

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Conyers for Congress

ADDRESS (number and street)

PO Box 70980

Check if different than previously reported. (ACC)

Washington

DC

20024

2. FEC IDENTIFICATION NUMBER ▼

C C00409797

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MI

13

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)

Termination Report (TER)

(b) 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

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Michael Remington

Signature of Treasurer Michael Remington

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Conyers for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	60854.00	395098.12
(b) Total Contribution Refunds (from Line 20(d))	0.00	-1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	60854.00	396098.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	63308.54	280577.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	65.50	3128.52
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	63243.04	277449.10
8. Cash on Hand at Close of Reporting Period (from Line 27).....	112002.62	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 3 (Revised 12/2003)

Write or Type Committee Name

Conyers for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8220.00	77271.34
(ii) Unitemized.....	2134.00	9826.78
(iii) TOTAL of contributions from individuals ▶	10354.00	87098.12
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	50500.00	308000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	60854.00	395098.12
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	65.50	3128.52
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1.69	5557.60
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	60921.19	403784.24

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	63308.54	280577.62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	-1000.00
(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 20(a), (b), and (c)).....	0.00	-1000.00
21. OTHER DISBURSEMENTS	1920.08	100225.96
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	65228.62	379803.58

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	116310.05
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	60921.19
25. SUBTOTAL (add Line 23 and Line 24).....	177231.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	65228.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	112002.62

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 80
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
Joseph J DiMona

Mailing Address 9 Riverview Pl

City State Zip Code
Hastings-on-Hudson NY 10706-1006

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

Name of Employer Occupation
BMI Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : C9654828

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Harvey Fernbach

Mailing Address 8600 Split Oak Cir

City State Zip Code
Bethesda MD 20817-6934

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : C9564414

Amount of Each Receipt this Period
60.00

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

Mailing Address 8600 Split Oak Cir

City State Zip Code
Bethesda MD 20817-6934

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : C9571506

Amount of Each Receipt this Period
50.00

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

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

210.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 80
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
James Alexander French

Mailing Address 7508 Glendale Rd

City State Zip Code
Chevy Chase MD 20815-4912

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

Name of Employer Occupation
Thorsen French Advocacy Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 24 / 2014

Transaction ID : C9574167

Amount of Each Receipt this Period
1700.00

B. Full Name (Last, First, Middle Initial)
Daryl Friedman

Mailing Address 44157 Tippecanoe Ter

City State Zip Code
Ashburn VA 20147-4917

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

Name of Employer Occupation
Recording Academy Chief Advocacy Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : C9661532

Amount of Each Receipt this Period
250.00

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

Mailing Address 7313 Durbin Ter

City State Zip Code
Bethesda MD 20817-6127

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

Name of Employer Occupation
Recording Industry Association of Amer Senior Executive Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : C9574180

Amount of Each Receipt this Period
500.00

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

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

2450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 80
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
Marla Grossman

Mailing Address 7546 Hampden Ln

City State Zip Code
Bethesda MD 20814-1332

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : C9557220

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Michael J Huppe

Mailing Address 6012 Woodland Ter

City State Zip Code
Mc Lean VA 22101-4224

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

Name of Employer Occupation
SoundExchange Inc General Counsel

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 25 / 2014

Transaction ID : C9574172

Amount of Each Receipt this Period
1000.00

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

Mailing Address 514 Janneys Ln

City State Zip Code
Alexandria VA 22302-4004

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

Name of Employer Occupation
LMG Inc Chief Operating Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 25 / 2014

Transaction ID : C9574173

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 80
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
Steven Marks

Mailing Address 8937 Holly Leaf Ln

City State Zip Code
Bethesda MD 20817-2654

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

Name of Employer Occupation
Recording Industry Ass'n of America Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 30 / 2014

Transaction ID : C9557007

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Cary H. Sherman

Mailing Address 9125 Vendome Dr

City State Zip Code
Bethesda MD 20817-4022

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

Name of Employer Occupation
Recording Industry Assoc of America Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 19 / 2014

Transaction ID : C9546395

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Diane Phillips Woodward Frost

Mailing Address 7441 S Winston Ave

City State Zip Code
Tulsa OK 74136-6119

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 26 / 2014

Transaction ID : C9550159

Amount of Each Receipt this Period
50.00

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

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

2050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 80
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
Agnes Woolsey

Mailing Address 10950 Paleta Dr

City Mendocino State CA Zip Code 95460

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **295.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 25 / 2014

