

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 230 North Avenue Suite 12  
Mount Clemens MI 48043  
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00224717  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 05 01 2009 through 05 31 2009

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

Type or Print Name of Treasurer Michelle DeBeaussaert

Signature of Treasurer Electronically Filed by Michelle DeBeaussaert Date 06 15 2009

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Philip A. Hart Democratic Club

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		29608.16
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	50743.67									
(c) Total Receipts (from Line 19) .....	138001.80	579247.80								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	188745.47	608855.96								
7. Total Disbursements (from Line 31) .....	124040.10	544150.59								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	64705.37	64705.37								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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**

Write or Type Committee Name  
Philip A. Hart Democratic Club

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	27912.00	114622.00
(i) Itemized (use Schedule A) .....	109612.00	461658.00
(ii) Unitemized .....	137524.00	576280.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	1390.00
(c) Other Political Committees (such as PACs) .....	137524.00	577670.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	1100.00
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) .....	477.80	477.80
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	138001.80	579247.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	138001.80	579247.80

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	124040.10	543650.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	124040.10	543650.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	124040.10	544150.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	124040.10	544150.59

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	137524.00	577670.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	137524.00	577670.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	124040.10	543650.59
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	477.80	477.80
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	123562.30	543172.79

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Al Allen

Mailing Address 26638 Curie

City Warren State MI Zip Code 48091

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 10 / 2009

**Transaction ID:** SA11AI.16730

Amount of Each Receipt this Period 100.00

**B.**

Full Name (Last, First, Middle Initial)  
Emmanuel Alojipan

Mailing Address 29074 Edward

City Madison Heights State MI Zip Code 48071

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 03 / 2009

**Transaction ID:** SA11AI.16687

Amount of Each Receipt this Period 150.00

**C.**

Full Name (Last, First, Middle Initial)  
Issac Anderson

Mailing Address 11920 Lakepointe

City Detroit State MI Zip Code 48221

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 24 / 2009

**Transaction ID:** SA11AI.16906

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00

**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 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Issac Anderson

Mailing Address 11920 Lakepointe

City State Zip Code  
Detroit MI 48221

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 31 / 2009  
**Transaction ID:** SA11AI.16903

Amount of Each Receipt this Period 150.00

**B.** Full Name (Last, First, Middle Initial)  
Millie Anderson

Mailing Address 11955 Buffalo

City State Zip Code  
Hamtramck MI 48212

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 31 / 2009  
**Transaction ID:** SA11AI.16886

Amount of Each Receipt this Period 175.00

**C.** Full Name (Last, First, Middle Initial)  
Jennifer Aniel

Mailing Address 33067 Fraser Ave

City State Zip Code  
Fraser MI 48026

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt 05 / 02 / 2009  
**Transaction ID:** SA11AI.17221

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... 425.00

**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 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Rebecca Ballard

Mailing Address 320 W. Hudson

City State Zip Code  
Madison Heights MI 48071

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
560.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** SA11AI.16923

Amount of Each Receipt this Period  
190.00

**B.**

Full Name (Last, First, Middle Initial)  
Rose Banas

Mailing Address 34158 Tudor Court

City State Zip Code  
Sterling Heights MI 48312

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1290.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16785

Amount of Each Receipt this Period  
165.00

**C.**

Full Name (Last, First, Middle Initial)  
Rose Banas

Mailing Address 34158 Tudor Court

City State Zip Code  
Sterling Heights MI 48312

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1475.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** SA11AI.16914

Amount of Each Receipt this Period  
185.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **540.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Tina Bazinet

Mailing Address 11507 Republic

City State Zip Code  
Warren MI 48089

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 970.00

Date of Receipt

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

Transaction ID: SA11AI.16719

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Donna Brockway

Mailing Address 26851 Merideth

City State Zip Code  
Warren MI 48091

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 525.00

Date of Receipt

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

Transaction ID: SA11AI.16720

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Donna Brockway

Mailing Address 26851 Merideth

City State Zip Code  
Warren MI 48091

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 675.00

Date of Receipt

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

Transaction ID: SA11AI.16721

Amount of Each Receipt this Period  
150.00

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

350.00

**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 10 / 159
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Donna Brockway		Date of Receipt																					
	Mailing Address 26851 Merideth		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		1	0		2	0	0	9														
	City Warren State MI Zip Code 48091		<b>Transaction ID:</b> SA11AI.16750																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																					
Name of Employer None Occupation Retired		<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>		200.00																				
200.00																								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="10">875.00</td> </tr> </table>		875.00																				
875.00																								

<b>B.</b>	Full Name (Last, First, Middle Initial) Donna Brockway		Date of Receipt																					
	Mailing Address 26851 Merideth		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		2	4		2	0	0	9														
	City Warren State MI Zip Code 48091		<b>Transaction ID:</b> SA11AI.16848																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																					
Name of Employer None Occupation Retired		<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>		100.00																				
100.00																								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="10">975.00</td> </tr> </table>		975.00																				
975.00																								

<b>C.</b>	Full Name (Last, First, Middle Initial) Donna Brockway		Date of Receipt																					
	Mailing Address 26851 Merideth		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		3	1		2	0	0	9														
	City Warren State MI Zip Code 48091		<b>Transaction ID:</b> SA11AI.16913																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																					
Name of Employer None Occupation Retired		<table border="1"> <tr> <td colspan="10">185.00</td> </tr> </table>		185.00																				
185.00																								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="10">1160.00</td> </tr> </table>		1160.00																				
1160.00																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<table border="1"><tr><td>485.00</td></tr></table>	485.00
485.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td> </td></tr></table>	

**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 11 / 159
	<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)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Katrina Brodeur

Mailing Address 16912 Stewart

City State Zip Code  
Clinton Twp MI 48038

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt MM / DD / YYYY  
05 / 09 / 2009

**Transaction ID:** SA11AI.17257

Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Evelyn Burak

Mailing Address 32739 Greenbriar

City State Zip Code  
Warren MI 48092

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16798

Amount of Each Receipt this Period 275.00

**C.** Full Name (Last, First, Middle Initial)  
Evelyn Burak

Mailing Address 32739 Greenbriar

City State Zip Code  
Warren MI 48092

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16799

Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **450.00**

**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 12 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Evelyn Burak

Mailing Address 32739 Greenbriar

City State Zip Code  
Warren MI 48092

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.16905

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
Evelyn Burak

Mailing Address 32739 Greenbriar

City State Zip Code  
Warren MI 48092

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.16936

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Ruth Butucel

Mailing Address 44518 N. Bunker Hill

City State Zip Code  
Clinton Township MI 48038

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

Name of Employer Occupation  
None Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.17350

Amount of Each Receipt this Period  
100.00

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

350.00

**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 13 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Frank Caballero

Mailing Address 35834 Monaco Dr

City State Zip Code  
Sterling Heights MI 48312

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2009

**Transaction ID:** SA11AI.17355

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Juana Caballero

Mailing Address 35834 Monaco

City State Zip Code  
Sterling Heights MI 48312

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2009

**Transaction ID:** SA11AI.17336

Amount of Each Receipt this Period  
86.00

**C.**

Full Name (Last, First, Middle Initial)  
Juana Caballero

Mailing Address 35834 Monaco

City State Zip Code  
Sterling Heights MI 48312

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2009

**Transaction ID:** SA11AI.17361

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **246.00**

**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 14 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Emily Cardin  
Mailing Address 48860 Park  
City Shelby Twp State MI Zip Code 48315  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 320.00  
Date of Receipt 05 / 02 / 2009  
Transaction ID: SA11AI.17207  
Amount of Each Receipt this Period 60.00

**B.** Full Name (Last, First, Middle Initial)  
Emily Cardin  
Mailing Address 48860 Park  
City Shelby Twp State MI Zip Code 48315  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 445.00  
Date of Receipt 05 / 30 / 2009  
Transaction ID: SA11AI.17344  
Amount of Each Receipt this Period 125.00

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth Carmack  
Mailing Address 7558 State Park  
City Center Line State MI Zip Code 48015  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 290.00  
Date of Receipt 05 / 31 / 2009  
Transaction ID: SA11AI.16918  
Amount of Each Receipt this Period 190.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 375.00  
**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 15 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth Carmack

Mailing Address 7558 State Park

City State Zip Code  
Center Line MI 48015

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** SA11AI.16934

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth Carmack

Mailing Address 7558 State Park

City State Zip Code  
Center Line MI 48015

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
565.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** SA11AI.16935

Amount of Each Receipt this Period  
175.00

**C.**

Full Name (Last, First, Middle Initial)  
Josephine Catlin

Mailing Address 18896 Highlite

City State Zip Code  
Clinton Township MI 48035

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2009

**Transaction ID:** SA11AI.17323

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **375.00**

**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 16 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)

Josephine Catlin

Mailing Address 18896 Highlite

City State Zip Code  
Clinton Township MI 48035

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.17360

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Chris Chunn

Mailing Address 27204 James

City State Zip Code  
Warren MI 48092

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.16810

Amount of Each Receipt this Period

175.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Cicchini

Mailing Address 18452 Old Coach Tr

City State Zip Code  
Clinton Twp MI 48038

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.17269

Amount of Each Receipt this Period

60.00

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

335.00

**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 17 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Michael Cicchini

Mailing Address 18452 Old Coach Tr

City State Zip Code  
Clinton Twp MI 48038

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2009

**Transaction ID:** SA11AI.17296

Amount of Each Receipt this Period  
60.00

**B.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2009

**Transaction ID:** SA11AI.16722

Amount of Each Receipt this Period  
170.00

**C.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2009

**Transaction ID:** SA11AI.16726

Amount of Each Receipt this Period  
135.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **365.00**

**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 18 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 555.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.16772

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 705.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.16802

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 880.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.16834

Amount of Each Receipt this Period

175.00

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

425.00

**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 19 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1055.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.16845

Amount of Each Receipt this Period

175.00

**B.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1155.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.16853

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.16855

Amount of Each Receipt this Period

100.00

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

375.00

**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 20 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1355.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2009

Transaction ID: SA11AI.16864

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1455.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

Transaction ID: SA11AI.16898

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Pauline Ciesielski

Mailing Address 9135 Greenboro

City State Zip Code  
Detroit MI 48224

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1640.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

Transaction ID: SA11AI.16911

Amount of Each Receipt this Period  
185.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **385.00**

**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 21 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Diana Cloninger  
Mailing Address 1768 E. Milton  
City Hazel Park State MI Zip Code 48030  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 495.00  
Date of Receipt 05 / 31 / 2009  
Transaction ID: SA11AI.16943  
Amount of Each Receipt this Period 170.00

**B.** Full Name (Last, First, Middle Initial)  
Bernice Coleman  
Mailing Address 19643 Buffalo  
City Detroit State MI Zip Code 48234  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 495.00  
Date of Receipt 05 / 17 / 2009  
Transaction ID: SA11AI.16758  
Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
Bernice Coleman  
Mailing Address 19643 Buffalo  
City Detroit State MI Zip Code 48234  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 05 / 17 / 2009  
Transaction ID: SA11AI.16769  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 470.00  
**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 22 / 159
	<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)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Bernice Coleman		Date of Receipt
	Mailing Address 19643 Buffalo		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 31 / 2009
	City	State	Zip Code
	Detroit	MI	48234
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.16947
Name of Employer		Occupation	Amount of Each Receipt this Period
		Homemaker	<input type="text"/> 175.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 770.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Vickie Coleman		Date of Receipt
	Mailing Address 50670 Callens		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 09 / 2009
	City	State	Zip Code
	Chesterfield	MI	48047
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.17253
Name of Employer None		Occupation	Amount of Each Receipt this Period
		Retired	<input type="text"/> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 550.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Vickie Coleman		Date of Receipt
	Mailing Address 50670 Callens		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 23 / 2009
	City	State	Zip Code
	Chesterfield	MI	48047
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.17315
Name of Employer None		Occupation	Amount of Each Receipt this Period
		Retired	<input type="text"/> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 375.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 23 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Lou Anne Comaianni  
 Mailing Address 4087 Riverview  
 City State Zip Code  
Mt. Clemens MI 48043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
None Retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 575.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 9 / 2 0 0 9  
**Transaction ID:** SA11AI.17259  
 Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Donna Dawe  
 Mailing Address 1146 E. Maxlow  
 City State Zip Code  
Hazel Park MI 48030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
None Retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 9  
**Transaction ID:** SA11AI.16941  
 Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
Maggie DiBart  
 Mailing Address 24508 Victory  
 City State Zip Code  
Center Line MI 48015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
Retired Retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 3 / 2 0 0 9  
**Transaction ID:** SA11AI.16669  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00  
**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 24 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Marianne Dykgraaf\*

Mailing Address 24864 Antoinette

City Warren State MI Zip Code 48089

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY  
05 / 03 / 2009

**Transaction ID:** SA11AI.16668

Amount of Each Receipt this Period 150.00

**B.** Full Name (Last, First, Middle Initial)  
Marianne Dykgraaf\*

Mailing Address 24864 Antoinette

City Warren State MI Zip Code 48089

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16768

Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Marianne Dykgraaf\*

Mailing Address 24864 Antoinette

City Warren State MI Zip Code 48089

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt MM / DD / YYYY  
05 / 24 / 2009

