

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
STABENOW VICTORY FUND

ADDRESS (number and street) PO BOX 4462
Check if different than previously reported. (ACC) EAST LANSING MI 48826
CITY ▲ STATE ▲ ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼ C C00495580
3. IS THIS REPORT NEW (N) OR AMENDED (A) x
STATE ▼ DISTRICT MI

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 07 / 01 / 2017 through M M / D D / Y Y Y Y 09 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Bergman, Cheryl, , ,

Signature of Treasurer Bergman, Cheryl, , , [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 31 / 2018

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
STABENOW VICTORY FUND

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	133100.00	852235.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	41600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	133100.00	810635.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11366.00	48710.32
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11366.00	48710.32
8. Cash on Hand at Close of Reporting Period (from Line 27).....	107234.46	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

STABENOW VICTORY FUND

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	126000.00	837650.00
(ii) Unitemized.....	100.00	1585.00
(iii) TOTAL of contributions from individuals ▶	126100.00	839235.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7000.00	13000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	133100.00	852235.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	9.03
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	133100.00	852244.03

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 20

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11366.00	48710.32
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	20000.00	679526.31
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	40600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	41600.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	31366.00	769836.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5500.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	133100.00
25. SUBTOTAL (add Line 23 and Line 24).....	138600.46
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	31366.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	107234.46

**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 20	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Bogas, Kathleen, , ,

Mailing Address 268 N. Williamsburg Rd.

City Bloomfield Hills	State MI	Zip Code 48301
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FEC ID number of contributing federal political committee. **C**

Name of Employer Law Office of Kathy Bogas	Occupation Attorney
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2017

Transaction ID : SA11AI.5789

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 2444 Cranewood Dr.

City Fenton	State MI	Zip Code 48430
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FEC ID number of contributing federal political committee. **C**

Name of Employer IMS	Occupation Property Management
-------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 14 / 2017

Transaction ID : SA11AI.5757

Amount of Each Receipt this Period
10000.00

Memo Item
Earmarked contribution. See memo below.

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

Mailing Address PO Box 441146

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

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
66000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2017

Transaction ID : SA11AI.5757.0

Amount of Each Receipt this Period
10000.00

Memo Item
Note: Above contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶	15000.00
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 6 OF 20	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Cherokee Nation			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2017	
Mailing Address PO Box 948			Transaction ID : SA11AI.5794	
City Tahlequah	State OK	Zip Code 74465	Amount of Each Receipt this Period _____,_____,_____ 5000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer _____		Occupation _____		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____,_____,_____ 5000.00		

Full Name (Last, First, Middle Initial) B. Edson, Daniel, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2017	
Mailing Address 2916 Neahtawanata Rd.			Transaction ID : SA11AI.5786	
City Traverse City	State MI	Zip Code 49686	Amount of Each Receipt this Period _____,_____,_____ 15000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer B & E Enterprises		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____,_____,_____ 15000.00		

Full Name (Last, First, Middle Initial) C. Edson, Debra, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2017	
Mailing Address 2916 Neahtawanata Rd.			Transaction ID : SA11AI.5787	
City Traverse City	State MI	Zip Code 49686	Amount of Each Receipt this Period _____,_____,_____ 15000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer TBA Intermediate School Distri		Occupation Teacher Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____,_____,_____ 15000.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	_____,_____,_____ 35000.00
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 7 OF 20	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

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

Mailing Address 700 Lone Pine Rd.

City Bloomfield Hills	State MI	Zip Code 48304
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FEC ID number of contributing federal political committee. **C**

Name of Employer Sue Ellen Eisenberg & Assoc	Occupation Attorney
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 21 / 2017

Transaction ID : SA11AI.5760

Amount of Each Receipt this Period
5000.00

Memo Item
Earmarked contribution. See memo below.

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

Mailing Address PO Box 441146

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

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
71000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : SA11AI.5760.0

Amount of Each Receipt this Period
5000.00

Memo Item
Note: Above contribution earmarked through this organization.

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

Mailing Address 19100 Riverside Dr

City Beverly Hills	State MI	Zip Code 48025
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FEC ID number of contributing federal political committee. **C**

Name of Employer Driven Communications	Occupation Partner
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2017

Transaction ID : SA11AI.5781

Amount of Each Receipt this Period
5000.00

Memo Item
Earmarked contribution. See memo below.

