PAGE 1 / 31

1

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3X Fo | r Other Than An Aut | horized Committee | Office Use Only | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------------------------|--|--|--|--|--|--|
| NAME OF COMMITTEE (in full) | YPE OR PRINT ▼ | Example: If typing, type over the lines. | 12FE4M5 | | | | | | |
| Henry Ford Health Syste | em Government Aff | airs Services PAC | | | | | | | |
| | | | | | | | | | |
| ADDRESS (number and street) | c/o Comerica Bank, PAC Se | ervices | | | | | | | |
| Check if different than previously reported. (ACC) | 3551 Hamlin Road, MC2250 Auburn Hills | | MI 48326 – L | | | | | | |
| 2. FEC IDENTIFICATION NUM | IBER ▼ CIT | Y A | STATE ▲ ZIP CODE ▲ | | | | | | |
| C C00552141 | | S THIS NEW (N) OF | 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) | Report Due On: Mar Apr (c) 12-Day PRE-Election Report for the: | General (30G) | Sep 20 (M9) Sep 20 (M9) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) | | | | | | |
| 5. Covering Period 10 | 01 2020 | through 10 | M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | | |
| I certify that I have examined this Type or Print Name of Treasurer | Report and to the best of Damschroder, Robin, , , | my knowledge and belief it is | true, correct and complete. | | | | | | |
| Signature of Treasurer | roder, Robin, , , | [Electronically Filed] | Date 10 / 21 / 2020 | | | | | | |
| NOTE: Submission of false, erroneou | us, or incomplete information | n may subject the person signing | g this Report to the penalties of 52 U.S.C. § 30109 | | | | | | |
| Office Use | | | FEC FORM 3X Rev. 05/2016 | | | | | | |

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Henry Ford Health System Government Affairs Services PAC

Report Covering the Period: From: 10 01 2020 To: 10 14 2020

| | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|-----|--------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. | (a) Cash on Hand January 1, 2020 | | 97245.35 |
| | (b) Cash on Hand at Beginning of Reporting Period | 91404.18 | |
| | (c) Total Receipts (from Line 19) | 1656.77 | 39331.12 |
| | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 93060.95 | 136576.47 |
| 7. | Total Disbursements (from Line 31) | 6750.00 | 50265.52 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 86310.95 | 86310.95 |
| 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. 05/2016)

Write or Type Committee Name

Henry Ford Health System Government Affairs Services PAC

10 01 2020 10 14 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 1414.84 23557.65 (i) Itemized (use Schedule A)..... 241.93 15773.47 (ii) Unitemized (iii) TOTAL (add 1656.77 39331.12 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 39331.12 1656.77 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))....... 39331.12 1656.77 20. Total Federal Receipts 1656.77 39331.12 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | | | |
|------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------|--|--|--|
| Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | Jaistina. 1941 to Buto | | | |
| (i) Federal Share | 0.00 | 0.00 | | | |
| (ii) Non-Federal Share | 0.00 | 0.00 | | | |
| (b) Other Federal Operating | 7 7 7 | | | | |
| Expenditures(c) Total Operating Expenditures | 0.00 | 0.00 | | | |
| (add 21(a)(i), (a)(ii), and (b))▶ | 0.00 | 0.00 | | | |
| Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 | | | |
| Contributions to Federal Candidates/Committees and Other Political Committees | 2000.00 | 11000.00 | | | |
| Independent Expenditures | 2000.00 | 4 4 | | | |
| (use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d)) | 0.00 | 0.00 | | | |
| (use Schedule F) | 0.00 | 0.00 | | | |
| Loan Repayments Made | 0.00 | 0.00 | | | |
| Loans MadeRefunds of Contributions To: | 0.00 | 0.00 | | | |
| (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 | | | |
| Other Disbursements (Including | 7 7 7 | 4 4 4 | | | |
| Non-Federal Donations) | 4750.00 | 39265.52 | | | |
| Federal Election Activity (52 U.S.C. § 30101(20 (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share | | | | | |
| (i) redelal Shale | 0.00 | 0.00 | | | |
| (ii) "Levin" Share(b) Federal Election Activity Paid | 0.00 | 0.00 | | | |
| Entirely With Federal Funds | 0.00 | 0.00 | | | |
| Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 | | | |
| Total Disbursements (add Lines 21(c), 22, | | | | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 6750.00 | 50265.52 | | | |
| Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) | | | | | |
| from Line 31) | 6750.00 | 50265.52 | | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) III. Net Contributions/

