

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

Second Congressional District Democratic Party

ADDRESS (number and street) 809 Moss Rd.

Check if different than previously reported. (ACC) Beulah MI 49617

2. **FEC IDENTIFICATION NUMBER ▼** C00306035 **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 M / D 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 M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2012 through M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2012

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 Charlie Benham

Signature of Treasurer Charlie Benham *[Electronically Filed]* Date M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2012

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

Second Congressional District Democratic Party

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="2012"/>	<input type="text" value="13029.71"/>	<input type="text" value="13029.71"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="21056.37"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="9820.00"/>	<input type="text" value="27355.00"/>
(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="30876.37"/>	<input type="text" value="40384.71"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="14830.05"/>	<input type="text" value="24338.39"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="16046.32"/>	<input type="text" value="16046.32"/>
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

Second Congressional District Democratic Party

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

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).....	9820.00	27355.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9820.00	27355.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	9820.00	27355.00
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))..... ▶	9820.00	27355.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9820.00	27355.00

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	5830.05	15338.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5830.05	15338.39
22. Transfers to Affiliated/Other Party Committees.....	9000.00	9000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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)) ..	14830.05	24338.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14830.05	24338.39

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)	9820.00	27355.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9820.00	27355.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5830.05	15338.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5830.05	15338.39

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
<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)
Second Congressional District Democratic Party

Full Name (Last, First, Middle Initial) A. Unitemized Millionaire Party Proceeds		Date of Receipt
Mailing Address 809 Moss Rd.		<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>
City Beulah State MI Zip Code 49617		Transaction ID : SA11AI.4518
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="2684.00"/>
Name of Employer Fundraiser	Occupation Fundraiser	T.H. Dep 1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="14549.00"/>	

Full Name (Last, First, Middle Initial) B. Unitemized Millionaire Party Proceeds		Date of Receipt
Mailing Address 809 Moss Rd.		<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>
City Beulah State MI Zip Code 49617		Transaction ID : SA11AI.4519
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1713.00"/>
Name of Employer Fundraiser	Occupation Fundraiser	T.H. Dep2
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="16262.00"/>	

Full Name (Last, First, Middle Initial) C. Unitemized Millionaire Party Proceeds		Date of Receipt
Mailing Address 809 Moss Rd.		<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>
City Beulah State MI Zip Code 49617		Transaction ID : SA11AI.4520
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1146.00"/>
Name of Employer Fundraiser	Occupation Fundraiser	T.H. dep3
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="17408.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5543.00"/>
TOTAL 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: (check only one)	PAGE 7 OF 13
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Second Congressional District Democratic Party

Full Name (Last, First, Middle Initial)
A. Unitemized Millionaire Party Proceeds

Mailing Address 809 Moss Rd.

City Beulah	State MI	Zip Code 49617
----------------	-------------	-------------------

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

Name of Employer Fundraiser	Occupation Fundraiser
--------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
18353.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2012

Transaction ID : SA11AI.4521

Amount of Each Receipt this Period
945.00

T.H. Dep4

Full Name (Last, First, Middle Initial)
B. Unitemized Millionaire Party Proceeds

Mailing Address 809 Moss Rd.

City Beulah	State MI	Zip Code 49617
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FEC ID number of contributing federal political committee. **C**

Name of Employer Fundraiser	Occupation Fundraiser
--------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	13	/	2012

Transaction ID : SA11AI.4522

Amount of Each Receipt this Period
1822.00

T.H. Dep1

Full Name (Last, First, Middle Initial)
C. Unitemized Millionaire Party Proceeds

Mailing Address 809 Moss Rd.

City Beulah	State MI	Zip Code 49617
----------------	-------------	-------------------

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

Name of Employer Fundraiser	Occupation Fundraiser
--------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	13	/	2012

Transaction ID : SA11AI.4523

Amount of Each Receipt this Period
260.00

T.H. Dep2

SUBTOTAL of Receipts This Page (optional).....▶	3027.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 13
(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)
Second Congressional District Democratic Party

Full Name (Last, First, Middle Initial)
A. Unitemized Millionaire Party Proceeds

Mailing Address 809 Moss Rd.