**Transaction ID:** SA11AI.16861

Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 425.00

**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 25 / 159  
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Shirley Epps

Mailing Address 20451 Greenley

City State Zip Code  
Detroit MI 48231

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

**Transaction ID:** SA11AI.16692

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
Yvette Francis

Mailing Address 17170 Dawn

City State Zip Code  
Roseville MI 48066

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** SA11AI.16902

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Yvette Francis

Mailing Address 17170 Dawn

City State Zip Code  
Roseville MI 48066

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** SA11AI.16912

Amount of Each Receipt this Period  
185.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **435.00**

**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 26 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)

Yvette Francis

Mailing Address 17170 Dawn

City State Zip Code  
Roseville MI 48066

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 635.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.16932

Amount of Each Receipt this Period  
175.00

**B.**

Full Name (Last, First, Middle Initial)

Debbie Gansior

Mailing Address 28917 James

City State Zip Code  
Warren MI 48092

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

Name of Employer Occupation  
None Home Maker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1370.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.17332

Amount of Each Receipt this Period  
105.00

**C.**

Full Name (Last, First, Middle Initial)

Joan Glowacki

Mailing Address 13242 Hartwell

City State Zip Code  
Warren MI 48089

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 775.00

Date of Receipt

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

Transaction ID: SA11AI.17215

Amount of Each Receipt this Period  
100.00

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

380.00

**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 27 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Joan Glowacki  
Mailing Address 13242 Hartwell

City Warren State MI Zip Code 48089

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 05 / 30 / 2009  
**Transaction ID:** SA11AI.17334  
 Amount of Each Receipt this Period: 75.00

**B.** Full Name (Last, First, Middle Initial)  
Jennifer Haase  
Mailing Address 34886 Maplewood

City Richmond State MI Zip Code 48062

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

Name of Employer State of Michigan Occupation State Legislator

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 05 / 12 / 2009  
**Transaction ID:** SA11AI.16619  
 Amount of Each Receipt this Period: 350.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
Angela Harris  
Mailing Address 6142 Norwalk

City Detroit State MI Zip Code 48211

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 03 / 2009  
**Transaction ID:** SA11AI.16653  
 Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 525.00

**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 28 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Angela Harris  
Mailing Address 6142 Norwalk

City State Zip Code  
Detroit MI 48211

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

**Transaction ID:** SA11AI.16654

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Angela Harris  
Mailing Address 6142 Norwalk

City State Zip Code  
Detroit MI 48211

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

**Transaction ID:** SA11AI.16683

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Angela Harris  
Mailing Address 6142 Norwalk

City State Zip Code  
Detroit MI 48211

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

**Transaction ID:** SA11AI.16690

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00

**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 29 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Brenda Henderson  
Mailing Address 11107 Paige  
City Warren State MI Zip Code 48089  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 05 / 03 / 2009  
Transaction ID: SA11AI.16680  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Brenda Henderson  
Mailing Address 11107 Paige  
City Warren State MI Zip Code 48089  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2600.00  
Date of Receipt 05 / 03 / 2009  
Transaction ID: SA11AI.16681  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Sherrie Henderson  
Mailing Address 11107 Paige  
City Warren State MI Zip Code 48092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1460.00  
Date of Receipt 05 / 03 / 2009  
Transaction ID: SA11AI.16663  
Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00  
**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 30 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Sherrie Henderson  
 Mailing Address 11107 Paige  
 City Warren State MI Zip Code 48092  
 Date of Receipt 05 / 03 / 2009  
**Transaction ID:** SA11AI.16686  
 Amount of Each Receipt this Period 150.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1610.00

**B.** Full Name (Last, First, Middle Initial)  
Sherrie Henderson  
 Mailing Address 11107 Paige  
 City Warren State MI Zip Code 48092  
 Date of Receipt 05 / 17 / 2009  
**Transaction ID:** SA11AI.16805  
 Amount of Each Receipt this Period 50.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1660.00

**C.** Full Name (Last, First, Middle Initial)  
Becky Hermanson  
 Mailing Address 35329 Lana Lane  
 City Sterling Heights State MI Zip Code 48312  
 Date of Receipt 05 / 10 / 2009  
**Transaction ID:** SA11AI.16699  
 Amount of Each Receipt this Period 150.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1035.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00  
**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 31 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Becky Hermanson

Mailing Address 35329 Lana Lane

City State Zip Code  
Sterling Heights MI 48312

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1135.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2009

Transaction ID: SA11AI.17266

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Yvonne Hollins

Mailing Address 12031 Cloom

City State Zip Code  
Hamtramck MI 48212

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2009

Transaction ID: SA11AI.16727

Amount of Each Receipt this Period  
125.00

**C.**

Full Name (Last, First, Middle Initial)  
Anwar Jajou

Mailing Address 2321 Autumn Ridge

City State Zip Code  
Sterling Heights MI 48310

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2009

Transaction ID: SA11AI.16747

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **325.00**

**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 32 / 159  
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey Johannes

Mailing Address 17323 Kingsbrooke Cr.

City State Zip Code  
Clinton Twp MI 48038

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2009

**Transaction ID:** SA11AI.17324

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Rosemary Kern

Mailing Address 22257 Curie

City State Zip Code  
Warren MI 48091

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2009

**Transaction ID:** SA11AI.16816

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Amy Kilbourn

Mailing Address 3890 Woodman

City State Zip Code  
Troy MI 48084

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2185.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16781

Amount of Each Receipt this Period  
165.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **365.00**

**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 33 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Amy Kilbourn  
Mailing Address 3890 Woodman

City State Zip Code  
Troy MI 48084

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt: 05 / 17 / 2009  
Transaction ID: SA11AI.16783  
Amount of Each Receipt this Period: 165.00

**B.** Full Name (Last, First, Middle Initial)  
Amy Kilbourn  
Mailing Address 3890 Woodman

City State Zip Code  
Troy MI 48084

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2535.00

Date of Receipt: 05 / 31 / 2009  
Transaction ID: SA11AI.16915  
Amount of Each Receipt this Period: 185.00

**C.** Full Name (Last, First, Middle Initial)  
Jean Kinney  
Mailing Address 26600 Ponchartrain

City State Zip Code  
Harrison Township MI 48045

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

Name of Employer None Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 05 / 16 / 2009  
Transaction ID: SA11AI.17276  
Amount of Each Receipt this Period: 60.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 410.00

**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 34 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Jean Kinney  
Mailing Address 26600 Ponchartrain

City Harrison Township State MI Zip Code 48045

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt: 05 / 23 / 2009  
**Transaction ID:** SA11AI.17322  
 Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
Jean Kinney  
Mailing Address 26600 Ponchartrain

City Harrison Township State MI Zip Code 48045

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt: 05 / 30 / 2009  
**Transaction ID:** SA11AI.17356  
 Amount of Each Receipt this Period: 125.00

**C.** Full Name (Last, First, Middle Initial)  
Judy Knaggs  
Mailing Address 26281 Grobbel

City Warren State MI Zip Code 48091

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 05 / 10 / 2009  
**Transaction ID:** SA11AI.16725  
 Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 325.00

**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 35 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Jennifer Kolleth

Mailing Address 8465 Meadow

City Warren State MI Zip Code 48089

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

Name of Employer Occupation Home Maker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 815.00

Date of Receipt 05 / 24 / 2009

Transaction ID: SA11AI.16821

Amount of Each Receipt this Period 175.00

**B.**

Full Name (Last, First, Middle Initial)  
Jennifer Kolleth

Mailing Address 8465 Meadow

City Warren State MI Zip Code 48089

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

Name of Employer Occupation Home Maker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 990.00

Date of Receipt 05 / 24 / 2009

Transaction ID: SA11AI.16833

Amount of Each Receipt this Period 175.00

**C.**

Full Name (Last, First, Middle Initial)  
Jennifer Kolleth

Mailing Address 8465 Meadow

City Warren State MI Zip Code 48089

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

Name of Employer Occupation Home Maker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1165.00

Date of Receipt 05 / 24 / 2009

Transaction ID: SA11AI.16842

Amount of Each Receipt this Period 175.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 525.00

**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 36 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Joanne Kortas

Mailing Address 18220 Buchanan

City State Zip Code  
Roseville MI 48066

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
640.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2009

Transaction ID: SA11AI.17254

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Joanne Kortas

Mailing Address 18220 Buchanan

City State Zip Code  
Roseville MI 48066

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
730.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2009

Transaction ID: SA11AI.17335

Amount of Each Receipt this Period  
90.00

**C.**

Full Name (Last, First, Middle Initial)  
Monica Lee

Mailing Address 7020 Dodge

City State Zip Code  
Warren MI 48091

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

Transaction ID: SA11AI.16879

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **440.00**

**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 37 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Sharon Lloyd  
Mailing Address 202 N. River Ct.  
City State Zip Code  
Mt. Clemens MI 48043  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt MM / DD / YYYY  
05 / 02 / 2009  
Transaction ID: SA11AI.17220  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Jerry Long  
Mailing Address 8309 Maxwell  
City State Zip Code  
Warren MI 48089  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 325.00  
Date of Receipt MM / DD / YYYY  
05 / 10 / 2009  
Transaction ID: SA11AI.16740  
Amount of Each Receipt this Period 175.00

**C.** Full Name (Last, First, Middle Initial)  
Nahren Lucian  
Mailing Address 36416 Bagdad  
City State Zip Code  
Sterling Heights MI 48312  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt MM / DD / YYYY  
05 / 16 / 2009  
Transaction ID: SA11AI.17297  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 375.00  
**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 38 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Marcella Mack

Mailing Address 11435 Dodge

City State Zip Code  
Warren MI 48089

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.17286

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)  
Donna Maddox

Mailing Address 1935 Javis

City State Zip Code  
Warren MI 48091

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt

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

Transaction ID: SA11AI.16717

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)  
Donna Maddox

Mailing Address 1935 Javis

City State Zip Code  
Warren MI 48091

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 425.00

Date of Receipt

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

Transaction ID: SA11AI.16723

Amount of Each Receipt this Period

100.00

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

310.00

**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 39 / 159  
(check only one)

<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
							17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Kaarina Maul

Mailing Address 2304 Orhcard Crest

City State Zip Code  
Utica MI 48317

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1835.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

Transaction ID: SA11AI.16662

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
Kaarina Maul

Mailing Address 2304 Orhcard Crest

City State Zip Code  
Utica MI 48317

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1985.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

Transaction ID: SA11AI.16664

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
Kaarina Maul

Mailing Address 2304 Orhcard Crest

City State Zip Code  
Utica MI 48317

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2135.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

Transaction ID: SA11AI.16672

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **450.00**

**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 40 / 159  
(check only one)

<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
							17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Kaarina Maul

Mailing Address 2304 Orhcard Crest

City State Zip Code  
Utica MI 48317

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2235.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

Transaction ID: SA11AI.16677

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Kaarina Maul

Mailing Address 2304 Orhcard Crest

City State Zip Code  
Utica MI 48317

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2385.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2009

Transaction ID: SA11AI.16707

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
Kaarina Maul

Mailing Address 2304 Orhcard Crest

City State Zip Code  
Utica MI 48317

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2510.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2009

Transaction ID: SA11AI.16865

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 375.00

**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 41 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
J.O. Mauradian  
Mailing Address 32278 Ryan  
City Warren State MI Zip Code 48092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 425.00  
Date of Receipt 05 / 17 / 2009  
Transaction ID: SA11AI.16800  
Amount of Each Receipt this Period 75.00

**B.** Full Name (Last, First, Middle Initial)  
Lisa Mickens  
Mailing Address 23721 Kelly, #6  
City Eastpointe State MI Zip Code 48021  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 950.00  
Date of Receipt 05 / 31 / 2009  
Transaction ID: SA11AI.16884  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Muniv Mikha  
Mailing Address 27347 Liberty  
City Warren State MI Zip Code 48092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 05 / 02 / 2009  
Transaction ID: SA11AI.17231  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 275.00  
**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 42 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Muniv Mikha  
Mailing Address 27347 Liberty  
City Warren State MI Zip Code 48092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 05 / 02 / 2009  
Transaction ID: SA11AI.17233  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Muniv Mikha  
Mailing Address 27347 Liberty  
City Warren State MI Zip Code 48092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00  
Date of Receipt 05 / 10 / 2009  
Transaction ID: SA11AI.16735  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Muniv Mikha  
Mailing Address 27347 Liberty  
City Warren State MI Zip Code 48092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 750.00  
Date of Receipt 05 / 17 / 2009  
Transaction ID: SA11AI.16801  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00  
**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 43 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Marilyn Miller

