="text" value="9"/>^Y</td> <td><input type="text" value="9"/>^Y</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table> <tr> <td><input type="text" value="1000.00"/></td> </tr> </table>	<input type="text" value="1"/> ^M	<input type="text" value="1"/> ^M	/	<input type="text" value="0"/> ^D	<input type="text" value="3"/> ^D	/	<input type="text" value="2"/> ^Y	<input type="text" value="0"/> ^Y	<input type="text" value="9"/> ^Y	<input type="text" value="9"/> ^Y	<input type="text" value="1000.00"/>
City HONOLULU	State HI	Zip Code 96813																		
Purpose of Disbursement contribution	<input type="text" value="011"/> Category/ Type																			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
<input type="text" value="1"/> ^M	<input type="text" value="1"/> ^M	/	<input type="text" value="0"/> ^D	<input type="text" value="3"/> ^D	/	<input type="text" value="2"/> ^Y	<input type="text" value="0"/> ^Y	<input type="text" value="9"/> ^Y	<input type="text" value="9"/> ^Y											
<input type="text" value="1000.00"/>																				
B.	Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS 2010 <hr/> Mailing Address 5915 Eastman Avenue Suite 100 <hr/> <table> <tr> <td>City Midland</td> <td>State MI</td> <td>Zip Code 48640</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement In-Kind: Golf Balls</td> <td><input type="text" value="011"/> Category/ Type</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State: MI District: 04	City Midland	State MI	Zip Code 48640	Purpose of Disbursement In-Kind: Golf Balls	<input type="text" value="011"/> Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8112 Date of Disbursement <table> <tr> <td><input type="text" value="0"/>^M</td> <td><input type="text" value="7"/>^M</td> <td>/</td> <td><input type="text" value="2"/>^D</td> <td><input type="text" value="7"/>^D</td> <td>/</td> <td><input type="text" value="2"/>^Y</td> <td><input type="text" value="0"/>^Y</td> <td><input type="text" value="9"/>^Y</td> <td><input type="text" value="9"/>^Y</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table> <tr> <td><input type="text" value="225.00"/></td> </tr> </table>	<input type="text" value="0"/> ^M	<input type="text" value="7"/> ^M	/	<input type="text" value="2"/> ^D	<input type="text" value="7"/> ^D	/	<input type="text" value="2"/> ^Y	<input type="text" value="0"/> ^Y	<input type="text" value="9"/> ^Y	<input type="text" value="9"/> ^Y	<input type="text" value="225.00"/>
City Midland	State MI	Zip Code 48640																		
Purpose of Disbursement In-Kind: Golf Balls	<input type="text" value="011"/> Category/ Type																			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
<input type="text" value="0"/> ^M	<input type="text" value="7"/> ^M	/	<input type="text" value="2"/> ^D	<input type="text" value="7"/> ^D	/	<input type="text" value="2"/> ^Y	<input type="text" value="0"/> ^Y	<input type="text" value="9"/> ^Y	<input type="text" value="9"/> ^Y											
<input type="text" value="225.00"/>																				
C.	Full Name (Last, First, Middle Initial) Dykema Gossett PLLC <hr/> Mailing Address 201 Townsend Street Suite 900 <hr/> <table> <tr> <td>City Lansing</td> <td>State MI</td> <td>Zip Code 48933</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement In-Kind: Reception Costs</td> <td><input type="text" value="011"/> Category/ Type</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State: MI District: 00	City Lansing	State MI	Zip Code 48933	Purpose of Disbursement In-Kind: Reception Costs	<input type="text" value="011"/> Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8148 Date of Disbursement <table> <tr> <td><input type="text" value="1"/>^M</td> <td><input type="text" value="0"/>^M</td> <td>/</td> <td><input type="text" value="0"/>^D</td> <td><input type="text" value="5"/>^D</td> <td>/</td> <td><input type="text" value="2"/>^Y</td> <td><input type="text" value="0"/>^Y</td> <td><input type="text" value="9"/>^Y</td> <td><input type="text" value="9"/>^Y</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table> <tr> <td><input type="text" value="114.50"/></td> </tr> </table>	<input type="text" value="1"/> ^M	<input type="text" value="0"/> ^M	/	<input type="text" value="0"/> ^D	<input type="text" value="5"/> ^D	/	<input type="text" value="2"/> ^Y	<input type="text" value="0"/> ^Y	<input type="text" value="9"/> ^Y	<input type="text" value="9"/> ^Y	<input type="text" value="114.50"/>
City Lansing	State MI	Zip Code 48933																		
Purpose of Disbursement In-Kind: Reception Costs	<input type="text" value="011"/> Category/ Type																			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
<input type="text" value="1"/> ^M	<input type="text" value="0"/> ^M	/	<input type="text" value="0"/> ^D	<input type="text" value="5"/> ^D	/	<input type="text" value="2"/> ^Y	<input type="text" value="0"/> ^Y	<input type="text" value="9"/> ^Y	<input type="text" value="9"/> ^Y											
<input type="text" value="114.50"/>																				