Transaction ID : C9550130

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Jack H. Olender

Mailing Address 2500 Virginia Ave NW
#1203 South Watergate East

City Washington State DC Zip Code 20037-1900

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 07 / 2014

Transaction ID : C9651205A

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **983.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 18 / 2014

Transaction ID : C9651205AB

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

510.00

8220.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 Massachusetts Ave NW
FI 8

City Washington State DC Zip Code 20036-2212

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : C9663858

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF TEACHERS, AFL-CIO COMMITTEE ON POLITICAL EDUCATION

Mailing Address 555 NEW JERSEY AVENUE, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : C9663848

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
American Nurses Association PAC

Mailing Address 8515 Georgia Ave
Ste 400

City Silver Spring State MD Zip Code 20910-3492

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : C9663857

Amount of Each Receipt this Period
1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 NORTH FAIRFAX ST.

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : C9651187

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

Mailing Address 101 Constitution Ave NW
Tenth Floor West

City State Zip Code
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9664675

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
COX ENTERPRISES PAC (COXPAC) INC.

Mailing Address 975 F St NW
Ste 300

City State Zip Code
Washington DC 20004-1459

FEC ID number of contributing federal political committee. **C** C00477653

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : C9651182

Amount of Each Receipt this Period
500.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
COX ENTERPRISES PAC (COXPAC) INC.

Mailing Address 975 F St NW
Ste 300

City Washington State DC Zip Code 20004-1459

FEC ID number of contributing federal political committee. **C C00477653**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 11 / 2014

Transaction ID : C9651183

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
DTE ENERGY CO. PAC - FEDERAL

Mailing Address ONE ENERGY PLAZA
ROOM 1583 WCB

City Detroit State MI Zip Code 48226-1203

FEC ID number of contributing federal political committee. **C C00081547**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 14 / 2014

Transaction ID : C9651184

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
FORD MOTOR COMPANY CIVIC ACTION FUND

Mailing Address PO Box 75000
Svs MC2250

City Detroit State MI Zip Code 48275-0001

FEC ID number of contributing federal political committee. **C C00046474**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : C9664677

Amount of Each Receipt this Period
1000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
FRATERNITY AND SORORITY POLITICAL ACTION COMMITTEE

Mailing Address PO Box 3435

City Alexandria State VA Zip Code 22302-0435

FEC ID number of contributing federal political committee. **C** C00410068

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : C9663859

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
GREENBERG TRAURIG P.A. PAC

Mailing Address 54 State St
Fl 6

City Albany State NY Zip Code 12207-2510

FEC ID number of contributing federal political committee. **C** C00266585

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : C9634973

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
INTL ASSOC OF BRIDGE STRUC ORN & REINF IRON WRKRS

Mailing Address 1750 New York Ave NW
Ste 400

City Washington State DC Zip Code 20006-5315

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 09 / 2014

Transaction ID : C9547309

Amount of Each Receipt this Period
 2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 80
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
LOWE'S COMPANIES, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1000 Lowes Blvd

City Mooresville State NC Zip Code 28117-8520

FEC ID number of contributing federal political committee. **C** C00251751

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : C9651185

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)

Mailing Address PO Box 75000 # MC2250

City Detroit State MI Zip Code 48275-0001

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 27 / 2014

Transaction ID : C9574168

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
MICHIGAN SUGAR COMPANY GROWERS POLITICAL ACTION COMMITTEE

Mailing Address 2600 S Euclid Ave

City Bay City State MI Zip Code 48706-3414

FEC ID number of contributing federal political committee. **C** C00384354

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 12 / 2014

Transaction ID : C9663815

Amount of Each Receipt this Period
 1500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
Microsoft Corp Political Action Committee

Mailing Address 16011 NE 36th Way
97017

City State Zip Code
Redmond WA 98052-6301

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : C9663846

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
MOTION PICTURE ASSOCIATION OF AMERICA INC PAC

Mailing Address 1600 I St NW

City State Zip Code
Washington DC 20006-4010

FEC ID number of contributing federal political committee. **C** C00139519

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2014

Transaction ID : C9574169

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
MOTOR CITY PAC

Mailing Address 600 PENNSYLVANIA AVE SE
STE 210

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00507574

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2014

Transaction ID : C9663845

Amount of Each Receipt this Period
1000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
National Association of Convenience Stores PAC

Mailing Address 1600 Duke St

City Alexandria State VA Zip Code 22314-3466

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : C9651186

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
NATIONAL MUSIC PUBLISHERS ASSOCIATION INC PAC (NMPAC)

