

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
FRIENDS OF WAYNE STATE

ADDRESS (number and street) **PO BOX 44406**
Check if different than previously reported. (ACC) **DETROIT MI 48244**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00452961 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 Year-End 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 (12S)
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 / / 2019 through / / 2019

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

Signature of Treasurer *Skrzyniarz, Douglas, , ,* [Electronically Filed] Date / / 2019

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 3X (Rev. 05/2016)

Write or Type Committee Name

FRIENDS OF WAYNE STATE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="9146.49"/>	<input type="text" value="9146.49"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9146.49"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4500.00"/>	<input type="text" value="4500.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="13646.49"/>	<input type="text" value="13646.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5759.80"/>	<input type="text" value="5759.80"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7886.69"/>	<input type="text" value="7886.69"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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. 05/2016)

Write or Type Committee Name

FRIENDS OF WAYNE STATE

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2019 To: M M / D D / Y Y Y Y 06 / 30 / 2019

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).....	3900.00	3900.00
(ii) Unitemized	600.00	600.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4500.00	4500.00
(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)	4500.00	4500.00
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 Transfers (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)).....▶	4500.00	4500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4500.00	4500.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	1559.80	1559.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1559.80	1559.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1500.00	1500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	2700.00	2700.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	5759.80	5759.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5759.80	5759.80

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	4500.00	4500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4500.00	4500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1559.80	1559.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1559.80	1559.80

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

A. Bank, Jason, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 Woodward Ave, Suite 2500

City Detroit	State MI	Zip Code 48226
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Kerr Russell Law Firm	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2019

Transaction ID : SA11AI.4514

Amount of Each Receipt this Period
50.00

Memo Item
 Direct Contribution

B. Bank, Jason, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 Woodward Ave, Suite 2500

City Detroit	State MI	Zip Code 48226
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Kerr Russell Law Firm	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		17		2019

Transaction ID : SA11AI.4515

Amount of Each Receipt this Period
50.00

Memo Item
 Direct Contribution

C. Busuito, Michael, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1708 Bonnieview Drive

City Royal Oak	State MI	Zip Code 48073
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Somerset Plastic Surgery	Occupation (for Individual) Physician
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		02		2019

Transaction ID : SA11AI.4496

Amount of Each Receipt this Period
2400.00

Memo Item
 Direct Contribution

SUBTOTAL of Receipts This Page (optional).....	2500.00
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 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

A. Lindsey, Patrick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17165 Parkside
 City Detroit State MI Zip Code 48221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2019
Transaction ID : SA11AI.4500
 Amount of Each Receipt this Period 100.00
 Memo Item
 Direct Contribution

B. Lindsey, Patrick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17165 Parkside
 City Detroit State MI Zip Code 48221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2019
Transaction ID : SA11AI.4501
 Amount of Each Receipt this Period 100.00
 Memo Item
 Direct Contribution

C. Lindsey, Patrick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17165 Parkside
 City Detroit State MI Zip Code 48221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2019
Transaction ID : SA11AI.4502
 Amount of Each Receipt this Period 100.00
 Memo Item
 Direct Contribution

SUBTOTAL of Receipts This Page (optional).....	300.00
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 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

A. Lindsey, Patrick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17165 Parkside
 City Detroit State MI Zip Code 48221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 05 / 2019
Transaction ID : SA11AI.4503
 Amount of Each Receipt this Period 100.00
 Memo Item
 Direct Contribution

B. Rosenberg, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31800 Nottingham Drive
 City Franklin State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 14 / 2019
Transaction ID : SA11AI.4505
 Amount of Each Receipt this Period 200.00
 Memo Item
 Direct Contribution