SUBTOTAL of Disbursements This Page (optional)**1339.50****TOTAL** This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)
Dykema Gossett Federal PAC

A. Full Name (Last, First, Middle Initial) Dykema Gossett PLLC	Transaction ID: SB23.8150 Date of Disbursement
Mailing Address 201 Townsend Street Suite 900	<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
City Lansing State MI Zip Code 48933	Amount of Each Disbursement this Period
Purpose of Disbursement In-Kind: Room Rental	<input type="text" value="150.00"/>
Candidate Name DEBBIE STABENOW	<input type="text" value="011"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress	Transaction ID: SB23.8134 Date of Disbursement
Mailing Address P.O. Box 746	<input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
City Bismarck State ND Zip Code 58502	Amount of Each Disbursement this Period
Purpose of Disbursement contribution	<input type="text" value="1000.00"/>
Candidate Name EARL RALPH POMEROY	<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) ELLISON FOR CONGRESS	Transaction ID: SB23.8171 Date of Disbursement
Mailing Address PO Box 6072	<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
City Minneapolis State MN Zip Code 55406	Amount of Each Disbursement this Period
Purpose of Disbursement contribution	<input type="text" value="1000.00"/>
Candidate Name KEITH MAURICE ELLISON	<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)**2150.00****TOTAL** This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Dykema Gossett Federal PAC

A. Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID Mailing Address PO BOX 19163	Transaction ID: SB23.8172 Date of Disbursement <div> <div>10</div> <div>23</div> <div>2009</div> </div>
City LAS VEGAS State NV Zip Code 89132 Purpose of Disbursement contribution Candidate Name HARRY REID Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>2000.00</div>
B. Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID Mailing Address PO BOX 19163 City LAS VEGAS State NV Zip Code 89132 Purpose of Disbursement contribution Candidate Name HARRY REID Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8185 Date of Disbursement <div> <div>10</div> <div>23</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>500.00</div>
C. Full Name (Last, First, Middle Initial) FRIENDS OF BYRON DORGAN Mailing Address PO BOX 871 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement Contribution Candidate Name BYRON L DORGAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8110 Date of Disbursement <div> <div>07</div> <div>06</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>1000.00</div>

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

PAGE 16 / 25

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

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NAME OF COMMITTEE (In Full)

Dykema Gossett Federal PAC

A.

Full Name (Last, First, Middle Initial)

FRIENDS OF DAN MAFFEI

Mailing Address PO Box 74

City
SyracuseState
NYZip Code
13214Purpose of Disbursement
contribution

Candidate Name

DANIEL BENJAMIN MR. MAFFEI

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 25

Transaction ID: SB23.8142

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

FRIENDS OF JIM CLYBURN

Mailing Address PO Box 12567

City
ColumbiaState
SCZip Code
29211Purpose of Disbursement
Contribution

Candidate Name

JAMES E CLYBURN

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: SC

District: 06

Transaction ID: SB23.8120

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

GEOFF DAVIS FOR CONGRESS

Mailing Address 3161 Dixie Highway
Suite FCity
ErlangerState
KYZip Code
41018Purpose of Disbursement
contribution