Mailing Address 975 F St NW
Ste 375

City Washington State DC Zip Code 20004-1410

FEC ID number of contributing federal political committee. **C** C00412619

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 25 / 2014

Transaction ID : C9574170

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN & PUBLIC EDUCATION

Mailing Address 1201 16th St NW
Ste 420

City Washington State DC Zip Code 20036-3201

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9664678

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
RECORDING INDUSTRY ASSOC of AMERICA INC PAC

Mailing Address 1025 F St NW
FI 10

City Washington State DC Zip Code 20004-1433

FEC ID number of contributing federal political committee. **C C00009357**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : C9574178

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
REED ELSEVIER INC PAC

Mailing Address 1150 18th St NW
Ste 600

City Washington State DC Zip Code 20036-3843

FEC ID number of contributing federal political committee. **C C00345793**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9664679

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
T-MOBILE USA INC. PAC

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 800 NORTH BLDG

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00361758**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 26 / 2014

Transaction ID : C9574171

Amount of Each Receipt this Period
2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
UAW - V - CAP (UAW VOLUN COMMUNITY ACTION PROGRAM)

Mailing Address 8000 E Jefferson Ave

City State Zip Code
Detroit MI 48214-3963

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9664674

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
UNIVERSAL MUSIC GROUP PAC

Mailing Address 2220 Colorado Ave

City State Zip Code
Santa Monica CA 90404-3506

FEC ID number of contributing federal political committee. **C** C00392464

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 24 / 2014

Transaction ID : C9574165

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
VIACOM INTERNATIONAL INC PAC

Mailing Address 1501 M St NW
Ste 1100

City State Zip Code
Washington DC 20005-1729

FEC ID number of contributing federal political committee. **C** C00167759

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : C9574179

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 19 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Full Name (Last, First, Middle Initial)
WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8th St
 City Bentonville State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9663860

Amount of Each Receipt this Period
 3000.00

B. Full Name (Last, First, Middle Initial)
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)
 Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
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)
 Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

3000.00

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

50500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address PO Box 609		Transaction ID : C9547321
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 3.00	
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address PO Box 609		Transaction ID : C9547323
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 3.00	
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address PO Box 609		Transaction ID : C9547324
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 3.00	
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

SUBTOTAL of Receipts This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address PO Box 609		Transaction ID : C9547325
City Pittsburgh	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2.50
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address PO Box 609		Transaction ID : C9574181
City Pittsburgh	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address PO Box 609		Transaction ID : C9574182
City Pittsburgh	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

SUBTOTAL of Receipts This Page (optional).....	8.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 28 / 2014
Mailing Address PO Box 609		Transaction ID : C9574183
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 31 / 2014
Mailing Address PO Box 609		Transaction ID : C9574184
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 03 / 2014
Mailing Address PO Box 609		Transaction ID : C9623078
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

SUBTOTAL of Receipts This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 05 / 2014
Mailing Address PO Box 609		Transaction ID : C9623077
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 10 / 2014
Mailing Address PO Box 609		Transaction ID : C9623076
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 18 / 2014
Mailing Address PO Box 609		Transaction ID : C9623054
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

SUBTOTAL of Receipts This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 609		Transaction ID : C9623043
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 609		Transaction ID : C9623046
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 03 / 2014
Mailing Address PO Box 609		Transaction ID : C9651175
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

SUBTOTAL of Receipts This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 07 / 2014
Mailing Address PO Box 609		Transaction ID : C9651176
City Pittsburgh	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 17 / 2014
Mailing Address PO Box 609		Transaction ID : C9651177
City Pittsburgh	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 17 / 2014
Mailing Address PO Box 609		Transaction ID : C9651178
City Pittsburgh	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

SUBTOTAL of Receipts This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 19 / 2014
Mailing Address PO Box 609		Transaction ID : C9664836
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 21 / 2014
Mailing Address PO Box 609		Transaction ID : C9664837
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 24 / 2014
Mailing Address PO Box 609		Transaction ID : C9664838
City Pittsburgh	State Zip Code PA 15230-0609	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