Operating Expenditures

33. Total Contributions (other than loans)

35. Net Contributions (other than loans)

36. Total Federal Operating Expenditures

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

34. Total Contribution Refunds

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 1656.77 39331.12 (from Line 11(d), page 3) 0.00 0.00 (from Line 28(d))..... 1656.77 39331.12 (subtract Line 34 from Line 33) 0.00 0.00 (add Line 21(a)(i) and Line 21(b))▶ 0.00 0.00 (from Line 15, page 3)..... 0.00 0.00 (subtract Line 37 from Line 36)

Use separate schedule(s) for each category of the

| | | | | | | | | 6 | OF | | 31 | | |
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| | | 13 | | 14 | | 15 | | 16 | 6 | | 17 | | |

Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kolpasky, Paul, M., , Date of Receipt Mailing Address 5196 Westmoreland Dr 14 2020 City Zip Code State Transaction ID: PR129695350812 MI Troy 48085 Amount of Each Receipt this Period FEC ID number of contributing 27.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vice President/Corp Controller Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$27.00 Bi-Weekly) 540.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Collins, Denise, , , Date of Receipt Mailing Address 826 Edgemont Run 10 2020 City State Zip Code Transaction ID : PR130036550812 Bloomfield Hills MI 48304 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Vice Chair- Radiology Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Munkarah, Adnan, R., Date of Receipt Mailing Address 968 Yarmouth St 14 2020 City State Zip Code Transaction ID: PR130057150812 MI Bloomfield Hills 48301 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System **EVP & Chief Clinical Officer** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$125.00 Bi-Weekly) 2500.00 Other (specify) 172.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

Use separate schedule(s)

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for each category of the Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kalkanis, Steven, N,, MD Date of Receipt Mailing Address 528 Barrington Court 14 2020 City Zip Code State Transaction ID: PR130080550812 MI Bloomfield Hills 48304 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP, HFHS & CEO HFMG Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$35.00 Bi-Weekly) 700.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Brodie, Michael, , , Date of Receipt Mailing Address 17633 Adrian Road 10 14 2020 City State Zip Code Transaction ID : PR130085150812 Southfield MI 48075 Amount of Each Receipt this Period FEC ID number of contributing 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Mgr- IT Strategic Suppl Reltns Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Bi-Weekly) Other (specify) 240.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Sears, Michele, Harrison, , Date of Receipt Mailing Address 1037 S 16th StPob 175 14 2020 City State Zip Code Transaction ID: PR133616350812 MI Au Gres 48703 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System **Dir-Foundation Relations** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) 475.00 Other (specify) 72.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the

| F | OR | LINE | PAGE | | 8 | OF | | 31 | | | | | |
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Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Barkley, Gregory, , , Date of Receipt Mailing Address 2890 Burlington 2020 City Zip Code State Transaction ID: PR133695950812 MI Ann Arbor 48105 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Croxton, Glenn, A., , Date of Receipt Mailing Address 787 Snowmass 10 2020 City State Zip Code Transaction ID: PR133696050812 MI Rochester Hills 48309 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Dir-Vendor Compliance & Procur Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Doemer, Anthony, John, Date of Receipt Mailing Address 5230 Orion Rd 14 2020 City State Zip Code Transaction ID: PR133696250812 MI Oakland Twp 48306 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Physicist I- Radiation Oncolog Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s)