Mailing Address 17326 Mark Twain

City State Zip Code  
Detroit MI 48235

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1070.00

Date of Receipt

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

Transaction ID: SA11AI.16708

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Theresa Miller

Mailing Address 36120 Harcourt

City State Zip Code  
Clinton Township MI 48035

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: SA11AI.17235

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Catherine Morenski

Mailing Address 35903 Vaughn

City State Zip Code  
Clinton Township MI 48035

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 355.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.17337

Amount of Each Receipt this Period

85.00

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

285.00

**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 44 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Catherine Morenski

Mailing Address 35903 Vaughn

City State Zip Code  
Clinton Township MI 48035

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt MM / DD / YYYY  
05 / 30 / 2009

**Transaction ID:** SA11AI.17352

Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Elfriede Mottin

Mailing Address 49416 Richmond Court

City State Zip Code  
Shelby Township MI 48315

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt MM / DD / YYYY  
05 / 23 / 2009

**Transaction ID:** SA11AI.17298

Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Debbie Myre

Mailing Address 207 N. Wilson

City State Zip Code  
Royal Oak MI 48067

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16809

Amount of Each Receipt this Period 100.00

**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: (check only one)	PAGE 45 / 159
	<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)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Sarah Nazione

Mailing Address 30138 Bradner

City Warren State MI Zip Code 48088

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 05 / 23 / 2009

Transaction ID: SA11AI.17310

Amount of Each Receipt this Period: 100.00

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

Mailing Address 24757 Meadow

City Harrison Twp State MI Zip Code 48045

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 05 / 02 / 2009

Transaction ID: SA11AI.17216

Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth Nowak

Mailing Address 2317 Hidden Trail

City Sterling Heights State MI Zip Code 48314

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

Name of Employer None Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 05 / 16 / 2009

Transaction ID: SA11AI.17289

Amount of Each Receipt this Period: 60.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 260.00

**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 46 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth Nowak

Mailing Address 2317 Hidden Trail

City State Zip Code  
Sterling Heights MI 48314

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 9

**Transaction ID:** SA11AI.17342

Amount of Each Receipt this Period  
70.00

**B.**

Full Name (Last, First, Middle Initial)  
Lenora Obrecht

Mailing Address 17688 E. Kirkwood

City State Zip Code  
Clinton Township MI 48038

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 2 / 2 0 0 9

**Transaction ID:** SA11AI.17225

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Lenora Obrecht

Mailing Address 17688 E. Kirkwood

City State Zip Code  
Clinton Township MI 48038

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.17274

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **270.00**

**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 47 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Lenora Obrecht  
Mailing Address 17688 E. Kirkwood  
City State Zip Code  
Clinton Township MI 48038  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 535.00  
Date of Receipt: 05 / 23 / 2009  
Transaction ID: SA11AI.17311  
Amount of Each Receipt this Period: 200.00

**B.** Full Name (Last, First, Middle Initial)  
Caroline Ochenski  
Mailing Address 4538 Linville  
City State Zip Code  
Warren MI 48092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt: 05 / 10 / 2009  
Transaction ID: SA11AI.16716  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Carolyn Okey  
Mailing Address 21521 Indian Street  
City State Zip Code  
Southgate MI 48033  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1035.00  
Date of Receipt: 05 / 24 / 2009  
Transaction ID: SA11AI.16851  
Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 400.00  
**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 48 / 159  
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Carolyn Okey

Mailing Address 21521 Indian Street

City State Zip Code  
Southgate MI 48033

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1135.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** SA11AI.16933

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Sylvia Page

Mailing Address 727 W. Lantz

City State Zip Code  
Detroit MI 48203

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2009

**Transaction ID:** SA11AI.16849

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Sylvia Page

Mailing Address 727 W. Lantz

City State Zip Code  
Detroit MI 48203

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2009

**Transaction ID:** SA11AI.16852

Amount of Each Receipt this Period  
175.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **375.00**

**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 49 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Sylvia Page

Mailing Address 727 W. Lantz

City State Zip Code  
Detroit MI 48203

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2009

Transaction ID: SA11AI.16908

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Brian Pare

Mailing Address 19422 Opal

City State Zip Code  
Clinton Township MI 48035

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
445.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2009

Transaction ID: SA11AI.17295

Amount of Each Receipt this Period  
60.00

**C.**

Full Name (Last, First, Middle Initial)  
Kathy Passalacqua

Mailing Address 26188 Mapleridge

City State Zip Code  
Chesterfield MI 48051

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2009

Transaction ID: SA11AI.16871

Amount of Each Receipt this Period  
175.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **335.00**

**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 50 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Sandy Payne

Mailing Address 1371 Woodside

City State Zip Code  
Madison Heights MI 48070

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** SA11AI.16904

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
Sandy Payne

Mailing Address 1371 Woodside

City State Zip Code  
Madison Heights MI 48070

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** SA11AI.16924

Amount of Each Receipt this Period  
190.00

**C.**

Full Name (Last, First, Middle Initial)  
Janice Perry

Mailing Address 28740 Alden

City State Zip Code  
Madison Heights MI 48071

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2009

**Transaction ID:** SA11AI.17213

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **440.00**

**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 51 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Janice Perry

Mailing Address 28740 Alden

City State Zip Code  
Madison Heights MI 48071

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
830.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2009

**Transaction ID:** SA11AI.17236

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Janice Perry

Mailing Address 28740 Alden

City State Zip Code  
Madison Heights MI 48071

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
930.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2009

**Transaction ID:** SA11AI.17252

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Janice Perry

Mailing Address 28740 Alden

City State Zip Code  
Madison Heights MI 48071

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1030.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2009

**Transaction ID:** SA11AI.17263

Amount of Each Receipt this Period  
100.00

**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 52 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Janice Perry

Mailing Address 28740 Alden

City State Zip Code  
Madison Heights MI 48071

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1230.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2009

**Transaction ID:** SA11AI.17343

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)  
Janice Perry

Mailing Address 28740 Alden

City State Zip Code  
Madison Heights MI 48071

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1330.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2009

**Transaction ID:** SA11AI.17359

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Janice Perry

Mailing Address 28740 Alden

City State Zip Code  
Madison Heights MI 48071

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1430.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2009

**Transaction ID:** SA11AI.17364

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **400.00**

**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 53 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Marie Petrucci  
 Mailing Address 36548 Boyce  
 City State Zip Code  
 Clinton Township MI 48035  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 0 9  
**Transaction ID:** SA11AI.17275  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

**B.** Full Name (Last, First, Middle Initial)  
Patricia Pickell  
 Mailing Address 7870 Carpenter  
 City State Zip Code  
 Shelby Township MI 48317  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 4 / 2 0 0 9  
**Transaction ID:** SA11AI.16862  
 Amount of Each Receipt this Period  
 125.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

**C.** Full Name (Last, First, Middle Initial)  
Sherry Porter  
 Mailing Address 18427 Sunderland  
 City State Zip Code  
 Detroit MI 48219  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 9  
**Transaction ID:** SA11AI.16787  
 Amount of Each Receipt this Period  
 165.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 390.00  
**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 54 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Charlotte Prohm

Mailing Address 28371 Timothy

City State Zip Code  
Chesterfield MI 48047

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2009

**Transaction ID:** SA11AI.17211

Amount of Each Receipt this Period  
60.00

**B.** Full Name (Last, First, Middle Initial)  
Jessie Rankine

Mailing Address 37161 Clubhouse

City State Zip Code  
Sterling Heights MI 48312

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

Name of Employer None Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1525.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2009

**Transaction ID:** SA11AI.17234

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Jessie Rankine

Mailing Address 37161 Clubhouse

City State Zip Code  
Sterling Heights MI 48312

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

Name of Employer None Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1675.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

**Transaction ID:** SA11AI.16651

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **310.00**

**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 55 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Colleen Redmon  
Mailing Address 8435 Busko  
City Warren State MI Zip Code 48093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 05 / 10 / 2009  
Transaction ID: SA11AI.16743  
Amount of Each Receipt this Period 150.00

**B.** Full Name (Last, First, Middle Initial)  
Colleen Redmon  
Mailing Address 8435 Busko  
City Warren State MI Zip Code 48093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 05 / 10 / 2009  
Transaction ID: SA11AI.16746  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Leslie Resetar  
Mailing Address 16150 Clarkston  
City Fraser State MI Zip Code 48026  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1105.00  
Date of Receipt 05 / 02 / 2009  
Transaction ID: SA11AI.17219  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00  
**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 56 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Leslie Resetar

Mailing Address 16150 Clarkston

City State Zip Code  
Fraser MI 48026

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1205.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2009

**Transaction ID:** SA11AI.17268

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Debra Robinson

Mailing Address 19 Pilgrim

City State Zip Code  
Highland Park MI 48203

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16807

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Maria Robinson

Mailing Address 18101 Mound

City State Zip Code  
Detroit MI 48234

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16771

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **375.00**

**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 57 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Maria Robinson

Mailing Address 18101 Mound

City State Zip Code  
Detroit MI 48234

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.16776

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary Ann Rodriguez

Mailing Address 30267 Freda

City State Zip Code  
Warren MI 48093

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.16647

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary Ann Rodriguez

Mailing Address 30267 Freda

City State Zip Code  
Warren MI 48093

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.16658

Amount of Each Receipt this Period

100.00

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

275.00

**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 58 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Mary Ann Rodriguez  
Mailing Address 30267 Freda

City Warren State MI Zip Code 48093

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt: 05 / 03 / 2009  
**Transaction ID: SA11AI.16659**  
 Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
Mary Ann Rodriguez  
Mailing Address 30267 Freda

City Warren State MI Zip Code 48093

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt: 05 / 03 / 2009  
**Transaction ID: SA11AI.16660**  
 Amount of Each Receipt this Period: 150.00

**C.** Full Name (Last, First, Middle Initial)  
Mary Ann Rodriguez  
Mailing Address 30267 Freda

City Warren State MI Zip Code 48093

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 925.00

Date of Receipt: 05 / 03 / 2009  
**Transaction ID: SA11AI.16661**  
 Amount of Each Receipt this Period: 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 400.00

**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 59 / 159
	(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)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Ann Rodriguez		Date of Receipt
	Mailing Address 30267 Freda		<input type="text" value="05"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Warren	MI	48093
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.16673
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="150.00"/>
		<input type="text" value="1075.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary Ann Rodriguez		Date of Receipt
	Mailing Address 30267 Freda		<input type="text" value="05"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Warren	MI	48093
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.16792
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="165.00"/>
		<input type="text" value="1240.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeanne Rotary		Date of Receipt
	Mailing Address 1179 Avon Manor		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Rochester	MI	48309
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.17351
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="635.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="415.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Jeanne Rotary

Mailing Address 1179 Avon Manor

City State Zip Code  
Rochester MI 48309

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 695.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.17358

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)  
Bernadett Sawa

Mailing Address 1124 E. Hardwood

City State Zip Code  
Madison Heights MI 48071

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.16930

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)  
Bernadett Sawa

Mailing Address 1124 E. Hardwood

City State Zip Code  
Madison Heights MI 48071

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.16931

Amount of Each Receipt this Period

125.00

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

310.00

**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 61 / 159  
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Leah Shivers

Mailing Address 19421 Buffalo

City State Zip Code  
Detroit MI 48234

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1970.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2009

Transaction ID: SA11AI.16829

Amount of Each Receipt this Period  
175.00

**B.**

Full Name (Last, First, Middle Initial)  
Janeen Shock

Mailing Address 25925 Koontz

City State Zip Code  
Roseville MI 48066

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2009

Transaction ID: SA11AI.16757

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
Janeen Shock

Mailing Address 25925 Koontz

City State Zip Code  
Roseville MI 48066

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
685.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2009

Transaction ID: SA11AI.16791

Amount of Each Receipt this Period  
165.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **490.00**

**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 62 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)

Janeen Shock

Mailing Address 25925 Koontz

City State Zip Code  
Roseville MI 48066

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 875.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.16922

Amount of Each Receipt this Period

190.00

**B.**

Full Name (Last, First, Middle Initial)

Yvette Singleton

Mailing Address 17170 Dawn, Bldg. I

City State Zip Code  
Roseville MI 48066

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.16863

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

Kelly Sitto

Mailing Address 47733 Marigold

City State Zip Code  
Sterling Heights MI 48314

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.16873

Amount of Each Receipt this Period

275.00

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

590.00

**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 63 / 159

(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)

Doreen Skarjune

Mailing Address 2108 Common

City State Zip Code  
Warren MI 48092

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 321.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.17333

Amount of Each Receipt this Period

86.00

**B.**

Full Name (Last, First, Middle Initial)

Ima Smith

Mailing Address 20291 Chapel

City State Zip Code  
Detroit MI 48219

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

Name of Employer Occupation  
None Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 650.00

Date of Receipt

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

Transaction ID: SA11AI.16705

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Ima Smith

Mailing Address 20291 Chapel

City State Zip Code  
Detroit MI 48219

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

Name of Employer Occupation  
None Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt

