Image# 14961568806 PAGE 1 / 14

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									Office Us	se Only	_
1.	NAME OF COMMITTEE		TYPE OR F	PRINT ▼		mple: If typi r the lines.	ng, type	12FE4	M5		
R	Renaissanc	e Health Se	ervice C	orporation	Political	Action C	ommittee	1 1 1	1 1 1 1		I
_											
				222							
AD	DRESS (numbe	er and street)	P.O. Box	293							
r		different									
ľ	than pre- reported.		Okemos					MI	48864		
2.	FEC IDENTI	FICATION NU	JMBER ▼		CITY		S	STATE A		ZIP COI	DE 🛦
	C C0045	50288		3.	IS THIS REPORT		NEW N) OR		AMENDED (A)		
4.	TYPE OF F (Choose One)	(a) Quarterly Reports: April 15 Quarterly Report (Q1)		ort	eb 20 (M2)		May 20 (M5)		Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly			On:	Mar 20 (M3)		Jun 20 (M6)		Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April			A	pr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
	Qua			12-Day		Primary (12F	P)	Gene	eral (12G)		Runoff (12R)
	X July Qua	rterly Report (Q	(2)	PRE-Election Report for the:	П	Convention ((12C)	Spec	ial (12S)		
		bber 15 rterly Report (Q	3)								
	Janu Year	uary 31 r-End Report (Y	E)	Elec	ction on	M = M /	D D /	Y	Y	in the State of	
	Rep	31 Mid-Year ort (Non-election Only) (MY)	n (d)	30-Day POST-Election		General (300	G)	Runc	off (30R)		Special (30S)
	Term (TEF	nination Report		Report for the		M M /	D = D /	Y . Y . Y	Y	in the	
	(12)	')		Elec	ction on					State of	
5.	Covering Peri	od 04	M / D 01	2014	4	through	M M M	30	20	14	
l ce	ertify that I hav	e examined thi	is Report a	nd to the best	of my kno	wledge and	belief it is true	e, correct	and comple	te.	
	e or Print Nam		-						<u> </u>		
								M	M / D	D /	Y Y Y Y Y
Sig	nature of Treas	surer Richa	ard Lantz			[Electronicall	y Filed] Da	ate 0	7 14	[2014
NO	TE: Submission	of false, errone	eous, or inco	omplete informa	tion may su	bject the per	son signing th	is Report	to the penalti	es of 2 L	J.S.C. §437g.
	Office Use					-			FEC	FOR	M 3X
	_ Only									lev. 12/20	004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

Renaissance Health Service Corporation Political Action Committee

2014 30 Report Covering the Period: 2014 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 74442.59 January 1, 2014 (b) Cash on Hand at 73949.92 Beginning of Reporting Period..... 8764.18 8756.85 (c) Total Receipts (from Line 19)

6(a) and 6(c) for Column B)	82706.77	

- - 72706.77

83206.77

9. Debts and Obligations Owed **TO**the Committee (Itemize all on
Schedule C and/or Schedule D)

(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines

- 0.00
- Debts and Obligations Owed BY
 the Committee (Itemize all on Schedule C and/or Schedule D)