| ı | FO | R LINE | NUMBER | : PAGE | E 9 OF | 31 | | | | | | | |
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for each category of the Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gad-Harf, David, , , Date of Receipt Mailing Address 5710 Ridgewood 2020 City Zip Code State Transaction ID: PR133696350812 MI West Bloomfield 48322 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dir- Corporate Relations Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Patterson, Geoffrey, Robert, Date of Receipt Mailing Address 3339 Stonewyck Ct. 10 2020 City State Zip Code Transaction ID: PR133696650812 MI Shelby Township 48316 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System **VP- Clinical Transformation** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Youn, Youngsuk, , , Date of Receipt Mailing Address 7676 Windgate Circle 14 2020 City State Zip Code Transaction ID: PR133723350812 MI West Bloomfield 48323 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Optometrist In Charge Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Strohm, Joan, , , Date of Receipt Mailing Address 1342 Kathmar Dr 2020 City Zip Code State Transaction ID: PR133724250812 MI Jackson 49203 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CNO/COO - HFASH Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$60.00 Bi-Weekly) 780.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Coulombe, Maribeth, , , Date of Receipt Mailing Address 7751 Clinton Road 10 2020 City State Zip Code Transaction ID: PR133739850812 MI Jackson 49201 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Senior Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Groth, David, , , Date of Receipt Mailing Address 45120 Brunswick 14 2020 City State Zip Code Transaction ID: PR133741150812 MI Canton 48187 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System **Dir-Market Support Services** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gunn, Valerie, Ann, , Date of Receipt Mailing Address 1682 Poppleton Dr. 2020 City Zip Code State Transaction ID: PR133741250812 MI West Bloomfield 48324 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System **Dir-Ambulatory Regional Opers** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Junca, Carlos, , , Date of Receipt Mailing Address 2023 Parkwood Way 10 2020 City State Zip Code Transaction ID : PR133741950812 MI Jackson 49203 Amount of Each Receipt this Period FEC ID number of contributing 19.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Dir-Regional Supply Chain Mgt. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$19.23 Bi-Weekly) Other (specify) 384.60 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Mcintosh, Krista, Marie, Date of Receipt Mailing Address 55336 Fallbrooke Dr. 14 2020 City State Zip Code Transaction ID: PR133742650812 MI Macomb 48042 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Mgr- Analytics Delivery Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) 500.00 Other (specify) 64.23 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

Use separate schedule(s)

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for each category of the Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Phillips, Robert, Melvin, , Date of Receipt Mailing Address 29202 Bradmoor Ct. 2020 City Zip Code State Transaction ID: PR133742850812 MI Farmington Hills 48334 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Family Practitioner Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Saldivar, Jose, , , Date of Receipt Mailing Address 701 Brookwood Lane E 10 2020 City State Zip Code Transaction ID : PR133743350812 Rochester Hills MI 48309 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System **Dir-Facilities** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Taylor, Kevin, , , Date of Receipt Mailing Address 4263 Rebecca Circle 14 2020 City State Zip Code Transaction ID: PR133743950812 MI Commerce Township 48390 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Mgr- IT Svc Mgmt Applications Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 300.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s)

| F | OR | LINE | PAGE | • | 13 | OF | | 31 | | | | | |
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for each category of the Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wafer, Alicia, Chris, , Date of Receipt Mailing Address 12939 Mercedes 2020 City Zip Code State Transaction ID: PR133744350812 MI Redford 48239 Amount of Each Receipt this Period FEC ID number of contributing 22.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Dir-Respiratory Therapy** Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$22.00 Bi-Weekly) 440.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nerenz, David, R.,, Date of Receipt Mailing Address 239 Tonkin Drive 10 2020 City State Zip Code Transaction ID : PR148486750812 MI Ishpeming 49849 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Dir-Emeritus-Ctr for HealthSvc Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Ryan, Charlene, M., Date of Receipt Mailing Address 2812 Clark Rd. 14 2020 City State Zip Code Transaction ID: PR148545650812 MI Lapeer 48446 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System **CRNA** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) 62.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s)