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

Transaction ID: SA11AI.16724

Amount of Each Receipt this Period

100.00

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

336.00

**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 64 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Ima Smith  
Mailing Address 20291 Chapel  
City Detroit State MI Zip Code 48219  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 915.00  
Date of Receipt 05 / 17 / 2009  
Transaction ID: SA11AI.16786  
Amount of Each Receipt this Period 165.00

**B.** Full Name (Last, First, Middle Initial)  
Ima Smith  
Mailing Address 20291 Chapel  
City Detroit State MI Zip Code 48219  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1015.00  
Date of Receipt 05 / 17 / 2009  
Transaction ID: SA11AI.16811  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Sally Smith  
Mailing Address 200 Grand  
City Sterling Heights State MI Zip Code 48310  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.00  
Date of Receipt 05 / 02 / 2009  
Transaction ID: SA11AI.17208  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 365.00  
**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 65 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
William Sowerby  
 Mailing Address 37860 Saddle Lane  
 City State Zip Code  
 Clinton Township MI 48036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Clinton Township Treasurer  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 770.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 9  
**Transaction ID:** SA11AI.16614  
 Amount of Each Receipt this Period  
 770.00  
 Donation

**B.** Full Name (Last, First, Middle Initial)  
Sharon Springstead  
 Mailing Address 23645 Panama  
 City State Zip Code  
 Warren MI 48091  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 None Retired  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 550.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 3 / 2 0 0 9  
**Transaction ID:** SA11AI.16648  
 Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
Jeffery Sprys  
 Mailing Address 18249 Millstone  
 City State Zip Code  
 Macomb Townshp MI 48044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Attorney  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 320.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 4 / 2 0 0 9  
**Transaction ID:** SA11AI.16615  
 Amount of Each Receipt this Period  
 320.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1190.00**  
**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 66 / 159
	<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)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Marianne Stamm	Date of Receipt MM / DD / YYYY 05 / 30 / 2009
	Mailing Address 11723 15 Mile Road	<b>Transaction ID:</b> SA11AI.17348
	City State Zip Code Sterling Heights MI 48312	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Henry Stromske	Date of Receipt MM / DD / YYYY 05 / 17 / 2009
	Mailing Address 30256 Flanders	<b>Transaction ID:</b> SA11AI.16770
	City State Zip Code Warren MI 48088	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Charlotte Sudau	Date of Receipt MM / DD / YYYY 05 / 16 / 2009
	Mailing Address 56660 North Ave.	<b>Transaction ID:</b> SA11AI.17277
	City State Zip Code Macomb MI 48042	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>420.00</b>
<b>TOTAL</b> 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 67 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Deborah Tolomai, Deborah  
Mailing Address 28424 Palm Beach  
City Warren State MI Zip Code 48093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 05 / 03 / 2009  
Transaction ID: SA11AI.16689  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Vicki Tringal  
Mailing Address 408 Roundview  
City Rochester State MI Zip Code 48309  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 325.00  
Date of Receipt 05 / 10 / 2009  
Transaction ID: SA11AI.16742  
Amount of Each Receipt this Period 175.00

**C.** Full Name (Last, First, Middle Initial)  
Mary Tucker  
Mailing Address 4337 Frazho, #103  
City Warren State MI Zip Code 48091  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 325.00  
Date of Receipt 05 / 24 / 2009  
Transaction ID: SA11AI.16840  
Amount of Each Receipt this Period 175.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 600.00  
**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 68 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Jane Tylanda  
Mailing Address 2373 Andrus

City State Zip Code  
Detroit MI 48212

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** SA11AI.16938

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Deborah Varcak  
Mailing Address 36420 Samoa

City State Zip Code  
Sterling Heights MI 48312

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 535.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2009

**Transaction ID:** SA11AI.17285

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Melissa Viviano  
Mailing Address 29315 Fairfield

City State Zip Code  
Warren MI 48088

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1288.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2009

**Transaction ID:** SA11AI.17325

Amount of Each Receipt this Period  
100.00

**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 69 / 159  
(check only one)

<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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Lori Ann Waldowski

Mailing Address 8267 Doncaster

City State Zip Code  
Sterling Heights MI 48312

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2009

Transaction ID: SA11AI.17282

Amount of Each Receipt this Period  
60.00

**B.**

Full Name (Last, First, Middle Initial)  
Annetta Walker

Mailing Address 5018 Ashley

City State Zip Code  
Detroit MI 48236

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

Transaction ID: SA11AI.16926

Amount of Each Receipt this Period  
190.00

**C.**

Full Name (Last, First, Middle Initial)  
Eva White

Mailing Address 30654 Campbell

City State Zip Code  
Warren MI 48093

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

Transaction ID: SA11AI.16649

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **350.00**

**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 70 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Eva White  
Mailing Address 30654 Campbell  
City Warren State MI Zip Code 48093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1100.00  
Date of Receipt 05 / 03 / 2009  
Transaction ID: SA11AI.16674  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Eva White  
Mailing Address 30654 Campbell  
City Warren State MI Zip Code 48093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1275.00  
Date of Receipt 05 / 24 / 2009  
Transaction ID: SA11AI.16835  
Amount of Each Receipt this Period 175.00

**C.** Full Name (Last, First, Middle Initial)  
Eva White  
Mailing Address 30654 Campbell  
City Warren State MI Zip Code 48093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1450.00  
Date of Receipt 05 / 24 / 2009  
Transaction ID: SA11AI.16841  
Amount of Each Receipt this Period 175.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 450.00  
**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 71 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Eva White

Mailing Address 30654 Campbell

City Warren State MI Zip Code 48093

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1550.00

Date of Receipt: 05 / 24 / 2009  
**Transaction ID:** SA11AI.16854  
 Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
Johnnie White

Mailing Address 17330 Littlefield

City Detroit State MI Zip Code 48235

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 03 / 2009  
**Transaction ID:** SA11AI.16682  
 Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Johnnie White

Mailing Address 17330 Littlefield

City Detroit State MI Zip Code 48235

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 05 / 31 / 2009  
**Transaction ID:** SA11AI.16942  
 Amount of Each Receipt this Period: 100.00

**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 72 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Karen White  
 Mailing Address 960 E. Morehouse  
 City State Zip Code  
 Hazel Park MI 48030  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 9  
**Transaction ID:** SA11AI.16773  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Home Maker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

**B.** Full Name (Last, First, Middle Initial)  
Karen White  
 Mailing Address 960 E. Morehouse  
 City State Zip Code  
 Hazel Park MI 48030  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 9  
**Transaction ID:** SA11AI.16812  
 Amount of Each Receipt this Period  
 175.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Home Maker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

**C.** Full Name (Last, First, Middle Initial)  
Karen White  
 Mailing Address 960 E. Morehouse  
 City State Zip Code  
 Hazel Park MI 48030  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 9  
**Transaction ID:** SA11AI.16925  
 Amount of Each Receipt this Period  
 190.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Home Maker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 815.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 465.00  
**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 73 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
L. Williams

Mailing Address 8564 Hampshire

City State Zip Code  
Sterling Heights MI 48313

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16797

Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
Victoria Williams

Mailing Address 58484 Cottonwood

City State Zip Code  
Lenox MI 48048

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16813

Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Alice Wilson

Mailing Address 2696 Rhodes

City State Zip Code  
Troy MI 48083

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt MM / DD / YYYY  
05 / 17 / 2009

**Transaction ID:** SA11AI.16795

Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... 375.00

**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 74 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Alice Wilson  
 Mailing Address 2696 Rhodes  
 City State Zip Code  
Troy MI 48083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
None Retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 850.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 9  
**Transaction ID:** SA11AI.16899  
 Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Helen Wolf  
 Mailing Address 35637 Wellston  
 City State Zip Code  
Sterling Heights MI 48312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
None Retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 1 / 2 0 0 9  
**Transaction ID:** SA11AI.16885  
 Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
Chantra Wright  
 Mailing Address 11845 Ina  
 City State Zip Code  
Sterling Heights MI 48312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
None Retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 515.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 7 / 2 0 0 9  
**Transaction ID:** SA11AI.16778  
 Amount of Each Receipt this Period  
 165.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 365.00  
**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 75 / 159  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Jodi Yeager  
Mailing Address 5753 Southlawn  
City Sterling Heights State MI Zip Code 48310  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 745.00  
Date of Receipt 05 / 17 / 2009  
Transaction ID: SA11AI.16814  
Amount of Each Receipt this Period 75.00

**B.** Full Name (Last, First, Middle Initial)  
Jodi Yeager  
Mailing Address 5753 Southlawn  
City Sterling Heights State MI Zip Code 48310  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 935.00  
Date of Receipt 05 / 31 / 2009  
Transaction ID: SA11AI.16919  
Amount of Each Receipt this Period 190.00

**C.** Full Name (Last, First, Middle Initial)  
Jodi Yeager  
Mailing Address 5753 Southlawn  
City Sterling Heights State MI Zip Code 48310  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1105.00  
Date of Receipt 05 / 31 / 2009  
Transaction ID: SA11AI.16945  
Amount of Each Receipt this Period 170.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 435.00  
**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 76 / 159  
(check only one)

<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
							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)  
Philip A. Hart Democratic Club

**A.**

Full Name (Last, First, Middle Initial)  
Jodi Yeager

Mailing Address 5753 Southlawn

City State Zip Code  
Sterling Heights MI 48310

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1280.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

Transaction ID: SA11AI.16946

Amount of Each Receipt this Period  
175.00

**B.**

Full Name (Last, First, Middle Initial)  
Amira Zomo

Mailing Address 7375 Drake

City State Zip Code  
West Bloomfield MI 48322

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2009

Transaction ID: SA11AI.16655

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>325.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>27912.00</b>

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

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

FOR LINE NUMBER: PAGE 77 / 159  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

**A.** Full Name (Last, First, Middle Initial)  
Auto-Owners Insurance  
Mailing Address P.O. Box 30315

City State Zip Code  
Lansing MI 48909

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
203.80

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 4 / 2 0 0 9

Transaction ID: SA15.16618

Amount of Each Receipt this Period  
203.80

Refund of Premium

**B.** Full Name (Last, First, Middle Initial)  
Auto-Owners Insurance  
Mailing Address P.O. Box 30315

City State Zip Code  
Lansing MI 48909

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
477.80

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 5 / 2 0 0 9

Transaction ID: SA15.16621

Amount of Each Receipt this Period  
274.00

Refund of Premium

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	477.80
<b>TOTAL</b> This Period (last page this line number only) .....	▶	477.80

# 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Advance Novelty</p> <p>Mailing Address 29199 W. Six Mile</p> <p>City Livonia State MI Zip Code 48152</p> <p>Purpose of Disbursement Bingo Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17186</p> <p>Date of Disbursement 05 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 1672.80</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Advance Novelty</p> <p>Mailing Address 29199 W. Six Mile</p> <p>City Livonia State MI Zip Code 48152</p> <p>Purpose of Disbursement Bingo Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16629</p> <p>Date of Disbursement 05 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 3384.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Advance Novelty</p> <p>Mailing Address 29199 W. Six Mile</p> <p>City Livonia State MI Zip Code 48152</p> <p>Purpose of Disbursement Bingo Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17187</p> <p>Date of Disbursement 05 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 4358.50</p>

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

9415.83

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Advance Novelty	Transaction ID: SB21B.17188
	Mailing Address 29199 W. Six Mile	Date of Disbursement 05 / 27 / 2009
	City Livonia State MI Zip Code 48152	Amount of Each Disbursement this Period 863.37
	Purpose of Disbursement Bingo Supplies	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Al Allen	Transaction ID: SB21B.17017
	Mailing Address 26638 Curie	Date of Disbursement 05 / 10 / 2009
	City Warren State MI Zip Code 48091	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Emmanuel Alojipan	Transaction ID: SB21B.16984
	Mailing Address 29074 Edward	Date of Disbursement 05 / 03 / 2009
	City Madison Heights State MI Zip Code 48071	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1088.37
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b> Full Name (Last, First, Middle Initial) Issac Anderson <hr/> Mailing Address 11920 Lakepointe <hr/> City Detroit State MI Zip Code 48221 <hr/> Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17150 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 75.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Issac Anderson <hr/> Mailing Address 11920 Lakepointe <hr/> City Detroit State MI Zip Code 48221 <hr/> Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17147 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 125.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Millie Anderson <hr/> Mailing Address 11955 Buffalo <hr/> City Hamtramck State MI Zip Code 48212 <hr/> Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17135 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 150.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	350.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Jennifer Aniel	Transaction ID: SB21B.17378 Date of Disbursement 05 / 02 / 2009
	Mailing Address 33067 Fraser Ave	Amount of Each Disbursement this Period 150.00
	City Fraser State MI Zip Code 48026	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT & T	Transaction ID: SB21B.16613 Date of Disbursement 05 / 21 / 2009
	Mailing Address 26877 Northwestern	Amount of Each Disbursement this Period 402.20
	City Southfield State MI Zip Code 48034	
	Purpose of Disbursement Telephone Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rebecca Ballard	Transaction ID: SB21B.17163 Date of Disbursement 05 / 31 / 2009
	Mailing Address 320 W. Hudson	Amount of Each Disbursement this Period 150.00
	City Madison Heights State MI Zip Code 48071	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	702.20
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Rose Banas	Transaction ID: SB21B.17059
	Mailing Address 34158 Tudor Court	Date of Disbursement MM / DD / YYYY 05 / 17 / 2009
	City Sterling Heights State MI Zip Code 48312	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) Rose Banas	Transaction ID: SB21B.17156
	Mailing Address 34158 Tudor Court	Date of Disbursement MM / DD / YYYY 05 / 31 / 2009
	City Sterling Heights State MI Zip Code 48312	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Bayside Bingo Supplies	Transaction ID: SB21B.16632
	Mailing Address 34280 Aspen Park	Date of Disbursement MM / DD / YYYY 05 / 07 / 2009
	City Chesterfield State MI Zip Code 48047	Amount of Each Disbursement this Period 2039.80
	Purpose of Disbursement Bingo Supplies	Category/ Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2339.80
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bayside Bingo Supplies</p> <p>Mailing Address 34280 Aspen Park</p> <p>City Chesterfield State MI Zip Code 48047</p> <p>Purpose of Disbursement Bingo Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16633</p> <p>Date of Disbursement 05 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 3260.86</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bayside Bingo Supplies</p> <p>Mailing Address 34280 Aspen Park</p> <p>City Chesterfield State MI Zip Code 48047</p> <p>Purpose of Disbursement Bingo Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17189</p> <p>Date of Disbursement 05 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 1107.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tina Bazinet</p> <p>Mailing Address 11507 Republic</p> <p>City Warren State MI Zip Code 48089</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17007</p> <p>Date of Disbursement 05 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p>