					0.00	
 -	7	 	7	 		

×

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

Renaissance Health Service Corporation Political Action Committee

I. Receipts	I. Receipts COLUMN A					
<u> </u>	Total This Period	Calendar Year-to-Date				
Contributions (other than loans) From:						
(a) Individuals/Persons Other						
Than Political Committees	6300.00	6300.00				
(i) Itemized (use Schedule A)	0000.00	7				
(ii) Unitermined	1400.00	1400.00				
(ii) Unitemized(iii) TOTAL (add	1400.00	1400.00				
Lines 11(a)(i) and (ii)	7700.00	7700.00				
Lines IT(a)(i) and (ii)	7700.00	1700.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees						
(such as PACs)	0.00	0.00				
(d) Total Contributions (add Lines	7	7				
11(a)(iii), (b), and (c)) (Carry						
Totals to Line 33, page 5)	7700.00	7700.00				
2. Transfers From Affiliated/Other						
Party Committees	0.00	0.00				
,						
3. All Loans Received	0.00	0.00				
_						
4. Loan Repayments Received	0.00	0.00				
5. Offsets To Operating Expenditures	5.00	0.00				
(Refunds, Rebates, etc.)						
(Carry Totals to Line 37, page 5)	0.00	0.00				
6. Refunds of Contributions Made		0.00				
to Federal Candidates and Other						
Political Committees	1050.00	1050.00				
7. Other Federal Receipts	1000.00	7				
(Dividends, Interest, etc.)	6.85	14.18				
Transfers from Non-Federal and Levin Funds	0.03	14.10				
(a) Non-Federal Account						
(from Schedule H3)	0.00	0.00				
(110111 0011000010 110)		, , , , , ,				
(1) I = 1 = F = 1 = ((= = 0 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	0.00	0.00				
(b) Levin Funds (from Schedule H5)	0.00	0.00				
(a) Total Transfers (add 19(a) and 19(b))	0.00	2.22				
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
 (b) Levin Funds (from Schedule H5)	0.00 0.00 8756.85					
_						
D. Total Federal Receipts						
(subtract Line 18(c) from Line 19)▶	8756.85	8764.18				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period					
	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date				
	(i) Federal Share	0.00	0.00				
	(ii) Non-Federal Share	0.00	0.00				
	(b) Other Federal Operating						
	Expenditures	0.00	0.00				
	(c) Total Operating Expenditures	0.00	0.00				
2	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	0.00	0.00				
	Committees	0.00	0.00				
	Contributions to Federal Candidates/Committees and Other Political Committees	9200.00	9200.00				
	Independent Expenditures	7 02000	3200.00				
	(use Schedule E)	0.00	0.00				
5.	Coordinated Party Expenditures (2 U.S.C. §441a(d))	0.00					
	(use Schedule F)	0.00	0.00				
6.	Loan Repayments Made	0.00	0.00				
_	M . I.	0.00	0.00				
8.	Loans Made Refunds of Contributions To:	0.00	0.00				
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00				
		, , , , , , , , , , , , , , , , , , , ,					
	(b) Political Party Committees	0.00	0.00				
	(c) Other Political Committees (such as PACs)	0.00	0.00				
	(646) 46 17(66)						
	(d) Total Contribution Refunds	0.00					
	(add Lines 28(a), (b), and (c))▶	0.00	0.00				
9.	Other Disbursements	800.00	1300.00				
_							
	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity						
	(from Schedule H6)						
	(i) Federal Share	0.00	0.00				
	(**) III - : II OI - :	0.00	0.00				
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00					
	With Federal Funds	0.00	0.00				
	(c) Total Federal Election Activity (add	0.00					
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00				
1.	Total Disbursements (add Lines 21(c), 22,						
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	10000.00	10500.00				
	T. 5						
	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)						
	from Line 31)	10000.00	10500.00				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures						
3. Total Contributions (other than loans) (from Line 11(d), page 3)	7700.00	7700.00				
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7700.00	7700.00				
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00				
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00				
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00				

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

FOR LINE NUMBER:						PAGE	=	6	OF	14
	(ch	eck only								
	>	1 1a		11b		11c		12	2	
		13		14		15		16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Last, First, Middle Initial) Joseph Pinto DDS Mailing Address 46830 Danbridge		Date of Receipt
City	State Zip Code	05 14 2014
Plymouth	MI 48170-3013	Transaction ID : 21873285 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Retired	Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Todd Ester	'	Date of Receipt
Mailing Address 1792 Liberty Street North		M = M / D = D / Y = Y = Y
City	State Zip Code	05 14 2014
Canton	MI 48188-8003	Transaction ID : 21873286
	10.100 0000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Dr. Todd Ester, D.D.S.	Endodontist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)		
Jack Baker		Date of Receipt
Mailing Address 134 Airport Road City	State Zip Code	05 14 2014
Waterford	MI 48327-1701	Transaction ID : 21873289 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
St. Perpetua Parish	Pastor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	