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for each category of the Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Skolnik, Johanna, , , Date of Receipt Mailing Address 2117 19th St 2020 City Zip Code State Transaction ID: PR148573050812 MI Wyandotte 48192 Amount of Each Receipt this Period FEC ID number of contributing 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Dir-Information Privacy** Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Bi-Weekly) 240.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Summers, Donna, Sue, , Date of Receipt Mailing Address 48659 Marberry 10 2020 City State Zip Code Transaction ID : PR148784750812 MI Macomb 48044 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Chief Nursing Info Officer Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Beesley, Jenny, Magante, , Date of Receipt Mailing Address 54547 Meadow Crest 14 2020 City State Zip Code Transaction ID: PR148968450812 MI **New Baltimore** 48047 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Mgr- Dialysis Nursing Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 300.00 Other (specify) 42.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Defrank, Joseph, , , Date of Receipt Mailing Address 26525 Eton Ave 2020 City Zip Code State Transaction ID: PR148968850812 MI Dearborn Heights 48125 Amount of Each Receipt this Period FEC ID number of contributing 11.54 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mgr- Corporate Reimbursement Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$11.54 Bi-Weekly) 230.80 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Peabody, James, Ogden, , Date of Receipt Mailing Address 5 Cameron Place 10 2020 City State Zip Code Transaction ID: PR148969350812 **Grosse Pointe** MI 48230 Amount of Each Receipt this Period FEC ID number of contributing 49.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Vice Chair-Urology Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$49.00 Bi-Weekly) Other (specify) 980.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Savage, Colleen, , , Date of Receipt Mailing Address 2712 Saturn Drive 14 2020 City State Zip Code Transaction ID: PR148969450812 MI Lake Orion 48360 Amount of Each Receipt this Period FEC ID number of contributing C 19.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Dir-HFHS Regulatory&QualReprtg Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$19.00 Bi-Weekly) 380.00 Other (specify) 79.54 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Smith, Mark, A.,, Date of Receipt Mailing Address 8458 Cedar Hills Dr. 2020 City Zip Code State Transaction ID: PR148969650812 MI Dexter 48130 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP - CMO, CEO - HFAMG Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$40.00 Bi-Weekly) 800.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Vieder, Jason, , , Date of Receipt Mailing Address 10406 Lasalle Blvd. 10 2020 City State Zip Code Transaction ID : PR149754250812 MI **Huntington Woods** 48070 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Div Hd- Emergency Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Williams, Celeste, Thomas, , Date of Receipt Mailing Address 7215 Hidden Creek Court 14 2020 City State Zip Code Transaction ID: PR149754550812 MI West Bloomfield 48322 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Cardiologist Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) 500.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Eller, Erik, , , Date of Receipt Mailing Address 17838 Stonebrook Ct 2020 City Zip Code State Transaction ID: PR149756750812 MI Northville 48168 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Blake, Desiree, , , Date of Receipt Mailing Address 1532 Mulberry Lane 10 2020 City State Zip Code Transaction ID: PR149789650812 MI Canton 48188 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Dir-Prof Developmnt/MagnetProg Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Blake, Morris, , , Date of Receipt Mailing Address 26700 West Road 14 2020 City State Zip Code Transaction ID: PR149942550812 MI Brownstown 48134 Amount of Each Receipt this Period FEC ID number of contributing 11.54 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System HFHS Proj Dir-Internatl Initia Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$11.54 Bi-Weekly) 230.80 Other (specify) 51.54 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 13 14 15 16 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Blum-Alexander, Barbara, Anne,, Date of Receipt Mailing Address 31176 Old Stage Rd. 2020 City Zip Code State Transaction ID: PR149942650812 MI Beverly Hills 48025 Amount of Each Receipt this Period FEC ID number of contributing 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Dir-Generation with Promise Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Bi-Weekly) 240.