

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 1985 W. Outer Dr.
Suite 103 A-E
 Check if different than previously reported. (ACC) Dearborn MI 48124

2. **FEC IDENTIFICATION NUMBER ▼** C00451583 **CITY ▲** **STATE ▲** **ZIP CODE ▲**
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period M M / D D / Y Y Y Y Y Y 12 / 01 / 2015 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2015

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 Paul Massaron

Signature of Treasurer Paul Massaron *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y 05 / 07 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Wolverine PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="9920.11"/>	<input type="text" value="9920.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="23621.59"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0.00"/>	<input type="text" value="15000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="23621.59"/>	<input type="text" value="24920.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9100.00"/>	<input type="text" value="10398.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14521.59"/>	<input type="text" value="14521.59"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Wolverine PAC

Report Covering the Period: From: 12 / 01 / 2015 To: 12 / 31 / 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	15000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	0.00	15000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	0.00	15000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	100.00	1398.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	100.00	1398.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	9000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9100.00	10398.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9100.00	10398.52

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	15000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	15000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	100.00	1398.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	100.00	1398.52

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)
Wolverine PAC

Full Name (Last, First, Middle Initial)

A. BRAD ASHFORD FOR CONGRESS

Mailing Address PO Box 24023

City Omaha State NE Zip Code 68124-0023

Purpose of Disbursement
Contribution

Candidate Name
BRAD ASHFORD

Office Sought: House
 Senate
 President
State: NE District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : **VNH7GA0M7S0**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DR. RAUL RUIZ FOR CONGRESS

Mailing Address PO Box 3433

City Palm Desert State CA Zip Code 92261-3433

Purpose of Disbursement
Contribution

Candidate Name
RAUL DR. RUIZ

Office Sought: House
 Senate
 President
State: CA District: 36

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : **VNH7GA0M7N8**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF CHERI BUSTOS

Mailing Address 1050 17th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement
Contribution

Candidate Name
CHERI BUSTOS

Office Sought: House
 Senate
 President
State: IL District: 17

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : **VNH7GA0M7Q4**

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Wolverine PAC

Full Name (Last, First, Middle Initial) A. GRAHAM FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 17 / 2015
Mailing Address PO Box 310		Transaction ID : VNH7GA0M7P6
City Tallahassee	State FL	
Zip Code 32302-0310	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 500.00
Candidate Name GWEN GRAHAM	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: FL District: 02	

Full Name (Last, First, Middle Initial) B. GRETCHEN DRISKELL FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 23 / 2015
Mailing Address PO Box 464		Transaction ID : VNH7GA0M7H7
City Saline	State MI	
Zip Code 48176-0464	Purpose of Disbursement Primary Contribution	Amount of Each Disbursement this Period 1000.00
Candidate Name GRETCHEN DRISKELL	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MI District: 07	

Full Name (Last, First, Middle Initial) C. JULIA BROWNLEY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 17 / 2015
Mailing Address PO Box 2018		Transaction ID : VNH7GA0M7K3
City Thousand Oaks	State CA	
Zip Code 91358-2018	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 500.00
Candidate Name JULIA BROWNLEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CA District: 26	

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Wolverine PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN MATTHEWS FOR CONGRESS

Mailing Address PO Box 15236

City Chevy Chase State MD Zip Code 20825-5236

Purpose of Disbursement
Primary Contribution

Candidate Name
KATHLEEN MATTHEWS

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MD District: 08

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2015

Transaction ID : VNH7GA0M7G9

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KUSTER FOR CONGRESS, INC.

Mailing Address PO Box 1498

City Concord State NH Zip Code 03302-1498

Purpose of Disbursement
Contribution

Candidate Name
ANN MCLANE KUSTER

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NH District: 02

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2015

Transaction ID : VNH7GA0M7T8

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KYRSTEN SINEMA FOR CONGRESS

Mailing Address PO Box 25879

City Tempe State AZ Zip Code 85285-5879

Purpose of Disbursement
Contribution

Candidate Name
KYRSTEN SINEMA

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: AZ District: 09

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2015

Transaction ID : VNH7GA0M7J5

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

2000.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)
Wolverine PAC

Full Name (Last, First, Middle Initial)

A. MARK TAKAI FOR CONGRESS

Mailing Address PO Box 2267

City Pearl City State HI Zip Code 96782-9267

Purpose of Disbursement
Contribution

Candidate Name
KYLE MARK TAKAI

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: HI District: 01

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2015

Transaction ID : VNH7GA0M7F1

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MELISSA GILBERT FOR CONGRESS

Mailing Address PO Box 2065

City Brighton State MI Zip Code 48116-5865

Purpose of Disbursement
Primary Contribution

Candidate Name
MELISSA GILBERT

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MI District: 08

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2015

Transaction ID : VNH7GA0M7E3

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE

Mailing Address PO Box 1041

City Brainerd State MN Zip Code 56401-1041

Purpose of Disbursement
Contribution

Candidate Name
RICHARD M. NOLAN

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MN District: 08

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2015

Transaction ID : VNH7GA0M7R2

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

2500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)
Wolverine PAC

Full Name (Last, First, Middle Initial)

A. PETE AGUILAR FOR CONGRESS

Mailing Address PO Box 10954

City San Bernardino State CA Zip Code 92423-0954

Purpose of Disbursement
Contribution

Candidate Name

PETE AGUILAR

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 31

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : VNH7GA0M7M1

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SEAN PATRICK MALONEY FOR CONGRESS

Mailing Address PO Box 270

City Newburgh State NY Zip Code 12551-0270

Purpose of Disbursement
Contribution

Candidate Name

SEAN PATRICK MALONEY

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : VNH7GA0M7V6

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

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

1000.00

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

9000.00