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

FOR LINE NUMBER:						PAGE		7	OF		14
(check only one)											
[X	11a		11b		11c		12	2		
		13		14		15		16	6		17

	the name and address of any political committee	
NAME OF COMMITTEE (In Full)	Comparation Delta LA at Comparation	4
Kenaissance Health Service	Corporation Political Action Commi	ee
Full Name (Last, First, Middle Initial) 1. Thomas J Gant DDS		Date of Receipt
Mailing Address 41201 Little Dr.		05 14 2014
City	State Zip Code	Transaction ID : 21873291
Clinton Twp	MI 48036-1411	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
Retired	Dentist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Laura O. Stearns		Date of Receipt
Mailing Address 5154 Sapphire Circle		05 14 _ 2014 _
City	State Zip Code	Transaction ID : 21873292
East Lansing	MI 48823-7266	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	500.00
Name of Employer	Occupation	-
Michigan Catholic Conference	Vice President of Service Org.	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	00 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Kerry M Kaysserian DDS		Date of Receipt
Mailing Address 4391 Silver Valley Lane		05 26 2014
City	State Zip Code	Transaction ID : 21873293
Traverse City	MI 49684-8796	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
Self-employed	Dentist	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify) ▼	500.00	
		1500.00
SUBTOTAL of Receipts This Page (optional)	>	1500.00
TOTAL This Period (last page this line numb	per only)	

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

FOR LINE NUMBER:						PAGE		8	OF		14	
(check only one)												
	[X	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) Renaissance Health Service (Corporation Political Action Committ	tee
Full Name (Last, First, Middle Initial) A. Beach Hall		Date of Receipt
Mailing Address 264 South Lake St.		05 23 2014
City	State Zip Code	Transaction ID : 21873295
Rogers City	MI 49779-1714	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Retired	Benefits Manager	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. Wilbert C Fletke DDS, MS		Date of Receipt
Mailing Address 130 Brookside Dr.		05 26 2014
City	State Zip Code	Transaction ID: 21873299
Lansing	MI 48917	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
Retired	Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) James P. Hallan		Date of Receipt
Mailing Address 2490 Overglen Ct.		05 25 2014
City	State Zip Code	Transaction ID : 21873301
East Lansing	MI 48823-9475	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
MI Retailers Association	President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1050.00
TOTAL This Period (last page this line numb	er only)	7 1 7

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

FOR LINE	LINE NUMBER: PAGE			14		
(check only one)						
X 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 t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Renaissance Health Service C	Corporation Political Action Committ	ee
Full Name (Last, First, Middle Initial) A. Arthur D Even Jr. DDS, MS		Date of Receipt
Mailing Address 5711 Livernois Rd.	05 14 2014	
City Rochester	State Zip Code MI 48306-2537	Transaction ID : 21873302 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Retired Receipt For:	Occupation Dentist	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) 3. John Breza D.D.S. Mailing Address 52539 Southdown		Date of Receipt
City Shelby Township	State Zip Code MI 48316-3458	05 15 2014 Transaction ID : 21873303 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer John A Breza, D.D.S.	Occupation Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Cynthia Williams		Date of Receipt
Mailing Address 844 Pebblebrook Lane		05 14 2014 _
City East Lansing	State Zip Code MI 48823-2164	Transaction ID : 21873304 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Michigan Education Special Services As Receipt For: Primary General Other (specify) ▼	Occupation Executive Director Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional).		1250.00
TOTAL This Period (last page this line number	er only)	

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

FOR LINE NUMBER:					PAGE	. 1	10	OF		14	
(c	(check only one)										
	X	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.

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Renaissance Health Service	Corporation Political Action Commit	tee
Full Name (Last, First, Middle Initial) John R. Cook DDS Mailing Address 3600 Scenic Woods Circle	Date of Receipt	
City	05 15 2014 Transaction ID : 21873305	
Muskegon	MI 49445-8844	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
Self-employed Receipt For:	Dentist	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Lawrence D Crawford DDS		Date of Receipt
Mailing Address 3726 Rosewood Lane	05 14 2014	
City Rochester Hills	State Zip Code MI 48309-1079	Transaction ID : 21873306
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer DBM Technologies	Occupation President & CEO	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	-	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	ı) >	1000.00
TOTAL This Period (last page this line num	ber only)	6300.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 14 (check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any p	
NAME OF COMMITTEE (In Full) Renaissance Health Service Co	orporation Political Action Comm	nittee
Full Name (Last, First, Middle Initial) Dave Camp For Congress Mailing Address 5915 Eastman Avenue Suite 100 City Midland FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2014 Primary Other (specify) Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)	State Zip Code MI 48640 C C00347476 Occupation Aggregate Year-to-Date ▼	Date of Receipt O5 01 2014 Transaction ID: 21739613 Amount of Each Receipt this Period 1050.00 Refund of 6/13/13 contribution for 2014 General Election
Mailing Address City	State Zip Code	M = M / D = D / Y = Y = Y
FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	C Occupation Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
City FEC ID number of contributing federal political committee. Name of Employer Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code C Occupation Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		1050.00