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kalus, James, , , Date of Receipt Mailing Address 1221 Torrey Road 10 2020 City State Zip Code Transaction ID : PR149943050812 MI **Grosse Pointe Woods** 48236 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Dir- Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Maes, Sandra, L, , Date of Receipt Mailing Address P O Box 1322 14 2020 City Zip Code State Transaction ID: PR149943550812 MI Jackson 49204 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System VP Phys Integr & Planning Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 360.00 Other (specify) 47.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Radu, Nikola, , , Date of Receipt Mailing Address 1901 Maple Ridge 14 2020 City Zip Code State Transaction ID: PR149944150812 MI Rochester Hills 48309 Amount of Each Receipt this Period FEC ID number of contributing 11.53 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dir- Security Services Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$11.53 Bi-Weekly) 230.60 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sayles, Amy, A,, Date of Receipt Mailing Address 609 W Michigan Ave 10 2020 City State Zip Code Transaction ID : PR149944350812 MI Jackson 49201 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Mgr-Care Experience Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Young, Robert, T, Date of Receipt Mailing Address 927 E Fifth St 14 2020 City State Zip Code Transaction ID: PR149944650812 MI Royal Oak 48067 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System VP & CFO- HFH & Hlth Ntwk Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) 51.53 SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page 13 14 15 16 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Farrell, Dennis, , , Date of Receipt Mailing Address 76546 Mary Grace 2020 City Zip Code State Transaction ID: PR149944750812 MI Bruce Twp. 48065 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Dir- Cardiovascular Services Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hightower, William, J, , Date of Receipt Mailing Address 1303 Dubine Dr 10 2020 City State Zip Code Transaction ID : PR150088550812 Charlottesville VA 22903 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Steiner, Sheryl, , , Date of Receipt Mailing Address 4233 Haven Ct 14 2020 City State Zip Code Transaction ID: PR150156650812 MI Adrian 49221 Amount of Each Receipt this Period FEC ID number of contributing C 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Coord - Business Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Bi-Weekly) 228.00 Other (specify) 47.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Carrigan, Julie, I,, Date of Receipt Mailing Address 10465 Chestnut Court 2020 City Zip Code State Transaction ID: PR150756850812 MI **Plymouth** 48170 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Dir-Market Support Services** Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hamilton, Jenifer, Kay, , Date of Receipt Mailing Address 1405 Badlands Drive 10 2020 City State Zip Code Transaction ID : PR150847450812 MI Lansing 48917 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Dir-Post-Acute Continuum Care Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Muma, Bruce, K., , Date of Receipt Mailing Address 3599 Wards Point Drive 14 2020 City State Zip Code Transaction ID: PR150847650812 MI Orchard Lake 48324 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System CEO- HF Physician Network Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| Full Name of Individual (Last, First, Middle I | Initial) or Full Organization Name | Date of Receipt |
| Mailing Address 445 Duck Lane | | 10 14 2020 |
| City | State Zip Code | Transaction ID : PR150940050812 |
