FEC FORM 3X	AND DIS	OF RECEIP BURSEMEN An Authorized Comm	TS	RECE FEC MAIL 2016 FEB -8 Office	CENTER
1. NAME OF: COMMITTEE (in full)		Example: If over the line		12FE4M5	
[M _i i,c _i h _i i,g _i a,n _i	ןD _i eim oʻciriait	i, c, P, a, r, t _i y,	_16	i ₁ s ₁ t ₁ r ₁ i ₁ c ₁	<u>t</u> , <u>, , , , , , </u>
$F_1e_1d_1e_1r_1a_1l_1$	<u>Commitititie</u>	<u> </u>			
ADDRESS (number and stre	l 3573 K	e n b r o o k e			
Check if different than previously reported. (ACC)	Kalama	z o o		<u>[M1]</u> [4 ₁ 9]	<u>0,0,6</u>]-[]
2. FEC IDENTIFICATIO	N NUMBER V		S		
C 0 0 5 9 0	4 5 5	3. IS THIS REPORT	NEW (N) OR	AMENDE (A)	D
 4. TYPE OF REPOR (Choose One) (a) Quarterly Reports: April 15 Quarterly Rep July 15 Quarterly Rep October 15 Quarterly Rep October 15 Quarterly Rep January 31 Year-End Rep July 31 Mid-Y Report (Non-Year Only) (N Termination F (TER) 	bort (Q1) bort (Q2) cort (Q2) cort (Q3) fear election AY Beport Cort (Q3) fear election AY Beport Cort (Q3) Cort (Q3)	Election on	ion (12C)	Aug 20 (M8 Sep 20 (M8 Oct 20 (M1 General (12G) Special (12S) Runoff (30R)	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
5. Covering Period I certify that I have examine Type or Print Name of Tree Signature of Treasurer	NAmenality D		and belief it is true		Dete. 25'' 2016
NOTE: Submission of false, Office Use Only	erroneous, or incomplete	information may subject the	person signing th		alties of 2 U.S.C. §437g. C FORM 3X Rev. 12/2004

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	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
N	Inite or Type Committee Name		
_	Michigan Democratic Party 6th Dis	strict Federal Committee	
R	eport Covering the Period: From:	1_0 1_3 2_0_1_5 To	
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1,		
	(b) Cash on Hand at Beginning of Reporting Period	0 0 0	
	(c) Total Receipts (from Line 19)	1005000	<u>1.0,0,5,0,0,0</u>
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	1 0 0 5 0 0 0	1.0,0,5.0,0.0
7.	Total Disbursements (from Line 31)	4 0 0 0 0 0	4 0 0 0 0 0
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u> </u>	<u> </u>
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0 0 0	

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

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Γ	FEC Form 3X (Rev. 06/2004)	DETAILED SUMMARY PAGE of Receipts	Page 3
W	ite or Type Committee Name		
<u> </u>	Michigan Democratic Party 6th Dis	trict Federal Committee	
Re	eport Covering the Period: From:	10'1'3'2'0'1'5 To:	Bannan Danish Danish Camara Canada
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
12. 13. 14.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) (ii) Unitemized	$ \begin{array}{c} $	$\begin{array}{c} & & & & & & & & & & & & & & & & & & &$
17.	Refunds of Contributions Made to Federal Candidates and Other Political Committees Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin F (a) Non-Federal Account (from Schedule H3)	unds	
	(b) Levin Funds (from Schedule H5)(c) Total Transfers (add 18(a) and 18(b))		
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) Total Federal Receipts (subtract Line 18(c) from Line 19)	timesedminitonese	

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DETAILED SUMMARY PAGE

of Disbursements

Page 4

COLUMN A Total This Period

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COLUMN B Calendar Year-to-Date

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		II. Disbursements
		rating Expenditures:
(;	a)	Allocated Federal/Non-Federal Activity (from Schedule H4)
		(i) Federal Share
		(ii) Non-Federal Share
(b)	Other Federal Operating
	•	Expenditures
(c)	Total Operating Expenditures
		(add 21(a)(i), (a)(ii), and (b)) >
Ţ	rar	sfers to Affiliated/Other Party
ç		nmittees
		tributions to eral Candidates/Committees
		Other Political Committees
, li	nde	ependent Expenditures
. {	use	Schedule E) ordinated Party Expenditures J.S.C. §441a(d)) Schedule F)
. (2ι 2	J.S.C. §441a(d))
(use	e Schedule F)
		- Denoumente Made
. L	.oa	n Repayments Made
	~~	ns Made
. L . F	Refi	unds of Contributions To:
(a)	Individuals/Persons Other Than Political Committees
		man i onicar committees
(b)	Political Party Committees
	c)	Other Political Committees
		(such as PACs)
1	d)	Total Contribution Refunds
	-1	(add Lines 28(a), (b), and (c))▶
. C	Othe	er Disbursements
), F	ed	eral Election Activity (2 U.S.C. §431(20))
(Allocated Federal Election Activity
		(from Schedule H6)
		(i) Federal Share
		(ii) "Levin" Share
(b)	Federal Election Activity Paid Entirely
		With Federal Funds
(c)	Total Federal Election Activity (add