Candidate Name

GEOFFREY C DAVIS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: KY

District: 04

Transaction ID: SB23.8138

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Dykema Gossett Federal PAC

A. Full Name (Last, First, Middle Initial)
HALVORSON FOR CONGRESS

Mailing Address PO BOX 176

City CRETE State IL Zip Code 60417

Purpose of Disbursement
contribution

Candidate Name
DEBORAH 'DEBBIE' HALVORSON

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 11

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.8165

Date of Disbursement

10 / 23 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
JEFF MERKLEY FOR OREGON

Mailing Address 2236 SE 10TH AVE

City PORTLAND State OR Zip Code 97214

Purpose of Disbursement
contribution - debt retirement

Candidate Name
JEFFREY ALAN MERKLEY

Office Sought: ☐ House
☒ Senate
☐ President

State: OR District: 00

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.8177

Date of Disbursement

10 / 26 / 2009

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
JOE DONNELLY FOR CONGRESS

Mailing Address PO Box 1961

City South Bend State IN Zip Code 46634

Purpose of Disbursement
Contribution

Candidate Name
JOSEPH SIMON MR. DONNELLY

Office Sought: ☒ House
☐ Senate
☐ President

State: IN District: 02

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.8127

Date of Disbursement

07 / 20 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Dykema Gossett Federal PAC

A.

Full Name (Last, First, Middle Initial)

KILPATRICK FOR UNITED STATES CONGRESS

Mailing Address PO BOX 32175

City
DETROIT

State
MI

Zip Code
48232

Purpose of Disbursement
Contribution

Candidate Name
CAROLYN CHEEKS KILPATRICK

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 13

Transaction ID: SB23.8128

Date of Disbursement

07 / 27 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Kirk for Senate

Mailing Address P.O. Box 8

City
Winnetka

State
IL

Zip Code
60093

Purpose of Disbursement
contribution

Candidate Name
Mark Steven Kirk

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 00

Transaction ID: SB23.8189

Date of Disbursement

12 / 10 / 2009

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

MICHIGAN REPUBLICAN PARTY FEDERAL ACCOUNT

Mailing Address 520 Seymour St.

City
Lansing

State
MI

Zip Code
48933

Purpose of Disbursement
contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB23.8131

Date of Disbursement

09 / 14 / 2009

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Dykema Gossett Federal PAC

A.

Full Name (Last, First, Middle Initial)
MICHIGAN REPUBLICAN PARTY FEDERAL ACCOUNT

Mailing Address 520 Seymour St.

City Lansing State MI Zip Code 48933

Purpose of Disbursement
contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB23.8156

Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
PETERS FOR CONGRESS

Mailing Address PO BOX 226

City BLOOMFIELD HILLS State MI Zip Code 48303

Purpose of Disbursement
contribution

Candidate Name
GARY PETERS

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 09

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.8136

Date of Disbursement

09 / 21 / 2009

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
PETERS FOR CONGRESS

Mailing Address PO BOX 226

City BLOOMFIELD HILLS State MI Zip Code 48303

Purpose of Disbursement
contribution

Candidate Name
GARY PETERS

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 09

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.8183

Date of Disbursement

11 / 06 / 2009

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)
Dykema Gossett Federal PAC**A. PORTMAN FOR SENATE COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 8331 LITTLE HARBOR DRIVE

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement
ContributionCandidate Name
ROB PORTMAN011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 00

Transaction ID: SB23.8116

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

B. ROGERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 581

City Brighton State MI Zip Code 48116

Purpose of Disbursement
contributionCandidate Name
MICHAEL J ROGERS011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 08

Transaction ID: SB23.8135

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

C. ROSKAM FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 1919 BRIARCLIFFE BLVD

City WHEATON State IL Zip Code 60187

Purpose of Disbursement
ContributionCandidate Name
PETER ROSKAM011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 06