| Walled Lake | MI 48390 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item |
| Henry Ford Health System Receipt For: | Dir- Culinary Wellness HFH | - |
| Primary General | Aggregate Year-to-Date ▼ | D/D Dadvetice (#05 00 Di Waaldy) |
| Other (specify) ▼ | 500.00 | P/R Deduction (\$25.00 Bi-Weekly) |
| Full Name of Individual (Last, First, Middle | Initial) or Full Organization Name | |
| Sykes, Jonathan, , , | | Date of Receipt |
| Mailing Address 4290 Crestline Drive | | 10 14 2020 |
| City | State Zip Code | Transaction ID : PR150940350812 |
| Ann Arbor | MI 48103 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 50.00 |
| Name of Employer (for Individual) Henry Ford Health System | Occupation (for Individual) Chief Med Info Officer | Memo Item |
| Receipt For: | Aggregate Year-to-Date ▼ | _ |
| Primary General Other (specify) ▼ | 1000.00 | P/R Deduction (\$50.00 Bi-Weekly) |
| Full Name of Individual (Last, First, Middle | Initial) or Full Organization Name | |
| C. Vera, David, , , | | Date of Receipt |
| Mailing Address 8210 Webster Dr | | 10 14 2020 |
| City | State Zip Code MI 48130 | Transaction ID : PR150940450812 |
| Dexter | MI | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 12.00 |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item |
| Henry Ford Health System Receipt For: | Physician Assistant III | - |
| Primary General | Aggregate Year-to-Date ▼ | P/R Deduction (\$12.00 Bi-Weekly) |
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ITEMIZED RECEIPTS for each category of the Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Nelson, Joielinn, L, , Date of Receipt Mailing Address 15201 Wolflake Forrest 14 2020 City Zip Code State Transaction ID: PR152667150812 MI Jackson 49201 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Nursing Administrator- Pt Care Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Williams, Jason, C,, Date of Receipt Mailing Address 24667 Brentwood Dr 10 2020 City State Zip Code Transaction ID : PR153025650812 MI Brownstown 48183 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Dir- Corporate Reimbursement Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Schreiber, Nicole, , , Date of Receipt Mailing Address 14705 Jackson Street 14 2020 City State Zip Code Transaction ID: PR153589550812 MI Taylor 48180 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Mgr-Athletic Training Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wallis, Eric, , , Date of Receipt Mailing Address 5818 Carmen Ct E City Zip Code State Transaction ID: PR153589750812 MI Orchard Lake 48324 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President-Hospital& Campus Ops Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$40.00 Bi-Weekly) 800.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Chbihi, Taibi, , Date of Receipt Mailing Address 1966 Pelican Ct 10 2020 City State Zip Code Transaction ID : PR154687750812 MI Troy 48084 Amount of Each Receipt this Period FEC ID number of contributing 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Physician Asst- Hospitalist Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Bi-Weekly) Other (specify) 228.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Klotz, Susan, , , Date of Receipt Mailing Address 15107 Regina Ave 14 2020 City State Zip Code Transaction ID: PR155217850812 MI Allen Park 48101 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry Ford Health System Nursing Administrator- Pt Care Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) 325.00 Other (specify) 77.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 25 OF Use separate schedule(s) (check only one) ITEMIZED RECEIPTS for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16 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) Henry Ford Health System Government Affairs Services PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Autry, Paula, , , Date of Receipt Mailing Address 109 West Washington AvenueLoft #25 2020 City Zip Code State Transaction ID: PR155217950812 MI Jackson 49203 Amount of Each Receipt this Period FEC ID number of contributing 77.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP, CEO-Central Market Henry Ford Health System Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$77.00 Bi-Weekly) 1001.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address