- (c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b)).... ►
- Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) COLUMN A III. Net Contributions/Operating Ex-COLUMN B **Total This Period Calendar Year-to-Date** penditures 33. Total Contributions (other than loans) 0 5, 0 0.0 (from Line 11(d), page 3) 0 0. 34. Total Contribution Refunds (from Line 28(d)) 0,0 С 35. Net Contributions (other than loans) 0 0 5_0 1 0 0 0 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0 (from Line 15, page 3)..... 0 38. Net Operating Expenditures 0 0 0 O (subtract Line 37 from Line 36) 0

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Page 5

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s	HEDULE A (FEC Form 3X)			FC		JF	NU	MBFF	ק :	PAG	E	OF	:	
			Use separate schedule(s)		neck c				••					
IT	EMIZED RECEIPTS	-	for each category of the Detailed Summary Page	11a 11b 11c							12			
	_		Jetaneo Juminary Faye		13			14		15		16	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the													
$\left[\right]$	NAME OF COMMITTEE (In Full)		· · ·											
Ľ	Michigan Democratic Party 6th Distri	ict Federa	I Committee											
Α.	Full Name (Last, First, Middle Initial) Betty Georgeau				Date	of	Re	ceipt						
	Mailing Address 2252 Chevy Chase Blvd				1	м 1	'	1	3	12	, 0	ر بر بر 1	5	
	City Kalamazoo	State MI	Zip Code 49008-2273	-						- 1- A Ab				
	FEC ID number of contributing				Amo	unt	ot 	Each	Rec	ceipt th	-	0		
	federal political committee.		5,9,0,4,5,5			****	5	(1) k		5 (00	0	0,0	
	Name of Employer	Occupation R	etired											
	Receipt For:	Aggregate	Year-to-Date ▼											
	C Other (specify) ▼		5,0.0.0.0.0											
В.	Full Name (Last, First, Middle Initial) Nancy M. Hamilton				Date	of	Re	ceipt						
	Mailing Address 525 S. Burdick St Apt 3804													
	City Kalamazoo	State MI	Zip Code 49007-5258		Amo	unt	of	Each	Rec	ceipt th	nis Pe	eriod		
	FEC ID number of contributing federal political committee.		590455		Ľ		gaaa Baan	0) 0)		5_0		0	00	
	Name of Employer	Occupation retire		-1										
	Receipt For:		Year-to-Date V											
	X Primary General Other (specify) ▼		<u>, 5,0,0,0,0,0</u>											
<u></u> с.	Full Name (Last, First, Middle Initial)				Date	of	Re	ceipt						
	Mailing Address				La.	М	,		8	Υľ	<u> </u>	****		
	City	State	Zip Code	┣	Amo	unt		Fach	Rec	ceipt th	nis Pr	eriod		
	FEC ID number of contributing federal political committee.	C			С			47 	 					
	Name of Employer	Occupation)											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ♥											
	UBTOTAL of Receipts This Page (optional)						~		1	0,0)_ ()	, O.	0.0	
	OTAL This Period (last page this line number of			-				67. <u>}</u>	1	0_ (

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SCHEDULE B (FEC Form 3X)		FOR LINE I	GE	OF				
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)					
	Detailed Summary Page	21b	22	23	24	25		
<u></u>		27	28a	285	28c	29	30	
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
Michigan Democratic Party 6th Distric	t Federal Committee							
Full Name (Last, First, Middle Initial)								
A.			Date of D	Jisourse	ment			
Clements for Congress Mailing Address			1 2	3	0 /	ግ-የግሞ 2 በ	1 5	
PO Box 19705			المتحتيا	-				
City	State Zip Code							
Kalamazoo	MI49019							
Purpose of Disbursement	1							
Contribution		0, 1, 1	Amount o				s Period	
Candidate Name		Category/)_0,0	
Paul Clements Office Sought: y House Disburse	ment For:	Туре	Sundawal)					
Senate	Primary General							
President	Other (specify)							
State: MI District: 06	· · · · ·							
Full Name (Last, First, Middle Initial)								
3.			Date of I	Disburse	ment			
			M.C.W.	1 0 0	37/	~~~	1	
Mailing Address				L				
City	State Zip Code							
Purpose of Disbursement								
		Amount o				s Period		
Candidate Name		Category/	The second second					
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Office Sought: House Disburse	ment For:							
President	Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial)								
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Mailing Address			L					
City	State Zip Code							
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Candidate Name		Category/					~~~~~	
Office Pought		Туре	l			a Canac Can		
Office Sought: House Disburse Senate	ment For: Primary General							
President	Primary General Other (specify)							
State: District:								
			(
SUBTOTAL of Disbursements This Page (optional).		••••••			4	0,0,0	0.00	
TOTAL This Period (last page this line number only	/)	•••••••	l.		_4_(0,0,0	<u>, 0, 0</u>	

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Federal Electron Commission 999 E Street NW Wanhington, DC 20463

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Date of Receipt Postmarked USPS First Class Mail 8/16 16 Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS** Priority Mail Express Postmark Illegible No Postmark Shipping Date **Overnight Delivery Service (Specify):** Next Business Day Delivery Date of Receipt **Received from House Records & Registration Office** Date of Receipt Received from Senate Public Records Office Date of Receipt **Received from Electronic Filing Office** Date of Receipt or Postmarked Other (Specify): PRÉPARER DATE PREPARED (3/2015)