SUBTOTAL of Receipts This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2014
Mailing Address PO Box 609		Transaction ID : C9664840
City Pittsburgh	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.00
Name of Employer	Occupation	Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	3.00
TOTAL This Period (last page this line number only).....	65.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address PO Box 609		Transaction ID : C9634949
City Pittsburgh	State PA	Zip Code 15230-0609
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 0.58	
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address PO Box 609		Transaction ID : C9623018
City Pittsburgh	State PA	Zip Code 15230-0609
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 0.53	
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 609		Transaction ID : C9664666
City Pittsburgh	State PA	Zip Code 15230-0609
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 0.58	
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 234.04	

SUBTOTAL of Receipts This Page (optional).....	1.69
TOTAL This Period (last page this line number only).....	1.69

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. AFSCME Council 25 Building			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 1034 N. Washington Avenue			Amount of Each Disbursement this Period 1300.00 Transaction ID : D518558
City Lansing	State MI	Zip Code 48906	
Purpose of Disbursement Rent	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. AFSCME Council 25 Building			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 1034 N. Washington Avenue			Amount of Each Disbursement this Period 1300.00 Transaction ID : D520317
City Lansing	State MI	Zip Code 48906	
Purpose of Disbursement Rent	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. AFSCME Council 25 Building			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 1034 N. Washington Avenue			Amount of Each Disbursement this Period 1309.00 Transaction ID : D520996
City Lansing	State MI	Zip Code 48906	
Purpose of Disbursement Rent	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	3909.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. AFSCME Council 25 Building		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 1034 N. Washington Avenue		Amount of Each Disbursement this Period 1309.00 Transaction ID : D522504
City Lansing State MI Zip Code 48906	Purpose of Disbursement Rent	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Alexandria Pastry Shop		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 3690 King St # H		Amount of Each Disbursement this Period 198.10 Transaction ID : D520334
City Alexandria State VA Zip Code 22302-1921	Purpose of Disbursement Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address PO Box 297812		Amount of Each Disbursement this Period 2.28 Transaction ID : D518569
City Fort Lauderdale State FL Zip Code 33329-7812	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1509.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address PO Box 297812		Amount of Each Disbursement this Period 65.66 Transaction ID : D522039
City Fort Lauderdale	State FL	
Zip Code 33329-7812	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address PO Box 297812		Amount of Each Disbursement this Period 1.47 Transaction ID : D521044
City Fort Lauderdale	State FL	
Zip Code 33329-7812	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address Bill Payment Ctr		Amount of Each Disbursement this Period 100.00 Transaction ID : D522041
City Saginaw	State MI	
Zip Code 48663-0001	Purpose of Disbursement Telephone Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	167.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address Bill Payment Ctr		Amount of Each Disbursement this Period 112.00 Transaction ID : D522628
City Saginaw	State MI	
Purpose of Disbursement Telephone Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Best Messenger Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 1513 P St NW # 200		Amount of Each Disbursement this Period 25.38 Transaction ID : D522037
City Washington	State DC	
Purpose of Disbursement Delivery Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Best Messenger Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 1513 P St NW # 200		Amount of Each Disbursement this Period 14.81 Transaction ID : D522038
City Washington	State DC	
Purpose of Disbursement Delivery Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	152.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Best Messenger Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 1513 P St NW # 200		Amount of Each Disbursement this Period 12.69
City Washington State DC Zip Code 20005-1909	Purpose of Disbursement Delivery Services	
Candidate Name	Category/Type	Transaction ID : D518570
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Best Messenger Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 1513 P St NW # 200		Amount of Each Disbursement this Period 12.69
City Washington State DC Zip Code 20005-1909	Purpose of Disbursement Delivery Services	
Candidate Name	Category/Type	Transaction ID : D520345
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Best Messenger Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1513 P St NW # 200		Amount of Each Disbursement this Period 14.81
City Washington State DC Zip Code 20005-1909	Purpose of Disbursement Delivery Services	
Candidate Name	Category/Type	Transaction ID : D522631
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	40.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. BP Gas		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 4101 Winfield Rd		Amount of Each Disbursement this Period 55.00
City Warrenville	State IL	
Zip Code 60555-3521	Purpose of Disbursement Travel	Transaction ID : D521052
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Brand Law Group, PC		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 923 15th St NW		Amount of Each Disbursement this Period 388.18
City Washington	State DC	
Zip Code 20005-2301	Purpose of Disbursement Legal Services	Transaction ID : D522032
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Byron's Flowers		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 11851 Woodward Ave		Amount of Each Disbursement this Period 50.88
City Highland Park	State MI	