SUBTOTAL of Receipts This Page (optional)..... ▶	10000.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 20
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
ACTBLUE
 Mailing Address PO Box 441146
 City Somerville State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 101000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2017
Transaction ID : SA11AI.5781.0
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 Note: Above contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Glantz, Paul, , ,
 Mailing Address 303 Gray Wood
 City Lake Angelus State MI Zip Code 48326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Proctor Financial Chief Executive Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2017
Transaction ID : SA11AI.5754
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Johnson, Vernon, R, ,
 Mailing Address 264 George St
 City Birmingham State MI Zip Code 48009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Johnson Law Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 24000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2017
Transaction ID : SA11AI.5776
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 Earmarked contribution. See memo below.

SUBTOTAL of Receipts This Page (optional)..... ▶ 11000.00
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 9 OF 20	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

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

Mailing Address PO Box 441146

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
91000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2017

Transaction ID : SA11AI.5776.0

Amount of Each Receipt this Period

10000.00

Memo Item
 Note: Above contribution earmarked through this organization.

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

Mailing Address 200 Riverfront Dr
Apt 24K

City Detroit	State MI	Zip Code 48226
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FEC ID number of contributing federal political committee. **C**

Name of Employer Strategic Staffing Solutions	Occupation Chief Executive Officer
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2017

Transaction ID : SA11AI.5764

Amount of Each Receipt this Period

5000.00

Memo Item

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

Mailing Address 1751 W Lincoln St

City Birmingham	State MI	Zip Code 48009
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Photographer
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2017

Transaction ID : SA11AI.5778

Amount of Each Receipt this Period

5000.00

Memo Item
 Earmarked contribution. See memo below.

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 20
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
ACTBLUE
 Mailing Address PO Box 441146
 City Somerville State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 96000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2017
Transaction ID : SA11AI.5778.0
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 Note: Above contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Petitpren, Dean, , ,
 Mailing Address 415 Lake Shore Rd.
 City Grosse Pointe Farms State MI Zip Code 48236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Petitpren Inc. Owner
 Receipt For:
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2017
Transaction ID : SA11AI.5792
 Amount of Each Receipt this Period
 10000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Rhodes, Frank, , , III
 Mailing Address 266 N Williamsbury Rd
 City Bloomfield State MI Zip Code 48301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Frank K. Rhodes III & Assoc Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2017
Transaction ID : SA11AI.5790
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00
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 11 OF 20	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Sault Ste Marie Tribe of Chippewa Indians

Mailing Address 523 Ashmun St.

City Sault Ste Marie	State MI	Zip Code 49783
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 12 / 2017

Transaction ID : SA11AI.5788

Amount of Each Receipt this Period
10000.00

Memo Item

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

Mailing Address 394 Cranbrook Rd.

City Bloomfield Hills	State MI	Zip Code 48304
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
20000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 06 / 2017

Transaction ID : SA11AI.5771

Amount of Each Receipt this Period
10000.00

Memo Item
Earmarked contribution. See memo below.

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

Mailing Address PO Box 441146

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

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
81000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 31 / 2017

Transaction ID : SA11AI.5771.0

Amount of Each Receipt this Period
10000.00

Memo Item
Note: Above contribution earmarked through this organization.

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

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

20000.00

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

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

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

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Wolters, Kate, , ,
Mailing Address 2260 Cascade Springs Dr.
City Grand Rapids State MI Zip Code 49546
FEC ID number of contributing federal political committee. C
Name of Employer Self Employed Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2017
Transaction ID : SA11AI.5763
Amount of Each Receipt this Period
10000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

C. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	126000.00

**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 13 OF 20	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial)
INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 324 NATIONAL POLITICAL ACTIVITIES COMM.

A. Mailing Address 500 HULET DRIVE

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 29 / 2017

Transaction ID : SA11C.5793

City State Zip Code
BLOOMFIELD TWP. MI 48302

Amount of Each Receipt this Period
5000.00

FEC ID number of contributing federal political committee. C C00093989

Name of Employer Occupation

Memo Item

Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼
5000.00

Full Name (Last, First, Middle Initial)

B. SINGH PAC
Mailing Address 7125 ORCHARD LAKE RD #200

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 03 / 2017

Transaction ID : SA11C.5785

City State Zip Code
WEST BLOOMFIELD MI 48322

Amount of Each Receipt this Period
2000.00

FEC ID number of contributing federal political committee. C C00358564

Name of Employer Occupation

Memo Item

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

Full Name (Last, First, Middle Initial)