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

1050.00

SCHEDULE B (FEC Form 3X)		FOR LINE N	JUMBER: PAGE 12 OF 14					
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only						
	for each category of the Detailed Summary Page	21b	22 🗙 23 🔲 24 🔲 25 🔲 26					
	, ,	27	28a 28b 28c 29 30b					
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or use e and address of any politica	d by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
Renaissance Health Service Corpo	ration Political Action	n Committe	90					
Full Name (Last, First, Middle Initial)								
A. Debbie Dingell For Congress			Date of Disbursement					
Mailing Address PO Box 746			04 24 2014					
City	State Zip Code		Transaction ID : 21703798					
Dearborn	MI 48121		Transaction ib . 21703730					
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	2500.00					
Debbie Dingell		Туре	200.00					
Senate	nent For: 2014 Primary General Other (specify)		Contribution					
State: MI District: 12								
Full Name (Last, First, Middle Initial)								
B. Mike Bishop for Congress			Date of Disbursement					
Mailing Address P.O. Box 1148			05 08 2014					
Brighton	State Zip Code MI 48816		Transaction ID: 21754406					
Purpose of Disbursement Contrbution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	500.00					
Michael Bishop		Type	500.00					
Senate	nent For: 2014 Primary General Other (specify)		Contrbution					
Full Name (Last, First, Middle Initial)								
C. John Moolenaar for Congress			Date of Disbursement					
Mailing Address P.O. Box 2192			05 08 2014					
City S Midland	State Zip Code MI 48640		Transaction ID: 21754407					
Purpose of Disbursement Contribution		011						
Candidate Name			Amount of Each Disbursement this Period					
John Moolenaar		Category/ Type	500.00					
Office Sought: House Disbursen	nent For: 2014							
President	Primary General Other (specify) ▼		Contribution					
State: MI District: 04								
SUBTOTAL of Disbursements This Page (optional)		······ <u>▶</u>	3500.00					
TOTAL This Period (last page this line number only)	TOTAL This Period (last page this line number only)							