Zip Code 48203	Purpose of Disbursement Flowers	Transaction ID : D520346
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	494.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. CATO		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 1st & C St NE # B24		Amount of Each Disbursement this Period 30.00
City Washington	State DC	
Zip Code 20510-0001	Purpose of Disbursement Travel	Transaction ID : D518578
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cranbrook Kingswood School - Yearbook		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 39221 Woodward Ave		Amount of Each Disbursement this Period 225.00
City Bloomfield Hills	State MI	
Zip Code 48304	Purpose of Disbursement Advertising	Transaction ID : D522027
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Delta Air Lines		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 821.00
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Transaction ID : D518577
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1076.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Doubletree			Date of Disbursement MM / DD / YYYY 02 / 26 / 2014		
Mailing Address 525 W Lafayette Blvd			Amount of Each Disbursement this Period 21.61		
City Detroit	State MI	Zip Code 48226-3122	Transaction ID : D521008		
Purpose of Disbursement Meals		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Doubletree			Date of Disbursement MM / DD / YYYY 02 / 10 / 2014		
Mailing Address 525 W Lafayette Blvd			Amount of Each Disbursement this Period 56.20		
City Detroit	State MI	Zip Code 48226-3122	Transaction ID : D521036		
Purpose of Disbursement Meals		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. David Elfin			Date of Disbursement MM / DD / YYYY 03 / 04 / 2014		
Mailing Address 8206 Bryant Dr			Amount of Each Disbursement this Period 1000.00		
City Bethesda	State MD	Zip Code 20817-3135	Transaction ID : D522029		
Purpose of Disbursement Emailing Services		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	1077.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. David Elfin		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 8206 Bryant Dr		Amount of Each Disbursement this Period 600.00 Transaction ID : D520348
City Bethesda	State MD	
Zip Code 20817-3135	Purpose of Disbursement Emailing Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. David Elfin		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 8206 Bryant Dr		Amount of Each Disbursement this Period 800.00 Transaction ID : D518556
City Bethesda	State MD	
Zip Code 20817-3135	Purpose of Disbursement Emailing Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Evans & Katz LLC		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address PO Box 70980		Amount of Each Disbursement this Period 1531.35 Transaction ID : D518557
City Washington	State DC	
Zip Code 20024-0980	Purpose of Disbursement Accounting Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2931.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Evans & Katz LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address PO Box 70980		Amount of Each Disbursement this Period 1450.68 Transaction ID : D520347
City Washington State DC Zip Code 20024-0980	Purpose of Disbursement Accounting Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Evans & Katz LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address PO Box 70980		Amount of Each Disbursement this Period 928.46 Transaction ID : D522502
City Washington State DC Zip Code 20024-0980	Purpose of Disbursement Accounting Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Exxon Mobil		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 5959 Las Colinas Blvd		Amount of Each Disbursement this Period 50.00 Transaction ID : D520331
City Irving State TX Zip Code 75039-4202	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2429.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 80		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Fedex		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 32.70
City Pittsburgh	State PA	
Zip Code 15250-7461	Purpose of Disbursement Shipping	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. Fedex		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 8.89
City Pittsburgh	State PA	
Zip Code 15250-7461	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) c. Hotel St. Regis		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 3071 W Grand Blvd		Amount of Each Disbursement this Period 9.54
City Detroit	State MI	
Zip Code 48202-3004	Purpose of Disbursement Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	51.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 80		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Inland Press		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 2001 W Lafayette Blvd		Amount of Each Disbursement this Period 318.00 Transaction ID : D521021
City Detroit	State MI	
Zip Code 48216-1852	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Inland Press		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 2001 W Lafayette Blvd		Amount of Each Disbursement this Period 159.00 Transaction ID : D521067
City Detroit	State MI	
Zip Code 48216-1852	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Kieloch Consulting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 228 2nd St SE		Amount of Each Disbursement this Period 4000.00 Transaction ID : D522505
City Washington	State DC	
Zip Code 20003-1943	Purpose of Disbursement Fundraising Consulting Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	4477.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Kroger Fuel			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 1014 Vine St			Amount of Each Disbursement this Period 37.61 Transaction ID : D521048
City Cincinnati	State OH	Zip Code 45202-1141	
Purpose of Disbursement Travel		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Kroger Fuel			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 1014 Vine St			Amount of Each Disbursement this Period 32.07 Transaction ID : D521043
City Cincinnati	State OH	Zip Code 45202-1141	
Purpose of Disbursement Travel		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) c. Kroger Fuel			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 1014 Vine St			Amount of Each Disbursement this Period 42.43 Transaction ID : D520328