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

4417.86

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Donna Brockway	Transaction ID: SB21B.17008 Date of Disbursement
	Mailing Address 26851 Merideth	<input type="text" value="05"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Warren State MI Zip Code 48091	Amount of Each Disbursement this Period
	Purpose of Disbursement Bingo Prize	<input type="text" value="50.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Donna Brockway	Transaction ID: SB21B.17009 Date of Disbursement
	Mailing Address 26851 Merideth	<input type="text" value="05"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Warren State MI Zip Code 48091	Amount of Each Disbursement this Period
	Purpose of Disbursement Bingo Prize	<input type="text" value="75.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Donna Brockway	Transaction ID: SB21B.17031 Date of Disbursement
	Mailing Address 26851 Merideth	<input type="text" value="05"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Warren State MI Zip Code 48091	Amount of Each Disbursement this Period
	Purpose of Disbursement Bingo Prize	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1125.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Donna Brockway	Transaction ID: SB21B.17108
	Mailing Address 26851 Merideth	Date of Disbursement MM / DD / YYYY 05 / 24 / 2009
	City Warren State MI Zip Code 48091	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Donna Brockway	Transaction ID: SB21B.17155
	Mailing Address 26851 Merideth	Date of Disbursement MM / DD / YYYY 05 / 31 / 2009
	City Warren State MI Zip Code 48091	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Katrina Brodeur	Transaction ID: SB21B.17403
	Mailing Address 16912 Stewart	Date of Disbursement MM / DD / YYYY 05 / 09 / 2009
	City Clinton Twp State MI Zip Code 48038	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	350.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Evelyn Burak	Transaction ID: SB21B.17149
	Mailing Address 32739 Greenbriar	Date of Disbursement MM / DD / YYYY 05 / 31 / 2009
	City Warren State MI Zip Code 48092	Amount of Each Disbursement this Period 125.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) Evelyn Burak	Transaction ID: SB21B.17175
	Mailing Address 32739 Greenbriar	Date of Disbursement MM / DD / YYYY 05 / 31 / 2009
	City Warren State MI Zip Code 48092	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Ruth Butucel	Transaction ID: SB21B.17474
	Mailing Address 44518 N. Bunker Hill	Date of Disbursement MM / DD / YYYY 05 / 30 / 2009
	City Clinton Township State MI Zip Code 48038	Amount of Each Disbursement this Period 125.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	325.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Frank Caballero	Transaction ID: SB21B.17478 Date of Disbursement 05 / 30 / 2009
	Mailing Address 35834 Monaco Dr	Amount of Each Disbursement this Period 150.00
	City Sterling Heights State MI Zip Code 48312	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Juana Caballero	Transaction ID: SB21B.17464 Date of Disbursement 05 / 30 / 2009
	Mailing Address 35834 Monaco	Amount of Each Disbursement this Period 150.00
	City Sterling Heights State MI Zip Code 48312	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Juana Caballero	Transaction ID: SB21B.17484 Date of Disbursement 05 / 30 / 2009
	Mailing Address 35834 Monaco	Amount of Each Disbursement this Period 50.00
	City Sterling Heights State MI Zip Code 48312	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	350.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Emily Cardin</p> <p>Mailing Address 48860 Park</p> <p>City Shelby Twp State MI Zip Code 48315</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17366</p> <p>Date of Disbursement 05 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Emily Cardin</p> <p>Mailing Address 48860 Park</p> <p>City Shelby Twp State MI Zip Code 48315</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17470</p> <p>Date of Disbursement 05 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Elizabeth Carmack</p> <p>Mailing Address 7558 State Park</p> <p>City Center Line State MI Zip Code 48015</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17173</p> <p>Date of Disbursement 05 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p>

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

**300.00**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Elizabeth Carmack  Mailing Address 7558 State Park  City Center Line State MI Zip Code 48015  Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17174 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 9  Amount of Each Disbursement this Period 150.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Jennifer Carter  Mailing Address 19405 Concord  City Detroit State MI Zip Code 48234  Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17091 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Josephine Catlin  Mailing Address 18896 Highlite  City Clinton Township State MI Zip Code 48035  Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17452 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 9  Amount of Each Disbursement this Period 150.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> 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)

PAGE 90 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Josephine Catlin	Transaction ID: SB21B.17483 Date of Disbursement 05 / 30 / 2009
	Mailing Address 18896 Highlite	Amount of Each Disbursement this Period 175.00
	City Clinton Township State MI Zip Code 48035	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael Cicchini	Transaction ID: SB21B.17412 Date of Disbursement 05 / 16 / 2009
	Mailing Address 18452 Old Coach Tr	Amount of Each Disbursement this Period 50.00
	City Clinton Twp State MI Zip Code 48038	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Cicchini	Transaction ID: SB21B.17432 Date of Disbursement 05 / 16 / 2009
	Mailing Address 18452 Old Coach Tr	Amount of Each Disbursement this Period 75.00
	City Clinton Twp State MI Zip Code 48038	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	300.00
<b>TOTAL</b> 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)

PAGE 91 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Pauline Ciesielski	Transaction ID: SB21B.17010 Date of Disbursement 05 / 10 / 2009
	Mailing Address 9135 Greenboro	
	City Detroit State MI Zip Code 48224	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Pauline Ciesielski	Transaction ID: SB21B.17014 Date of Disbursement 05 / 10 / 2009
	Mailing Address 9135 Greenboro	
	City Detroit State MI Zip Code 48224	Amount of Each Disbursement this Period 125.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Pauline Ciesielski	Transaction ID: SB21B.17047 Date of Disbursement 05 / 17 / 2009
	Mailing Address 9135 Greenboro	
	City Detroit State MI Zip Code 48224	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	375.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Pauline Ciesielski</p> <p>Mailing Address 9135 Greenboro</p> <p>City Detroit State MI Zip Code 48224</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17073</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Pauline Ciesielski</p> <p>Mailing Address 9135 Greenboro</p> <p>City Detroit State MI Zip Code 48224</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17098</p> <p>Date of Disbursement 05 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Pauline Ciesielski</p> <p>Mailing Address 9135 Greenboro</p> <p>City Detroit State MI Zip Code 48224</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17106</p> <p>Date of Disbursement 05 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	450.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Pauline Ciesielski	Transaction ID: SB21B.17112
	Mailing Address 9135 Greenboro	Date of Disbursement 05 / 24 / 2009
	City Detroit State MI Zip Code 48224	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Pauline Ciesielski	Transaction ID: SB21B.17114
	Mailing Address 9135 Greenboro	Date of Disbursement 05 / 24 / 2009
	City Detroit State MI Zip Code 48224	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Pauline Ciesielski	Transaction ID: SB21B.17121
	Mailing Address 9135 Greenboro	Date of Disbursement 05 / 24 / 2009
	City Detroit State MI Zip Code 48224	Amount of Each Disbursement this Period 77.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **177.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 94 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Pauline Ciesielski	Transaction ID: SB21B.17143 Date of Disbursement 05 / 31 / 2009
	Mailing Address 9135 Greenboro	
	City Detroit State MI Zip Code 48224	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Pauline Ciesielski	Transaction ID: SB21B.17153 Date of Disbursement 05 / 31 / 2009
	Mailing Address 9135 Greenboro	
	City Detroit State MI Zip Code 48224	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Diana Cloninger	Transaction ID: SB21B.17180 Date of Disbursement 05 / 31 / 2009
	Mailing Address 1768 E. Milton	
	City Hazel Park State MI Zip Code 48030	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	275.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Bernice Coleman	Transaction ID: SB21B.17037
	Mailing Address 19643 Buffalo	Date of Disbursement MM / DD / YYYY 05 / 17 / 2009
	City Detroit State MI Zip Code 48234	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bernice Coleman	Transaction ID: SB21B.17044
	Mailing Address 19643 Buffalo	Date of Disbursement MM / DD / YYYY 05 / 17 / 2009
	City Detroit State MI Zip Code 48234	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bernice Coleman	Transaction ID: SB21B.17184
	Mailing Address 19643 Buffalo	Date of Disbursement MM / DD / YYYY 05 / 31 / 2009
	City Detroit State MI Zip Code 48234	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1125.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Vickie Coleman	Transaction ID: SB21B.17400
	Mailing Address 50670 Callens	Date of Disbursement MM / DD / YYYY 05 / 09 / 2009
	City Chesterfield State MI Zip Code 48047	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) Vickie Coleman	Transaction ID: SB21B.17445
	Mailing Address 50670 Callens	Date of Disbursement MM / DD / YYYY 05 / 23 / 2009
	City Chesterfield State MI Zip Code 48047	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Lou Anne Comaianni	Transaction ID: SB21B.17404
	Mailing Address 4087 Riverview	Date of Disbursement MM / DD / YYYY 05 / 09 / 2009
	City Mt. Clemens State MI Zip Code 48043	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)  
Community Central Bank

Transaction ID: SB21B.16610  
Date of Disbursement

Mailing Address 100 North Main Street

/   /

City State Zip Code  
Mount Clemens MI 48043

Amount of Each Disbursement this Period

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Donna Dawe

Transaction ID: SB21B.17178  
Date of Disbursement

Mailing Address 1146 E. Maxlow

/   /

City State Zip Code  
Hazel Park MI 48030

Amount of Each Disbursement this Period

Purpose of Disbursement

Bingo Prize

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Maggie DiBart

Transaction ID: SB21B.16970  
Date of Disbursement

Mailing Address 24508 Victory

/   /

City State Zip Code  
Center Line MI 48015

Amount of Each Disbursement this Period

Purpose of Disbursement

Bingo Prize

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Janine Dodge</p> <p>Mailing Address 20512 Dubois</p> <p>City Clinton Township State MI Zip Code 48035</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17457</p> <p>Date of Disbursement 05 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Marianne Dykgraaf*</p> <p>Mailing Address 24864 Antoinette</p> <p>City Warren State MI Zip Code 48089</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16969</p> <p>Date of Disbursement 05 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Marianne Dykgraaf*</p> <p>Mailing Address 24864 Antoinette</p> <p>City Warren State MI Zip Code 48089</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17043</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>450.00</b>
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Marianne Dykgraaf*	Transaction ID: SB21B.17118
	Mailing Address 24864 Antoinette	Date of Disbursement MM / DD / YYYY 05 / 24 / 2009
	City Warren State MI Zip Code 48089	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Earthlink	Transaction ID: SB21B.16605
	Mailing Address PO Box 7645	Date of Disbursement MM / DD / YYYY 05 / 04 / 2009
	City Atlanta State GA Zip Code 30357	Amount of Each Disbursement this Period 89.95
	Purpose of Disbursement Internet Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Toni Ector	Transaction ID: SB21B.17090
	Mailing Address 21301 Sloan, #202	Date of Disbursement MM / DD / YYYY 05 / 24 / 2009
	City Harper Woods State MI Zip Code 48225	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>689.95</b>
<b>TOTAL</b> 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)

PAGE 100 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b> Full Name (Last, First, Middle Initial) Shirley Epps</p> <p>Mailing Address 20451 Greenley</p> <p>City Detroit State MI Zip Code 48231</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16988 <b>Date of Disbursement</b> 05 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Euclid Company</p> <p>Mailing Address 310 Euclid</p> <p>City Mt Clemens State MI Zip Code 48043</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16604 <b>Date of Disbursement</b> 05 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Linda Foran</p> <p>Mailing Address 1793 Lakewood Drive</p> <p>City Troy State MI Zip Code 48083</p> <p>Purpose of Disbursement Progressive Jackpot Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16636 <b>Date of Disbursement</b> 05 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 2126.66</p>