C. Rosenberg, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31800 Nottingham Drive
 City Franklin State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 14 / 2019
Transaction ID : SA11AI.4506
 Amount of Each Receipt this Period 200.00
 Memo Item
 Direct Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
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: (check only one)	PAGE 9 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rosenberg, David, , ,		Date of Receipt MM / DD / YYYY 04 / 14 / 2019 Transaction ID : SA11AI.4507
Mailing Address 31800 Nottingham Drive		Amount of Each Receipt this Period 200.00
City Franklin	State MI	Zip Code 48025
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Direct Contribution
Name of Employer (for Individual) Wayne State University	Occupation (for Individual) Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rosenberg, David, , ,		Date of Receipt MM / DD / YYYY 05 / 14 / 2019 Transaction ID : SA11AI.4508
Mailing Address 31800 Nottingham Drive		Amount of Each Receipt this Period 200.00
City Franklin	State MI	Zip Code 48025
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Direct Contribution
Name of Employer (for Individual) Wayne State University	Occupation (for Individual) Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rosenberg, David, , ,		Date of Receipt MM / DD / YYYY 06 / 14 / 2019 Transaction ID : SA11AI.4509
Mailing Address 31800 Nottingham Drive		Amount of Each Receipt this Period 200.00
City Franklin	State MI	Zip Code 48025
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Direct Contribution
Name of Employer (for Individual) Wayne State University	Occupation (for Individual) Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	3900.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
FRIENDS OF WAYNE STATE

Full Name (Last, First, Middle Initial)

A. Nationbuilder

Mailing Address 520 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Web Services

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
04 / 22 / 2019

FEC Identification Number

Transaction ID : SB21B.4458
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Nationbuilder

Mailing Address 520 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Web Services

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
05 / 21 / 2019

FEC Identification Number

Transaction ID : SB21B.4467
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Nationbuilder

Mailing Address 520 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Web Services

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
06 / 21 / 2019

FEC Identification Number

Transaction ID : SB21B.4474
Amount of Each Disbursement this Period

Memo Item

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

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
FRIENDS OF WAYNE STATE

A. US Post Office

Full Name (Last, First, Middle Initial)

Mailing Address 1401 W Forst Street

City Detroit State MI Zip Code 48233

Purpose of Disbursement PO Box Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 15 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4465

Amount of Each Disbursement this Period: 226.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	226.00
TOTAL This Period (last page this line number only).....▶	403.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)
FRIENDS OF WAYNE STATE

Full Name (Last, First, Middle Initial)

A. Great Lakes PAC

Mailing Address 700 13th Street NW, Suite 600

City Washington DC State DC Zip Code 20005

Purpose of Disbursement
Event Ticket

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 11 / 2019

FEC Identification Number
C C00375584
Transaction ID : SB23.4494
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Peters for Michigan

Mailing Address PO Box 226

City Bloomfield Hills State MI Zip Code 48303

Purpose of Disbursement
Event Ticket

Category/
Type

Candidate Name

Peters for Michigan

Office Sought: House Senate President
State: District:

Disbursement For: 2020
 Primary General
 Other (specify)

Date of Disbursement
MM / DD / YYYY
06 / 03 / 2019

FEC Identification Number
C
Transaction ID : SB23.4483
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

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

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

1500.00
1500.00

**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)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

Full Name (Last, First, Middle Initial)

A. Committee to Elect Shane Hernandez

Mailing Address 1423 18th Street

City Port Huron State MI Zip Code 48060

Purpose of Disbursement
Event Ticket

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 01 / 2019

FEC Identification Number

Transaction ID : SB29.4490
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. CTE Mary Whiteford

Mailing Address PO Box 324

City Allegan State MI Zip Code 49010

Purpose of Disbursement
Event Ticket

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 01 / 2019

FEC Identification Number

Transaction ID : SB29.4492
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Gretchen Whitmer for Governor

Mailing Address PO Box 15282

City Lansing State MI Zip Code 48901

Purpose of Disbursement
Event Ticket

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
02 / 28 / 2019

FEC Identification Number

Transaction ID : SB29.4485
Amount of Each Disbursement this Period

Memo Item

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

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)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF WAYNE STATE

A. Jim Stamas for State Senate

Full Name (Last, First, Middle Initial)

Mailing Address 5915 Eastman Avenue, Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement Event Tickets

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 01 / 2019

FEC Identification Number C

Transaction ID : SB29.4488

Amount of Each Disbursement this Period 500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	2500.00