C. Mailing Address

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

City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Memo Item

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

7000.00
7000.00

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

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 14 OF 20	
	<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)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2017
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Processing Fee		Amount of Each Disbursement this Period 3.95
Candidate Name	Category/ Type	Transaction ID : SB17.5766
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2017
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Processing Fee		Amount of Each Disbursement this Period 197.50
Candidate Name	Category/ Type	Transaction ID : SB17.5759
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2017
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Processing Fee		Amount of Each Disbursement this Period 395.00
Candidate Name	Category/ Type	Transaction ID : SB17.5756
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	596.45
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 15 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2017
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Processing Fee		Amount of Each Disbursement this Period 395.00
Candidate Name		Transaction ID : SB17.5773
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2017
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Processing Fee		Amount of Each Disbursement this Period 395.00
Candidate Name		Transaction ID : SB17.5774
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2017
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Processing Fee		Amount of Each Disbursement this Period 395.00
Candidate Name		Transaction ID : SB17.5775
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	1185.00
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 16 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2017
Mailing Address PO Box 9001016		FEC Identification Number C
City Louisville	State KY	Zip Code 40290-1016
Purpose of Disbursement Credit card payment - memo below if itemized		Amount of Each Disbursement this Period 285.00
Candidate Name		Transaction ID : SB17.5816
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Palace Sports & Entertainment		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2017
Mailing Address 6 Championship Dr		FEC Identification Number C
City Auburn Hills	State MI	Zip Code 48326
Purpose of Disbursement Event tickets		Amount of Each Disbursement this Period 285.00
Candidate Name		Transaction ID : SB17.5816.0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Darnell, Ella, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2017
Mailing Address 11074 Lochgreen Dr.		FEC Identification Number C
City Lansing	State MI	Zip Code 48917
Purpose of Disbursement Compliance Consulting Fee		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.5802
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	785.00
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 17 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Palace Sports & Entertainment			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2017	
Mailing Address 6 Championship Dr			FEC Identification Number C	
City Auburn Hills	State MI	Zip Code 48326	Amount of Each Disbursement this Period 7300.00	
Purpose of Disbursement Room Rental, Food & Bev		Category/ Type	Transaction ID : SB17.5796	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Rodgers, Annette, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2017	
Mailing Address 12405 Jennings Rd.			FEC Identification Number C	
City Linden	State MI	Zip Code 48451	Amount of Each Disbursement this Period 235.85	
Purpose of Disbursement Food & Bev		Category/ Type	Transaction ID : SB17.5798	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Palace Sports & Entertainment			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2017	
Mailing Address 6 Championship Dr			FEC Identification Number C	
City Auburn Hills	State MI	Zip Code 48326	Amount of Each Disbursement this Period 235.85	
Purpose of Disbursement Food & Bev		Category/ Type	Transaction ID : SB17.5798.0	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	7535.85
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 18 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Rodgers, Annette, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2017	
Mailing Address 12405 Jennings Rd.			FEC Identification Number C	
City Linden	State MI	Zip Code 48451	Amount of Each Disbursement this Period 1200.00	
Purpose of Disbursement Fundraising Consulting Fee		Category/ Type	Transaction ID : SB17.5800	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Rodgers, Annette, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2017	
Mailing Address 12405 Jennings Rd.			FEC Identification Number C	
City Linden	State MI	Zip Code 48451	Amount of Each Disbursement this Period 43.70	
Purpose of Disbursement Mileage Reimbursement		Category/ Type	Transaction ID : SB17.5815	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Rodgers, Annette, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2017	
Mailing Address 12405 Jennings Rd.			FEC Identification Number C	
City Linden	State MI	Zip Code 48451	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement Parking Reimbursement		Category/ Type	Transaction ID : SB17.5818	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1263.70
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 19 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. Palace Sports & Entertainment			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2017	
Mailing Address 6 Championship Dr			FEC Identification Number C	
City Auburn Hills	State MI	Zip Code 48326	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement			Transaction ID : SB17.5818.0	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	11366.00

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 20 OF 20	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STABENOW VICTORY FUND

Full Name (Last, First, Middle Initial) A. STABENOW FOR US SENATE			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2017	
Mailing Address P.O. BOX 4945			FEC Identification Number C C00344473	
City EAST LANSING	State MI	Zip Code 48826	Amount of Each Disbursement this Period 20000.00	
Purpose of Disbursement Transfer		Category/ Type	Transaction ID : SB18.5803	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MI District: 00		

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	20000.00
TOTAL This Period (last page this line number only).....▶	20000.00