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

2776.66

**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)

PAGE 101 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b> Full Name (Last, First, Middle Initial) Marcelle Foreman</p> <p>Mailing Address 20125 Hanna</p> <p>City Detroit State MI Zip Code 48203</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16989</p> <p>Date of Disbursement 05 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Yvette Francis</p> <p>Mailing Address 17170 Dawn</p> <p>City Roseville State MI Zip Code 48066</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17146</p> <p>Date of Disbursement 05 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 60.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Yvette Francis</p> <p>Mailing Address 17170 Dawn</p> <p>City Roseville State MI Zip Code 48066</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17154</p> <p>Date of Disbursement 05 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>

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

1210.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 102 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Yvette Francis	Transaction ID: SB21B.17171 Date of Disbursement 05 / 31 / 2009
	Mailing Address 17170 Dawn	Amount of Each Disbursement this Period 150.00
	City Roseville State MI Zip Code 48066	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Debbie Gansior	Transaction ID: SB21B.17460 Date of Disbursement 05 / 30 / 2009
	Mailing Address 28917 James	Amount of Each Disbursement this Period 75.00
	City Warren State MI Zip Code 48092	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Joan Glowacki	Transaction ID: SB21B.17373 Date of Disbursement 05 / 02 / 2009
	Mailing Address 13242 Hartwell	Amount of Each Disbursement this Period 150.00
	City Warren State MI Zip Code 48089	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

375.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 103 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Joan Glowacki  Mailing Address 13242 Hartwell  City Warren State MI Zip Code 48089  Purpose of Disbursement Bingo Prize  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17462 Date of Disbursement 05 / 30 / 2009  Amount of Each Disbursement this Period 75.00
B.	Full Name (Last, First, Middle Initial) Kathie Hamann  Mailing Address 30241 Newport  City Warren State MI Zip Code 48088  Purpose of Disbursement Bingo Prize  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17152 Date of Disbursement 05 / 31 / 2009  Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Angela Harris  Mailing Address 6142 Norwalk  City Detroit State MI Zip Code 48211  Purpose of Disbursement Bingo Prize  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.16957 Date of Disbursement 05 / 03 / 2009  Amount of Each Disbursement this Period 75.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	650.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Angela Harris <hr/> Mailing Address 6142 Norwalk <hr/> City Detroit State MI Zip Code 48211 <hr/> Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.16981 Date of Disbursement 05 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 50.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Angela Harris <hr/> Mailing Address 6142 Norwalk <hr/> City Detroit State MI Zip Code 48211 <hr/> Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.16986 Date of Disbursement 05 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 150.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Brenda Henderson <hr/> Mailing Address 11107 Paige <hr/> City Warren State MI Zip Code 48089 <hr/> Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.16978 Date of Disbursement 05 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 100.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Brenda Henderson Mailing Address 11107 Paige City Warren State MI Zip Code 48089 Purpose of Disbursement Bingo Prize Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.16979 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 9	Amount of Each Disbursement this Period 100.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Sherrie Henderson Mailing Address 11107 Paige City Warren State MI Zip Code 48092 Purpose of Disbursement Bingo Prize Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.16965 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 9	Amount of Each Disbursement this Period 150.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Sherrie Henderson Mailing Address 11107 Paige City Warren State MI Zip Code 48092 Purpose of Disbursement Bingo Prize Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.16983 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 9	Amount of Each Disbursement this Period 150.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	400.00
<b>TOTAL</b> 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)

PAGE 106 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)  
Sherrie Henderson

Transaction ID: SB21B.17075  
Date of Disbursement

Mailing Address 11107 Paige

/   /

City Warren State MI Zip Code 48092

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bingo Prize

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Becky Hermanson

Transaction ID: SB21B.16992  
Date of Disbursement

Mailing Address 35329 Lana Lane

/   /

City Sterling Heights State MI Zip Code 48312

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bingo Prize

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Becky Hermanson

Transaction ID: SB21B.17409  
Date of Disbursement

Mailing Address 35329 Lana Lane

/   /

City Sterling Heights State MI Zip Code 48312

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bingo Prize

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**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)

PAGE 107 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Yvonne Hollins  Mailing Address 12031 Cloom  City Hamtramck State MI Zip Code 48212  Purpose of Disbursement Bingo Prize  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17015 Date of Disbursement 05 / 10 / 2009  Amount of Each Disbursement this Period 125.00  Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffrey Johannes  Mailing Address 17323 Kingsbrooke Cr.  City Clinton Twp State MI Zip Code 48038  Purpose of Disbursement Bingo Prize  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17453 Date of Disbursement 05 / 23 / 2009  Amount of Each Disbursement this Period 150.00  Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Denise Jones  Mailing Address 46731 Flanders  City Detroit State MI Zip Code 48203  Purpose of Disbursement Bingo Prize  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17471 Date of Disbursement 05 / 30 / 2009  Amount of Each Disbursement this Period 500.00  Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	775.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b> Full Name (Last, First, Middle Initial) Rosemary Kern</p> <p>Mailing Address 22257 Curie</p> <p>City Warren State MI Zip Code 48091</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17086</p> <p>Date of Disbursement 05 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Amy Kilbourn</p> <p>Mailing Address 3890 Woodman</p> <p>City Troy State MI Zip Code 48084</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17056</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Amy Kilbourn</p> <p>Mailing Address 3890 Woodman</p> <p>City Troy State MI Zip Code 48084</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17058</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	400.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Amy Kilbourn  Mailing Address 3890 Woodman  City Troy State MI Zip Code 48084  Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17157 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 9  Amount of Each Disbursement this Period 150.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Jean Kinney  Mailing Address 26600 Ponchartrain  City Harrison Township State MI Zip Code 48045  Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17418 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 9  Amount of Each Disbursement this Period 50.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Jean Kinney  Mailing Address 26600 Ponchartrain  City Harrison Township State MI Zip Code 48045  Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17451 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 9  Amount of Each Disbursement this Period 150.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	350.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Jean Kinney	Transaction ID: SB21B.17479
	Mailing Address 26600 Ponchartrain	Date of Disbursement 05 / 30 / 2009
	City Harrison Township State MI Zip Code 48045	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kristen Klein	Transaction ID: SB21B.17396
	Mailing Address 4925 Bromwell Ct.	Date of Disbursement 05 / 09 / 2009
	City Sterling Heights State MI Zip Code 48310	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Judy Knaggs	Transaction ID: SB21B.17013
	Mailing Address 26281 Grobbel	Date of Disbursement 05 / 10 / 2009
	City Warren State MI Zip Code 48091	Amount of Each Disbursement this Period 60.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1260.00
<b>TOTAL</b> 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)

PAGE 111 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Jennifer Kolleth	Transaction ID: SB21B.17089
	Mailing Address 8465 Meadow	Date of Disbursement 05 / 24 / 2009
	City Warren State MI Zip Code 48089	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jennifer Kolleth	Transaction ID: SB21B.17097
	Mailing Address 8465 Meadow	Date of Disbursement 05 / 24 / 2009
	City Warren State MI Zip Code 48089	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jennifer Kolleth	Transaction ID: SB21B.17104
	Mailing Address 8465 Meadow	Date of Disbursement 05 / 24 / 2009
	City Warren State MI Zip Code 48089	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	450.00
<b>TOTAL</b> 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)

PAGE 112 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Joanne Kortas	Transaction ID: SB21B.17401
	Mailing Address 18220 Buchanan	Date of Disbursement MM / DD / YYYY 05 / 09 / 2009
	City Roseville State MI Zip Code 48066	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Joanne Kortas	Transaction ID: SB21B.17463
	Mailing Address 18220 Buchanan	Date of Disbursement MM / DD / YYYY 05 / 30 / 2009
	City Roseville State MI Zip Code 48066	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kirk Leader	Transaction ID: SB21B.16607
	Mailing Address 31046 Leota	Date of Disbursement MM / DD / YYYY 05 / 14 / 2009
	City Fraser State MI Zip Code 48026	Amount of Each Disbursement this Period 706.69
	Purpose of Disbursement Salary	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	931.69
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Kirk Leader	Transaction ID: SB21B.16609
	Mailing Address 31046 Leota	Date of Disbursement 05 / 28 / 2009
	City Fraser State MI Zip Code 48026	Amount of Each Disbursement this Period 706.69
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Monica Lee	Transaction ID: SB21B.17130
	Mailing Address 7020 Dodge	Date of Disbursement 05 / 31 / 2009
	City Warren State MI Zip Code 48091	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Bingo Prize Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Sharon Lloyd	Transaction ID: SB21B.17370
	Mailing Address 202 N. River Ct.	Date of Disbursement 05 / 02 / 2009
	City Mt. Clemens State MI Zip Code 48043	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Bingo Prize Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2706.69
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Sharon Lloyd  Mailing Address 202 N. River Ct.  City Mt. Clemens State MI Zip Code 48043 Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17377 Date of Disbursement 05 / 02 / 2009  Amount of Each Disbursement this Period 50.00  Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Jerry Long  Mailing Address 8309 Maxwell  City Warren State MI Zip Code 48089 Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17023 Date of Disbursement 05 / 10 / 2009  Amount of Each Disbursement this Period 334.00  Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Annette Lorelli  Mailing Address 1231 Fuller  City Pontiac State MI Zip Code 48340 Purpose of Disbursement Progressive Jackpot Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.16630 Date of Disbursement 05 / 31 / 2009  Amount of Each Disbursement this Period 2126.66  Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2510.66
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b> Full Name (Last, First, Middle Initial) Nahren Lucian <hr/> Mailing Address 36416 Bagdad <hr/> City Sterling Heights State MI Zip Code 48312 Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17375 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Nahren Lucian <hr/> Mailing Address 36416 Bagdad <hr/> City Sterling Heights State MI Zip Code 48312 Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17433 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 150.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Marcella Mack <hr/> Mailing Address 11435 Dodge <hr/> City Warren State MI Zip Code 48089 Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17425 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1200.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b>	Full Name (Last, First, Middle Initial) Donna Maddox  Mailing Address 1935 Javis  City Warren State MI Zip Code 48091  Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17006 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 9  Amount of Each Disbursement this Period 150.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Donna Maddox  Mailing Address 1935 Javis  City Warren State MI Zip Code 48091  Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17011 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 9  Amount of Each Disbursement this Period 50.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Kaarina Maul  Mailing Address 2304 Orhcard Crest  City Utica State MI Zip Code 48317  Purpose of Disbursement Bingo Prize Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.16964 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 9  Amount of Each Disbursement this Period 150.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Kaarina Maul	Transaction ID: SB21B.16966
	Mailing Address 2304 Orhcard Crest	Date of Disbursement MM / DD / YYYY 05 / 03 / 2009
	City Utica State MI Zip Code 48317	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) Kaarina Maul	Transaction ID: SB21B.16972
	Mailing Address 2304 Orhcard Crest	Date of Disbursement MM / DD / YYYY 05 / 03 / 2009
	City Utica State MI Zip Code 48317	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Kaarina Maul	Transaction ID: SB21B.16976
	Mailing Address 2304 Orhcard Crest	Date of Disbursement MM / DD / YYYY 05 / 03 / 2009
	City Utica State MI Zip Code 48317	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	400.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Kaarina Maul	Transaction ID: SB21B.16998
	Mailing Address 2304 Orhcard Crest	Date of Disbursement 05 / 10 / 2009
	City Utica State MI Zip Code 48317	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kaarina Maul	Transaction ID: SB21B.17122
	Mailing Address 2304 Orhcard Crest	Date of Disbursement 05 / 24 / 2009
	City Utica State MI Zip Code 48317	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) J.O. Mauradian	Transaction ID: SB21B.17071
	Mailing Address 32278 Ryan	Date of Disbursement 05 / 17 / 2009
	City Warren State MI Zip Code 48092	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>300.00</b>
<b>TOTAL</b> 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)

PAGE 119 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) MDP (nfa)	Transaction ID: SB21B.17192
	Mailing Address 606 Townsend	Date of Disbursement MM / DD / YYYY 05 / 02 / 2009
	City Lansing State MI Zip Code 48084	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Bingo Hall Rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MDP (nfa)	Transaction ID: SB21B.16638
	Mailing Address 606 Townsend	Date of Disbursement MM / DD / YYYY 05 / 03 / 2009
	City Lansing State MI Zip Code 48084	Amount of Each Disbursement this Period 585.00
	Purpose of Disbursement Bingo Hall Rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MDP (nfa)	Transaction ID: SB21B.17193
	Mailing Address 606 Townsend	Date of Disbursement MM / DD / YYYY 05 / 09 / 2009
	City Lansing State MI Zip Code 48084	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Bingo Hall Rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1785.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) MDP (nfa)</p> <p>Mailing Address 606 Townsend</p> <p>City Lansing State MI Zip Code 48084</p> <p>Purpose of Disbursement Bingo Hall Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16639</p> <p>Date of Disbursement 05 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 585.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) MDP (nfa)</p> <p>Mailing Address 606 Townsend</p> <p>City Lansing State MI Zip Code 48084</p> <p>Purpose of Disbursement Bingo Hall Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17194</p> <p>Date of Disbursement 05 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) MDP (nfa)</p> <p>Mailing Address 606 Townsend</p> <p>City Lansing State MI Zip Code 48084</p> <p>Purpose of Disbursement Bingo Hall Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16640</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 585.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1770.00
<b>TOTAL</b> 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)