City Beulah State MI Zip Code 49617

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

Name of Employer Fundraiser Occupation Fundraiser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20685.00

Date of Receipt
07 / 13 / 2012
Transaction ID : SA11AI.4524

Amount of Each Receipt this Period
250.00

T.H. Dep3

Full Name (Last, First, Middle Initial)
B. Debbie Stabenow

Mailing Address P.O. Box 4945

City Lansing State MI Zip Code 48826

FEC ID number of contributing federal political committee. **C** S8MI00281

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 31 / 2012
Transaction ID : SA11AI.4549

Amount of Each Receipt this Period
1000.00

Contrib

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	9820.00

**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)
Second Congressional District Democratic Party

Full Name (Last, First, Middle Initial)

A. A-1 Bingo

Mailing Address 827 Bridge St. NW

City Grand Rapids State MI Zip Code 49504

Purpose of Disbursement
rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2012

Transaction ID : SB21B.4516

Amount of Each Disbursement this Period

2836.00

Full Name (Last, First, Middle Initial)

B. A-1 Bingo

Mailing Address 827 Bridge St. NW

City Grand Rapids State MI Zip Code 49504

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2012

Transaction ID : SB21B.4529

Amount of Each Disbursement this Period

866.00

Full Name (Last, First, Middle Initial)

C. Charlie Benham

Mailing Address 625 Main St.

City Newaygo State MI Zip Code 49337

Purpose of Disbursement
mileage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2012

Transaction ID : SB21B.4539

Amount of Each Disbursement this Period

82.00

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

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

3784.00

**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)
Second Congressional District Democratic Party

Full Name (Last, First, Middle Initial)

A. Dallas Dean

Mailing Address 2531 W. 141st Street SW

City Grant State MI Zip Code 49327

Purpose of Disbursement
T.H. Worker

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2012

Transaction ID : SB21B.4531

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Cord Dominguez

Mailing Address 2531 W. 141st Street SW

City Grant State MI Zip Code 49327

Purpose of Disbursement
T.H. Worker

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2012

Transaction ID : SB21B.4530

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Dean Garn

Mailing Address 2143 Sandcrest

City Jenison State MI Zip Code 49428

Purpose of Disbursement
T.H. Worker

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2012

Transaction ID : SB21B.4532

Amount of Each Disbursement this Period

175.00

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

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

675.00

**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)
Second Congressional District Democratic Party

Full Name (Last, First, Middle Initial)

A. Michigan Charitable Gaming Association

Mailing Address 215 South Washington Square
Suite 210

City Lansing State MI Zip Code 48933

Purpose of Disbursement membership

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2012

Transaction ID : SB21B.4515

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Mary Robling

Mailing Address 809 Moss Rd.

City Beulah State MI Zip Code 49617

Purpose of Disbursement mileage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 26 / 2012

Transaction ID : SB21B.4536

Amount of Each Disbursement this Period

375.65

Full Name (Last, First, Middle Initial)

C. Mary Robling

Mailing Address 809 Moss Rd.

City Beulah State MI Zip Code 49617

Purpose of Disbursement mileage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2012

Transaction ID : SB21B.4538

Amount of Each Disbursement this Period

322.85

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

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

998.50

**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)
Second Congressional District Democratic Party

Full Name (Last, First, Middle Initial)

A. Mary Robling

Mailing Address 809 Moss Rd.

City Beulah State MI Zip Code 49617

Purpose of Disbursement
mileage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : SB21B.4540

Amount of Each Disbursement this Period

133.55

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

133.55

5591.05

**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 checked="" 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)
Second Congressional District Democratic Party

Full Name (Last, First, Middle Initial)

A. Michigan Democratic Party

Mailing Address 606 Townsend

City Lansing State MI Zip Code 48933

Purpose of Disbursement
transfers

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

07 / 02 / 2012

Transaction ID : SB22.4526

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Michigan Democratic Party

Mailing Address 606 Townsend

City Lansing State MI Zip Code 48933

Purpose of Disbursement
transfers

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

08 / 24 / 2012

Transaction ID : SB22.4527

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

9000.00

9000.00