City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 77.00 SUBTOTAL of Receipts This Page (optional).....

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| | Full Name (Last, First, Middle Initial) | | | | | | | |
| Α. | Elissa Slotkin For Congress | | | | Date of Disbursement | | | |
| | Mailing Address PO Box 244 | | | | 10 07 2020 | | | |
| | City Holly | State MI | Zip Code 48442 | | FEC Identification Number | | | |
| | Purpose of Disbursement Direct Contribution | | | 011 | C C00650150 | | | |
| | Candidate Name | | | Category/ | Transaction ID: 12803558 Amount of Each Disbursement this Period | | | |
| | Slotkin, Elissa, , Rep., Office Sought: x House Disburser | nent For: 2 | 2020 | Туре | 1000.00 | | | |
| | Senate | Primary | ✗ General | | Direct Contribution | | | |
| | State: MI District: 08 | Other (spec | city) 🔻 | | Memo Item | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | |
| 3 . | Haley Stevens For Congress | | | | Date of Disbursement | | | |
| | Mailing Address 33717 Woodward Ave #539 | | | | 10 07 2020 | | | |
| | City Birmingham | State MI | Zip Code 48009 | | FEC Identification Number | | | |
| | Purpose of Disbursement Direct Contribution | | | 011 | C C00638650 | | | |
| | Candidate Name | | | Category/ | Transaction ID: 12803559 Amount of Each Disbursement this Period | | | |
| | Stevens, Haley, , , | | | Type | | | | |
| | | nent For: 2 | | | 1000.00 | | | |
| | Senate President | Primary Other (spec | General | | Direct Contribution | | | |
| | State: MI District: 11 | - Синон (орос | , | | Memo Item | | | |
| C. | Full Name (Last, First, Middle Initial) | | | | Date of Disbursement | | | |
| | Mailing Address | | | | M - M / D - D / Y - Y - Y | | | |
| | City | State | Zip Code | | FEC Identification Number | | | |
| | Purpose of Disbursement | | | | C | | | |
| | Candidate Name | | | Category/ Type | Amount of Each Disbursement this Period | | | |
| | Office Sought: House Disburser | | | - 7 0 | 4 4 | | | |
| | Senate President | Primary Other (spec | General cify) ▼ | | Mama Itam | | | |
| | State: District: | · • | · · · · · · · · · · · · · · · · · · · | | Memo Item | | | |
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| or for commercial purposes, other than using the name | | | | | |
| NAME OF COMMITTEE (In Full) | | | | | |
| Henry Ford Health System Govern | ment Affa | airs Services | s PAC | | |
| / | | | | | |
| Full Name (Last, First, Middle Initial) | | | | Date of Disbursem | ent |
| A. Rosemary Bayer for Senate | | | | M M / D D | |
| Mailing Address PO Box 7887 | | | | 10 07 | 2020 |
| | | | | | |
| , | State MI | Zip Code | | FEC Identification | Number |
| Bloomfield Hills Purpose of Disbursement | IVII | 48302 | | С | |
| Direct Contribution | | | 011 | | 40000550 |
| Candidate Name | | | Category/ | Transaction ID Amount of Each D | isbursement this Period |
| Bayer, Rosemary, , MI Sen., | | | Type | | |
| Office Sought: House Disbursen | | | | | 250.00 |
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| State: District: | Other (speci | iy) ▼ | | Memo Item | |
| Full Name (Last, First, Middle Initial) | | | | | |
| B. TRI-CITY LEADERSHIP PAC | | | | Date of Disbursem | ent |
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| Mailing Address 2537 S. Fort Street | | | | 10 07 | 2020 |
| , | State | Zip Code | | FEC Identification | Number |
| Detroit Purpose of Disbursement | MI | 48217 | | | |
| Direct Contribution | | | 011 | C | |
| Candidate Name | | I | Category/ | Transaction ID |): 12803552 isbursement this Period |
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| C. CHATFIELD MAJORITY FUND 4 | | | | Date of Disbursem | ent |
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| Mailing Address PO Box 1013 | | | | 10 07 | 2020 |
| City | State | Zip Code | | | |
| East Lansing | MI | 48826 | | FEC Identification | Number |
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| | | | 011 | Transaction II | D : 12803553 |
| Candidate Name | | | Category/ | Amount of Each D | isbursement this Period |
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| NAME OF COMMITTEE (In Full) Henry Ford Health System Gover | nment Affairs Servic | es PAC | | | | |