PAGE 121 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) MDP (nfa)	Transaction ID: SB21B.17195
	Mailing Address 606 Townsend	Date of Disbursement MM / DD / YYYY 05 / 23 / 2009
	City Lansing State MI Zip Code 48084	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Bingo Hall Rental	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) MDP (nfa)	Transaction ID: SB21B.16641
	Mailing Address 606 Townsend	Date of Disbursement MM / DD / YYYY 05 / 24 / 2009
	City Lansing State MI Zip Code 48084	Amount of Each Disbursement this Period 585.00
	Purpose of Disbursement Bingo Hall Rental	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) MDP (nfa)	Transaction ID: SB21B.17196
	Mailing Address 606 Townsend	Date of Disbursement MM / DD / YYYY 05 / 30 / 2009
	City Lansing State MI Zip Code 48084	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Bingo Hall Rental	Category/ Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1785.00
<b>TOTAL</b> 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)

PAGE 122 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) MDP (nfa)	Transaction ID: SB21B.16642
	Mailing Address 606 Townsend	Date of Disbursement MM / DD / YYYY 05 / 31 / 2009
	City Lansing State MI Zip Code 48084	Amount of Each Disbursement this Period 585.00
	Purpose of Disbursement Bingo Hall Rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michigan Bingo Bugle	Transaction ID: SB21B.16634
	Mailing Address 2604 Pohens Ave., NW	Date of Disbursement MM / DD / YYYY 05 / 26 / 2009
	City Grand Rapids State MI Zip Code 49544	Amount of Each Disbursement this Period 40.00
	Purpose of Disbursement Bingo Advertising	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michigan Bingo Bugle	Transaction ID: SB21B.17190
	Mailing Address 2604 Pohens Ave., NW	Date of Disbursement MM / DD / YYYY 05 / 26 / 2009
	City Grand Rapids State MI Zip Code 49544	Amount of Each Disbursement this Period 40.00
	Purpose of Disbursement Bingo Advertising	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	665.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Lisa Mickens	Transaction ID: SB21B.17133
	Mailing Address 23721 Kelly, #6	Date of Disbursement MM / DD / YYYY 05 / 31 / 2009
	City Eastpointe State MI Zip Code 48021	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Muniv Mikha	Transaction ID: SB21B.17384
	Mailing Address 27347 Liberty	Date of Disbursement MM / DD / YYYY 05 / 02 / 2009
	City Warren State MI Zip Code 48092	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Muniv Mikha	Transaction ID: SB21B.17386
	Mailing Address 27347 Liberty	Date of Disbursement MM / DD / YYYY 05 / 02 / 2009
	City Warren State MI Zip Code 48092	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	275.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Muniv Mikha	Transaction ID: SB21B.17020
	Mailing Address 27347 Liberty	Date of Disbursement MM / DD / YYYY 05 / 10 / 2009
	City Warren State MI Zip Code 48092	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Muniv Mikha	Transaction ID: SB21B.17072
	Mailing Address 27347 Liberty	Date of Disbursement MM / DD / YYYY 05 / 17 / 2009
	City Warren State MI Zip Code 48092	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Marilyn Miller	Transaction ID: SB21B.16999
	Mailing Address 17326 Mark Twain	Date of Disbursement MM / DD / YYYY 05 / 10 / 2009
	City Detroit State MI Zip Code 48235	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	275.00
<b>TOTAL</b> 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)

PAGE 125 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Catherine Morenski	Transaction ID: SB21B.17465
	Mailing Address 35903 Vaughn	Date of Disbursement MM / DD / YYYY 05 / 30 / 2009
	City Clinton Township State MI Zip Code 48035	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) Catherine Morenski	Transaction ID: SB21B.17476
	Mailing Address 35903 Vaughn	Date of Disbursement MM / DD / YYYY 05 / 30 / 2009
	City Clinton Township State MI Zip Code 48035	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Elfriede Mottin	Transaction ID: SB21B.17434
	Mailing Address 49416 Richmond Court	Date of Disbursement MM / DD / YYYY 05 / 23 / 2009
	City Shelby Township State MI Zip Code 48315	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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) ..... ▶

300.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)  
National Security Patrol

Transaction ID: SB21B.16644  
Date of Disbursement

Mailing Address 27950 Jefferson

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	9

City State Zip Code  
St. Clair Shores MI 48081

Amount of Each Disbursement this Period

Purpose of Disbursement  
Security Guard

--

250.00
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
National Security Patrol

Transaction ID: SB21B.17197  
Date of Disbursement

Mailing Address 27950 Jefferson

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	9

City State Zip Code  
St. Clair Shores MI 48081

Amount of Each Disbursement this Period

Purpose of Disbursement  
Security Guard Service

--

250.00
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Sarah Nazione

Transaction ID: SB21B.17441  
Date of Disbursement

Mailing Address 30138 Bradner

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	9

City State Zip Code  
Warren MI 48088

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bingo Prize

--

150.00
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

650.00
--------

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

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# 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)  
Frank Novak

Transaction ID: SB21B.17374  
Date of Disbursement

Mailing Address 24757 Meadow

/   /

City Harrison Twp State MI Zip Code 48045

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bingo Prize

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Elizabeth Nowak

Transaction ID: SB21B.17372  
Date of Disbursement

Mailing Address 2317 Hidden Trail

/   /

City Sterling Heights State MI Zip Code 48314

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bingo Prize

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Elizabeth Nowak

Transaction ID: SB21B.17427  
Date of Disbursement

Mailing Address 2317 Hidden Trail

/   /

City Sterling Heights State MI Zip Code 48314

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bingo Prize

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Elizabeth Nowak	Transaction ID: SB21B.17468 Date of Disbursement 05 / 30 / 2009
	Mailing Address 2317 Hidden Trail	Amount of Each Disbursement this Period 100.00
	City Sterling Heights State MI Zip Code 48314	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Virginia Nowicki	Transaction ID: SB21B.17136 Date of Disbursement 05 / 31 / 2009
	Mailing Address 39441 Van Dyke, #203	Amount of Each Disbursement this Period 500.00
	City Sterling Heights State MI Zip Code 48313	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Walter Nowinski	Transaction ID: SB21B.16606 Date of Disbursement 05 / 14 / 2009
	Mailing Address 3502 Warwick	Amount of Each Disbursement this Period 1153.52
	City Rochester Hills State MI Zip Code 48309	
	Purpose of Disbursement Salary	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1753.52
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Walter Nowinski	Transaction ID: SB21B.16608 Date of Disbursement 05 / 28 / 2009
	Mailing Address 3502 Warwick	
	City Rochester Hills State MI Zip Code 48309	Amount of Each Disbursement this Period 1153.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Lenora Obrecht	Transaction ID: SB21B.17381 Date of Disbursement 05 / 02 / 2009
	Mailing Address 17688 E. Kirkwood	
	City Clinton Township State MI Zip Code 48038	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Lenora Obrecht	Transaction ID: SB21B.17416 Date of Disbursement 05 / 16 / 2009
	Mailing Address 17688 E. Kirkwood	
	City Clinton Township State MI Zip Code 48038	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1453.53

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Lenora Obrecht	Transaction ID: SB21B.17442
	Mailing Address 17688 E. Kirkwood	Date of Disbursement MM / DD / YYYY 05 / 23 / 2009
	City Clinton Township State MI Zip Code 48038	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Caroline Ochenski	Transaction ID: SB21B.17005
	Mailing Address 4538 Linville	Date of Disbursement MM / DD / YYYY 05 / 10 / 2009
	City Warren State MI Zip Code 48092	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Carolyn Okey	Transaction ID: SB21B.17110
	Mailing Address 21521 Indian Street	Date of Disbursement MM / DD / YYYY 05 / 24 / 2009
	City Southgate State MI Zip Code 48033	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1150.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Carolyn Okey	Transaction ID: SB21B.17172
	Mailing Address 21521 Indian Street	Date of Disbursement 05 / 31 / 2009
	City Southgate State MI Zip Code 48033	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sylvia Page	Transaction ID: SB21B.17096
	Mailing Address 727 W. Lantz	Date of Disbursement 05 / 24 / 2009
	City Detroit State MI Zip Code 48203	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sylvia Page	Transaction ID: SB21B.17109
	Mailing Address 727 W. Lantz	Date of Disbursement 05 / 24 / 2009
	City Detroit State MI Zip Code 48203	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1100.00
<b>TOTAL</b> 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)

PAGE 132 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Sylvia Page	Transaction ID: SB21B.17111
	Mailing Address 727 W. Lantz	Date of Disbursement 05 / 24 / 2009
	City Detroit State MI Zip Code 48203	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sylvia Page	Transaction ID: SB21B.17151
	Mailing Address 727 W. Lantz	Date of Disbursement 05 / 24 / 2009
	City Detroit State MI Zip Code 48203	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Brian Pare	Transaction ID: SB21B.17431
	Mailing Address 19422 Opal	Date of Disbursement 05 / 16 / 2009
	City Clinton Township State MI Zip Code 48035	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	275.00
<b>TOTAL</b> 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)

PAGE 133 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kathy Passalacqua</p> <p>Mailing Address 26188 Mapleridge</p> <p>City Chesterfield State MI Zip Code 48051</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17126</p> <p>Date of Disbursement 05 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sandy Payne</p> <p>Mailing Address 1371 Woodside</p> <p>City Madison Heights State MI Zip Code 48070</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17148</p> <p>Date of Disbursement 05 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sandy Payne</p> <p>Mailing Address 1371 Woodside</p> <p>City Madison Heights State MI Zip Code 48070</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17164</p> <p>Date of Disbursement 05 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>425.00</b>
<b>TOTAL</b> 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)

PAGE 134 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Janice Perry	Transaction ID: SB21B.17371 Date of Disbursement 05 / 02 / 2009
	Mailing Address 28740 Alden	
	City Madison Heights State MI Zip Code 48071	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Janice Perry	Transaction ID: SB21B.17389 Date of Disbursement 05 / 09 / 2009
	Mailing Address 28740 Alden	
	City Madison Heights State MI Zip Code 48071	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Janice Perry	Transaction ID: SB21B.17399 Date of Disbursement 05 / 09 / 2009
	Mailing Address 28740 Alden	
	City Madison Heights State MI Zip Code 48071	Amount of Each Disbursement this Period 125.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	425.00
<b>TOTAL</b> 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)

PAGE 135 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b> Full Name (Last, First, Middle Initial) Janice Perry</p> <p>Mailing Address 28740 Alden</p> <p>City Madison Heights State MI Zip Code 48071</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17407</p> <p>Date of Disbursement 05 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Janice Perry</p> <p>Mailing Address 28740 Alden</p> <p>City Madison Heights State MI Zip Code 48071</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17469</p> <p>Date of Disbursement 05 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Janice Perry</p> <p>Mailing Address 28740 Alden</p> <p>City Madison Heights State MI Zip Code 48071</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17482</p> <p>Date of Disbursement 05 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>

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

1300.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 136 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b> Full Name (Last, First, Middle Initial) Janice Perry</p> <p>Mailing Address 28740 Alden</p> <p>City Madison Heights State MI Zip Code 48071</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17486</p> <p>Date of Disbursement 05 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Marie Petrucci</p> <p>Mailing Address 36548 Boyce</p> <p>City Clinton Township State MI Zip Code 48035</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17417</p> <p>Date of Disbursement 05 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Patricia Pickell</p> <p>Mailing Address 7870 Carpenter</p> <p>City Shelby Township State MI Zip Code 48317</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17119</p> <p>Date of Disbursement 05 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p>

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

400.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b> Full Name (Last, First, Middle Initial) Barbara Plante <hr/> Mailing Address 35138 Golden <hr/> City Clinton Twp State MI Zip Code 48038 <hr/> Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17390 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Sherry Porter <hr/> Mailing Address 18427 Sunderland <hr/> City Detroit State MI Zip Code 48219 <hr/> Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17061 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 150.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Jessie Rankine <hr/> Mailing Address 37161 Clubhouse <hr/> City Sterling Heights State MI Zip Code 48312 <hr/> Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17387 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 175.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1325.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Jessie Rankine	Transaction ID: SB21B.16954 Date of Disbursement 05 / 03 / 2009
	Mailing Address 37161 Clubhouse	Amount of Each Disbursement this Period 150.00
	City Sterling Heights State MI Zip Code 48312	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Colleen Redmon	Transaction ID: SB21B.17025 Date of Disbursement 05 / 10 / 2009
	Mailing Address 8435 Busko	Amount of Each Disbursement this Period 150.00
	City Warren State MI Zip Code 48093	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Colleen Redmon	Transaction ID: SB21B.17027 Date of Disbursement 05 / 10 / 2009
	Mailing Address 8435 Busko	Amount of Each Disbursement this Period 75.00
	City Warren State MI Zip Code 48093	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	375.00
<b>TOTAL</b> 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)