Transaction ID: SB23.8119

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Dykema Gossett Federal PAC

A. Full Name (Last, First, Middle Initial)
ROSKAM FOR CONGRESS COMMITTEE

Mailing Address 1919 BRIARCLIFFE BLVD

City State Zip Code
WHEATON IL 60187

Purpose of Disbursement
contribution

Candidate Name
PETER ROSKAM

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 06

Transaction ID: SB23.8137

Date of Disbursement

09 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
SCHAKOWSKY FOR CONGRESS

Mailing Address P.O. BOX 5130

City State Zip Code
EVANSTON IL 60204

Purpose of Disbursement
contribution

Candidate Name
JANICE D SCHAKOWSKY

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 09

Transaction ID: SB23.8164

Date of Disbursement

10 / 16 / 2009

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
SCHAUER FOR CONGRESS

Mailing Address PO BOX 100

City State Zip Code
BATTLE CREEK MI 49016

Purpose of Disbursement
contribution

Candidate Name
MARK HAMILTON SCHAUER

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 07

Transaction ID: SB23.8133

Date of Disbursement

09 / 14 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)
Dykema Gossett Federal PAC

A. Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS Mailing Address PO BOX 100	Transaction ID: SB23.8143 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 9</div> </div>
City BATTLE CREEK State MI Zip Code 49016 Purpose of Disbursement contribution Candidate Name MARK HAMILTON SCHAUER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 07	Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/Type
B. Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS Mailing Address PO BOX 100 City BATTLE CREEK State MI Zip Code 49016 Purpose of Disbursement contribution Candidate Name MARK HAMILTON SCHAUER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 07	Transaction ID: SB23.8182 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 6 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/Type
C. Full Name (Last, First, Middle Initial) SCHOCK FOR CONGRESS Mailing Address PO BOX 10555 City PEORIA State IL Zip Code 61612 Purpose of Disbursement Contribution Candidate Name AARON SCHOCK Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 18	Transaction ID: SB23.8111 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 6 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/Type

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

Dykema Gossett Federal PAC

A.Full Name (Last, First, Middle Initial)
STABENOW FOR US SENATE

Mailing Address PO BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
contributionCandidate Name
DEBBIE STABENOW011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.8155

Date of Disbursement

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

Amount of Each Disbursement this Period

1735.50

B.Full Name (Last, First, Middle Initial)
TRUST PAC; TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACT-
ICS

Mailing Address PO BOX 221543

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.8158

Date of Disbursement

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

Amount of Each Disbursement this Period

1500.00

C.Full Name (Last, First, Middle Initial)
VOLUNTEERS FOR SHIMKUS

Mailing Address P.O. Box 5458

City Springfield State IL Zip Code 62705

Purpose of Disbursement
contributionCandidate Name
JOHN M SHIMKUS011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 19

Transaction ID: SB23.8159

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4235.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Dykema Gossett Federal PAC

A.

Full Name (Last, First, Middle Initial)

WOLVERINE PAC

Mailing Address 607 14TH STREET NW SUITE 800

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.8140

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

40225.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Dykema Gossett Federal PAC

A. Full Name (Last, First, Middle Initial) Charles M. Baum Mailing Address 4207 Forest Ave.	Transaction ID: SB28A.8107 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 0 9</div> </div>
City Western Springs State IL Zip Code 60558 Purpose of Disbursement Refund of Contribution Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>375.00</div> <div>010 Category/ Type</div>
B. Full Name (Last, First, Middle Initial) Richard G. Goetz Mailing Address 941 S. Oxford Road	Transaction ID: SB28A.8108 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 8 / 2 0 0 9</div> </div>
City Grosse Pointe Wood State MI Zip Code 48236 Purpose of Disbursement Refund of Contribution Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>325.00</div> <div>010 Category/ Type</div>
C. Full Name (Last, First, Middle Initial) Humma S. Siddiqi Mailing Address 1148 Krista Lane	Transaction ID: SB28A.8106 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 0 9</div> </div>
City Rochester State MI Zip Code 48307 Purpose of Disbursement Refund of Contribution Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>450.00</div> <div>010 Category/ Type</div>

SUBTOTAL of Disbursements This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

1150.00