ľ

SCHEDULE B (FEC Form 3X)				FOR LINE	NUMBER:	13 ()F 14		
IT	EMIZED DISBURSEMENTS		parate schedule(s) category of the	(check only one)			7.55		
			Summary Page	21b	22 28a	X 23 28b	24 28c	25 29	26 30b
Λ.	by information copied from such Departs and Chite	l nonto mo::	not be sold as						
or	ny information copied from such Reports and Statem for commercial purposes, other than using the name	ie and add	dress of any politic	al committee to	solicit co	ntributions f	from such	committ	ee.
	NAME OF COMMITTEE (In Full)	, •		•					
	Renaissance Health Service Corpo	ration l	Political Action	on Committ	ee				
^	Full Name (Last, First, Middle Initial)				D-4:	Diabore			
Α.	Tiberi For Congress					f Disbursem		V 1-	
	Mailing Address 2931 E Dublin Granville Road				05	22		2014	Y
	Suite 190								
	,	State OH	Zip Code		Trans	action ID :	21770905		
	Columbus Purpose of Disbursement	ОП	43231						
	Contribution			011	Amoun	t of Each D	isburseme	nt this F	Period
	Candidate Name			Category/				1200	00
	Rep. Patrick Tiberi	=		Type		7		1200	.00
		nent For: Primary	2014 General		01-1	ution.			
		Other (spe			Contrib	ution			
	State: OH District: 12	(-1-	▼						
	Full Name (Last, First, Middle Initial)								
В.	Peters for Michigan				Date of Disbursement				
	Mailing Address D.O. Boy 2006				06	/ D D D		7	Y
	Mailing Address P.O. Box 2226	06 26 2014							
	City S Bloomfield Hills	State MI	Zip Code 48303		Trans	saction ID :	21831787		
	Purpose of Disbursement		40003						
	Contribution			011	Amoun	t of Each D	isburseme	nt this F	Period
	Candidate Name			Category/				2500	0.00
	Gary Peters Office Sought: House Disbursen	nent For	2014	Туре				2000	
		Primary	2014 General	General Contribution					
		Other (spe			CONTRIB	นแบบ			
_	State: MI District:		· 						
_	Full Name (Last, First, Middle Initial)								
C.	O2				Date of	f Disbursem			
	Mailing Address 3687 West Market Street, Ste 289					06 27 2014			
					- 55				
	,	State	Zip Code		Trans	saction ID :	21832960		
	Akron Purpose of Disbursement	OH	44333			· · · · · · · · · · · · · · · · · · ·			
	Contribution 011				Amoun	t of Each D)ishursama	nt thie [Period
	Candidate Name			Category/	Amount of Each Disbursement this				-
				Type				2000	.00
	Office Sought: House Disbursen								
		Primary Other (spe	General		Contribution				
	State: District:	Other (spe	ecity) 🔻						
								-	-
s	SUBTOTAL of Disbursements This Page (optional)			·····•				5700	.00
\vdash	·							0202	00
1	OTAL This Period (last page this line number only)							9200	.00

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S	CHEDULE B (FEC Form 3X)			NUMBER:	PAGE 14 OF 14		
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	le(s) (check only one)			
			Summary Page	21b 27	22 23 28a 28		
Δ	ry information copied from such Reports and Staten	l nonte mass	not he cold or				
or	for commercial purposes, other than using the name	ne and addi	ress of any politic	cal committee to	solicit contributio	ons from such committee.	
\setminus	NAME OF COMMITTEE (In Full)						
	Renaissance Health Service Corpo	ration F	Political Action	on Committ	ee 		
^	Full Name (Last, First, Middle Initial)				Dota of Dist	rooment	
Α.	Citizens for Stinziano	Date of Disbu	rsement				
	Mailing Address 550 E. Walnut St.	Address 550 E. Walnut St.					
	City	State	Zip Code		Transaction	ID : 21770896	
	Columbus Purpose of Disbursement	ОН	43215		าาสการสนิเปปิโ	ID . ETT 10030	
	Purpose of Disbursement Contribution			011	Amount of Ea	ch Disbursement this Period	
	Candidate Name			Category/		250.00	
	OH Rep. Michael Stinziano			Type	7	250.00	
	President	nent For: Primary Other (spe	General General		Contribution		
_	State: District:						
В.	Full Name (Last, First, Middle Initial) Citizens for Bishoff				Date of Disbu	rsement	
	Mailing Address 2902 Braden Way		05 22 / 2014				
	Blacklick	State OH	Zip Code 43004		Transaction	ID : 21770903	
	Purpose of Disbursement Contribution			011	Amount of Ea	ch Disbursement this Period	
	Candidate Name OH Rep. Heather Bishoff			Category/		250.00	
	Office Sought: House Disbursen	nent For:		Туре	1		
	Senate	Primary Other (spec	General cify) ▼		Contribution		
_	Full Name (Last, First, Middle Initial)						
C.	Commitee to Elect Lynn Wachtman	nn			Date of Disbursement		
	Mailing Address 550 Euclid Ave.				05	222014	
	Napolean	State OH	Zip Code 43545		Transaction	ID : 21770904	
	Purpose of Disbursement Contribution			011	A	ah Diahumanant this Dod 1	
	Candidate Name			Category/	Amount of Ea	ch Disbursement this Period	
	OH Rep. Lynn Wachtmann					300.00	
	President	nent For: Primary Other (spe	General cify) ▼		Contribution		
	State: District:						
s	UBTOTAL of Disbursements This Page (optional)			······		800.00	
Т	OTAL This Period (last page this line number only)			·····		800.00	