PAGE 139 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Laura Reed	Transaction ID: SB21B.17395
	Mailing Address 36980 Gordon	Date of Disbursement MM / DD / YYYY 05 / 09 / 2009
	City Harrison Twp State MI Zip Code 48045	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) Leslie Resetar	Transaction ID: SB21B.17376
	Mailing Address 16150 Clarkston	Date of Disbursement MM / DD / YYYY 05 / 02 / 2009
	City Fraser State MI Zip Code 48026	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Leslie Resetar	Transaction ID: SB21B.17411
	Mailing Address 16150 Clarkston	Date of Disbursement MM / DD / YYYY 05 / 16 / 2009
	City Fraser State MI Zip Code 48026	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	450.00
<b>TOTAL</b> 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)

PAGE 140 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Debra Robinson	Transaction ID: SB21B.17077
	Mailing Address 19 Pilgrim	Date of Disbursement MM / DD / YYYY 05 / 17 / 2009
	City Highland Park State MI Zip Code 48203	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mary Ann Rodriguez	Transaction ID: SB21B.16951
	Mailing Address 30267 Freda	Date of Disbursement MM / DD / YYYY 05 / 03 / 2009
	City Warren State MI Zip Code 48093	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mary Ann Rodriguez	Transaction ID: SB21B.16960
	Mailing Address 30267 Freda	Date of Disbursement MM / DD / YYYY 05 / 03 / 2009
	City Warren State MI Zip Code 48093	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	250.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Mary Ann Rodriguez	Transaction ID: SB21B.16961 Date of Disbursement 05 / 03 / 2009
	Mailing Address 30267 Freda	Amount of Each Disbursement this Period 75.00
	City Warren State MI Zip Code 48093	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Mary Ann Rodriguez	Transaction ID: SB21B.16962 Date of Disbursement 05 / 03 / 2009
	Mailing Address 30267 Freda	Amount of Each Disbursement this Period 150.00
	City Warren State MI Zip Code 48093	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Mary Ann Rodriguez	Transaction ID: SB21B.16963 Date of Disbursement 05 / 03 / 2009
	Mailing Address 30267 Freda	Amount of Each Disbursement this Period 150.00
	City Warren State MI Zip Code 48093	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	375.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mary Ann Rodriguez</p> <p>Mailing Address 30267 Freda</p> <p>City Warren State MI Zip Code 48093</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16973</p> <p>Date of Disbursement 05 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mary Ann Rodriguez</p> <p>Mailing Address 30267 Freda</p> <p>City Warren State MI Zip Code 48093</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17065</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carol Rotary</p> <p>Mailing Address 1179 Avon Manor</p> <p>City Rochester Hills State MI Zip Code 48307</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17473</p> <p>Date of Disbursement 05 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>

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

**450.00**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Jeanne Rotary	Transaction ID: SB21B.17475
	Mailing Address 1179 Avon Manor	Date of Disbursement MM / DD / YYYY 05 / 30 / 2009
	City Rochester State MI Zip Code 48309	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jeanne Rotary	Transaction ID: SB21B.17481
	Mailing Address 1179 Avon Manor	Date of Disbursement MM / DD / YYYY 05 / 30 / 2009
	City Rochester State MI Zip Code 48309	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bernadett Sawa	Transaction ID: SB21B.17170
	Mailing Address 1124 E. Hardwood	Date of Disbursement MM / DD / YYYY 05 / 31 / 2009
	City Madison Heights State MI Zip Code 48071	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	300.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<b>A.</b> Full Name (Last, First, Middle Initial) Eugene Seluderski <hr/> Mailing Address 11647 Faust <hr/> City Sterling Heights State MI Zip Code 48312 Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17439 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 150.00
<b>B.</b> Full Name (Last, First, Middle Initial) Leah Shivers <hr/> Mailing Address 19421 Buffalo <hr/> City Detroit State MI Zip Code 48234 Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17094 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 150.00
<b>C.</b> Full Name (Last, First, Middle Initial) Janeen Shock <hr/> Mailing Address 25925 Koontz <hr/> City Roseville State MI Zip Code 48066 Purpose of Disbursement Bingo Prize Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17036 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 150.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	450.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Janeen Shock</p> <p>Mailing Address 25925 Koontz</p> <p>City Roseville State MI Zip Code 48066</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17064</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Janeen Shock</p> <p>Mailing Address 25925 Koontz</p> <p>City Roseville State MI Zip Code 48066</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17162</p> <p>Date of Disbursement 05 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Yvette Singleton</p> <p>Mailing Address 17170 Dawn, Bldg. I</p> <p>City Roseville State MI Zip Code 48066</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17120</p> <p>Date of Disbursement 05 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>400.00</b>
<b>TOTAL</b> 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)

PAGE 146 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Doreen Skarjune	Transaction ID: SB21B.17461 Date of Disbursement 05 / 30 / 2009
	Mailing Address 2108 Common	Amount of Each Disbursement this Period 50.00
	City Warren State MI Zip Code 48092	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ima Smith	Transaction ID: SB21B.16996 Date of Disbursement 05 / 10 / 2009
	Mailing Address 20291 Chapel	Amount of Each Disbursement this Period 150.00
	City Detroit State MI Zip Code 48219	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ima Smith	Transaction ID: SB21B.17012 Date of Disbursement 05 / 10 / 2009
	Mailing Address 20291 Chapel	Amount of Each Disbursement this Period 60.00
	City Detroit State MI Zip Code 48219	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	260.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Sharon Springstead	Transaction ID: SB21B.16952
	Mailing Address 23645 Panama	Date of Disbursement MM / DD / YYYY 05 / 03 / 2009
	City Warren State MI Zip Code 48091	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Marianne Stamm	Transaction ID: SB21B.17472
	Mailing Address 11723 15 Mile Road	Date of Disbursement MM / DD / YYYY 05 / 30 / 2009
	City Sterling Heights State MI Zip Code 48312	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) State of Michigan	Transaction ID: SB21B.16611
	Mailing Address PO Box 30023	Date of Disbursement MM / DD / YYYY 05 / 15 / 2009
	City Lansing State MI Zip Code 48909	Amount of Each Disbursement this Period 291.51
	Purpose of Disbursement Payroll Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>841.51</b>
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b> Full Name (Last, First, Middle Initial) Henry Stromske</p> <p>Mailing Address 30256 Flanders</p> <p>City Warren State MI Zip Code 48088</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17045</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Charlotte Sudau</p> <p>Mailing Address 56660 North Ave.</p> <p>City Macomb State MI Zip Code 48042</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17419</p> <p>Date of Disbursement 05 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 75.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Deborah Tolomai, Deborah</p> <p>Mailing Address 28424 Palm Beach</p> <p>City Warren State MI Zip Code 48093</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16985</p> <p>Date of Disbursement 05 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

2075.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 151 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

<p><b>A.</b> Full Name (Last, First, Middle Initial) Deborah Varcak</p> <p>Mailing Address 36420 Samoa</p> <p>City Sterling Heights State MI Zip Code 48312</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17424 <b>Date of Disbursement</b> 05 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jean Vitale</p> <p>Mailing Address 47415 Greenview</p> <p>City Utica State MI Zip Code 48317</p> <p>Purpose of Disbursement Progressive Jackpot Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.16635 <b>Date of Disbursement</b> 05 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 2126.66</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Melissa Viviano</p> <p>Mailing Address 29315 Fairfield</p> <p>City Warren State MI Zip Code 48088</p> <p>Purpose of Disbursement Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17454 <b>Date of Disbursement</b> 05 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>

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

2426.66

**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)

PAGE 152 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Lori Ann Waldowski	Transaction ID: SB21B.17422
	Mailing Address 8267 Doncaster	Date of Disbursement MM / DD / YYYY 05 / 16 / 2009
	City Sterling Heights State MI Zip Code 48312	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Annetta Walker	Transaction ID: SB21B.17166
	Mailing Address 5018 Ashley	Date of Disbursement MM / DD / YYYY 05 / 31 / 2009
	City Detroit State MI Zip Code 48236	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Brenda Ward	Transaction ID: SB21B.17437
	Mailing Address 26655 Rosewood	Date of Disbursement MM / DD / YYYY 05 / 23 / 2009
	City Roseville State MI Zip Code 48066	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1200.00
<b>TOTAL</b> 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)

PAGE 153 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Eva White	Transaction ID: SB21B.16953
	Mailing Address 30654 Campbell	Date of Disbursement MM / DD / YYYY 05 / 03 / 2009
	City Warren State MI Zip Code 48093	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Eva White	Transaction ID: SB21B.16974
	Mailing Address 30654 Campbell	Date of Disbursement MM / DD / YYYY 05 / 03 / 2009
	City Warren State MI Zip Code 48093	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Eva White	Transaction ID: SB21B.17099
	Mailing Address 30654 Campbell	Date of Disbursement MM / DD / YYYY 05 / 24 / 2009
	City Warren State MI Zip Code 48093	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	275.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Eva White	Transaction ID: SB21B.17103
	Mailing Address 30654 Campbell	Date of Disbursement MM / DD / YYYY 05 / 24 / 2009
	City Warren State MI Zip Code 48093	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Eva White	Transaction ID: SB21B.17113
	Mailing Address 30654 Campbell	Date of Disbursement MM / DD / YYYY 05 / 24 / 2009
	City Warren State MI Zip Code 48093	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Johnnie White	Transaction ID: SB21B.17179
	Mailing Address 17330 Littlefield	Date of Disbursement MM / DD / YYYY 05 / 31 / 2009
	City Detroit State MI Zip Code 48235	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	300.00
<b>TOTAL</b> 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)

PAGE 155 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Karen White	Transaction ID: SB21B.17048 Date of Disbursement 05 / 17 / 2009
	Mailing Address 960 E. Morehouse	Amount of Each Disbursement this Period 100.00
	City Hazel Park State MI Zip Code 48030	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Karen White	Transaction ID: SB21B.17082 Date of Disbursement 05 / 17 / 2009
	Mailing Address 960 E. Morehouse	Amount of Each Disbursement this Period 150.00
	City Hazel Park State MI Zip Code 48030	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Karen White	Transaction ID: SB21B.17165 Date of Disbursement 05 / 31 / 2009
	Mailing Address 960 E. Morehouse	Amount of Each Disbursement this Period 150.00
	City Hazel Park State MI Zip Code 48030	
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

400.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)  
L. Williams

Transaction ID: SB21B.17068  
Date of Disbursement

Mailing Address 8564 Hampshire

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	0	9

City State Zip Code  
Sterling Heights MI 48313

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bingo Prize

75.00
-------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Alice Wilson

Transaction ID: SB21B.17067  
Date of Disbursement

Mailing Address 2696 Rhodes

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	0	9

City State Zip Code  
Troy MI 48083

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bingo Prize

50.00
-------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Alice Wilson

Transaction ID: SB21B.17144  
Date of Disbursement

Mailing Address 2696 Rhodes

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	9

City State Zip Code  
Troy MI 48083

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bingo Prize

50.00
-------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

175.00
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 157 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Chantra Wright	Transaction ID: SB21B.17053 Date of Disbursement 05 / 17 / 2009
	Mailing Address 11845 Ina	
	City Sterling Heights State MI Zip Code 48312	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jodi Yeager	Transaction ID: SB21B.17084 Date of Disbursement 05 / 17 / 2009
	Mailing Address 5753 Southlawn	
	City Sterling Heights State MI Zip Code 48310	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jodi Yeager	Transaction ID: SB21B.17160 Date of Disbursement 05 / 31 / 2009
	Mailing Address 5753 Southlawn	
	City Sterling Heights State MI Zip Code 48310	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	350.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.	Full Name (Last, First, Middle Initial) Jodi Yeager	Transaction ID: SB21B.17182 Date of Disbursement 05 / 31 / 2009
	Mailing Address 5753 Southlawn	
	City Sterling Heights State MI Zip Code 48310	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jodi Yeager	Transaction ID: SB21B.17183 Date of Disbursement 05 / 31 / 2009
	Mailing Address 5753 Southlawn	
	City Sterling Heights State MI Zip Code 48310	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Amira Zomo	Transaction ID: SB21B.16958 Date of Disbursement 05 / 03 / 2009
	Mailing Address 7375 Drake	
	City West Bloomfield State MI Zip Code 48322	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Bingo Prize	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	375.00
<b>TOTAL</b> 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)

PAGE 159 / 159

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

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NAME OF COMMITTEE (In Full)  
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)  
Madeline Zpara

Mailing Address 31531 Harrold

City State Zip Code  
Madison Heights MI 48071

Purpose of Disbursement  
Bingo Prize

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.17022

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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