| | Tillione 7 tilding Gervie | 031710 | | | | |
| Full Name (Last, First, Middle Initial) | | | Date of Disbursement | | | |
| A. ALEX GARZA FOR STATE REPI | RESENTATIVE | | M M / D D / Y Y Y Y | | | |
| Mailing Address P.O. BOX 1982 | | | 10 07 2020 | | | |
| City | State Zip Code MI 48180 | | FEC Identification Number | | | |
| TAYLOR Purpose of Disbursement | MI 48180 | | | | | |
| Direct Contribution | | 011 | Transaction ID : 12803554 | | | |
| Candidate Name | | Category/ | Amount of Each Disbursement this Period | | | |
| Garza, Alex, , MI Rep., | | Type | 250.00 | | | |
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| President | Other (specify) | | Direct Contribution | | | |
| State: District: | | | Memo Item | | | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| B. Dayna Polehanki for State Senate | 9 | | Date of Disbursement | | | |
| Mailing Address DO Day 54040 | | | 10 07 2020 | | | |
| Mailing Address PO Box 51843 | | | 10 07 2020 | | | |
| City | State Zip Code | | FEC Identification Number | | | |
| Livonia Purpose of Disbursement | MI 48151 | | 0 | | | |
| Direct Contribution | | 011 | C | | | |
| Candidate Name | | Category/ | Transaction ID : 12803555 Amount of Each Disbursement this Period | | | |
| Polehanki, Dayna, , MI Sen., | | Type | | | | |
| | ement For: | | 250.00 | | | |
| Senate President | Primary General Other (specify) | | Direct Contribution | | | |
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| Full Name (Last, First, Middle Initial) | | | | | | |
| C. CITIZENS TO ELECT HELENA S | COTT | | Date of Disbursement | | | |
| Mailing Address PO BOX 21835 | | | 10 07 2020 | | | |
| Mailing Address FO BOX 21655 | | | 10 07 2020 | | | |
| City | State Zip Code | | FEC Identification Number | | | |
| Detroit Purpose of Disbursement | MI 48221 | | 0 | | | |
| Direct Contribution | | 011 | C | | | |
| Candidate Name | | Category/ | Transaction ID : 12803556 Amount of Each Disbursement this Period | | | |
| Scott, Helena, , , | | Type | | | | |
| | ement For: | | 250.00 | | | |
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| NAME OF COMMITTEE (In Full) Henry Ford Health System Govern | nment Affa | airs Services | s PAC | |
| Full Name (Last, First, Middle Initial) A. Committee to Elect Karen Whitsett | for St Re | p | | Date of Disbursement |
| Mailing Address 11406 Littlefield Street | | | | 10 07 2020 |
| Detroit Purpose of Disbursement | State MI | Zip Code 48227 | | FEC Identification Number |
| Direct Contribution Candidate Name Whitsett, Karen, , , | | | 011 Category/ Type | Transaction ID: 12803560 Amount of Each Disbursement this Period |
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| Full Name (Last, First, Middle Initial) C. Curtis Hertel, Jr. for Michigan | | | | Date of Disbursement |
| Mailing Address PO Box 16028 | | | | 10 07 2020 |
| City Lansing Purpose of Disbursement Direct Contribution | State MI | Zip Code 48901 | 011 | FEC Identification Number |
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| NAME OF COMMITTEE (In Full) Henry Ford Health System Governi | | | | | | | |
| Full Name (Last, First, Middle Initial) A. Adam J. Hollier Committee | | | | Date of Disbursement | | | |
| Mailing Address 31 Arden Park | | | | 10 07 2020 | | | |
| Detroit | State Zip C MI 482 | | | FEC Identification Number | | | |
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| Senate | | General , | | Direct Contribution Memo Item | | | |
| Full Name (Last, First, Middle Initial) B. Committee to Elect Matt Koleszar | | | | Date of Disbursement | | | |
| Mailing Address PO Box 6094 | | | | 10 07 2020 | | | |
| Plymouth Purpose of Disbursement | State Zip C MI 481 | | | FEC Identification Number | | | |
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| Full Name (Last, First, Middle Initial) C. MEERMAN MAJORITY FUND | | | | Date of Disbursement | | | |
| Mailing Address PO Box 361 | | | | 10 07 2020 | | | |
| City Holt Purpose of Disbursement Direct Contribution | State Zip C MI 488 | | 011 | FEC Identification Number | | | |
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