City Cincinnati	State OH	Zip Code 45202-1141	
Purpose of Disbursement Travel		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	112.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Kroger Fuel			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 1014 Vine St			Amount of Each Disbursement this Period 26.13 Transaction ID : D520329
City Cincinnati	State OH	Zip Code 45202-1141	
Purpose of Disbursement Travel		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Kroger Fuel			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 1014 Vine St			Amount of Each Disbursement this Period 25.56 Transaction ID : D520330
City Cincinnati	State OH	Zip Code 45202-1141	
Purpose of Disbursement Travel		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) c. Kroger Fuel			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 1014 Vine St			Amount of Each Disbursement this Period 20.28 Transaction ID : D518572
City Cincinnati	State OH	Zip Code 45202-1141	
Purpose of Disbursement Travel		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	71.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Kroger Fuel		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 1014 Vine St		Amount of Each Disbursement this Period 48.32
City Cincinnati	State OH Zip Code 45202-1141	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : D518573
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Kroger Fuel		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 1014 Vine St		Amount of Each Disbursement this Period 38.07
City Cincinnati	State OH Zip Code 45202-1141	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : D518574
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Kroger Fuel		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 1014 Vine St		Amount of Each Disbursement this Period 25.50
City Cincinnati	State OH Zip Code 45202-1141	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : D518575
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	111.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Limos 4 Less		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 3513 Kentucky Ave		Amount of Each Disbursement this Period 84.00 Transaction ID : D520338
City Baltimore	State MD Zip Code 21213-1917	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Limos 4 Less		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 3513 Kentucky Ave		Amount of Each Disbursement this Period 60.00 Transaction ID : D521037
City Baltimore	State MD Zip Code 21213-1917	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Marathon Oil		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 5555 San Felipe St		Amount of Each Disbursement this Period 40.00 Transaction ID : D522626
City Houston	State TX Zip Code 77056-2701	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	184.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Millennium Biltmore Hotel		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 506 S Grand Ave		Amount of Each Disbursement this Period 899.10 Transaction ID : D521055
City Los Angeles	State CA	
Zip Code 90071-2602	Purpose of Disbursement Lodging	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Millennium Biltmore Hotel		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 506 S Grand Ave		Amount of Each Disbursement this Period 652.57 Transaction ID : D521056
City Los Angeles	State CA	
Zip Code 90071-2602	Purpose of Disbursement Lodging	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Millennium Biltmore Hotel		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 506 S Grand Ave		Amount of Each Disbursement this Period 606.66 Transaction ID : D521057
City Los Angeles	State CA	
Zip Code 90071-2602	Purpose of Disbursement Lodging	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2158.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Skip Mongo		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 5120 Beaubien St		Amount of Each Disbursement this Period 1500.00 Transaction ID : D522030
City Detroit	State MI	
Zip Code 48202-4107	Purpose of Disbursement Petition Signature Collection Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Skip Mongo		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 5120 Beaubien St		Amount of Each Disbursement this Period 1500.00 Transaction ID : D520352
City Detroit	State MI	
Zip Code 48202-4107	Purpose of Disbursement Petition Signature Collection Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Motor City Soul Food		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 24790 Greenfield Rd		Amount of Each Disbursement this Period 36.46 Transaction ID : D521013
City Oak Park	State MI	
Zip Code 48237-6701	Purpose of Disbursement Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3036.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Motor City Soul Food		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 24790 Greenfield Rd		Amount of Each Disbursement this Period 51.83 Transaction ID : D520333
City Oak Park	State MI	
Purpose of Disbursement Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Motor City Soul Food		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 24790 Greenfield Rd		Amount of Each Disbursement this Period 49.40 Transaction ID : D522627
City Oak Park	State MI	
Purpose of Disbursement Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 10.00 Transaction ID : D522503
City Washington	State DC	
Purpose of Disbursement Membership Dues		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	111.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. National Democratic Club			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 30 Ivy St SE			Amount of Each Disbursement this Period 10.00 Transaction ID : D520316
City Washington	State DC	Zip Code 20003-4006	
Purpose of Disbursement Membership Dues		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. National Democratic Club			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 30 Ivy St SE			Amount of Each Disbursement this Period 500.00 Transaction ID : D520354
City Washington	State DC	Zip Code 20003-4006	
Purpose of Disbursement Membership Dues		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) c. New Blue Interactive LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 4906 Glen Cove Pkwy			Amount of Each Disbursement this Period 2500.00 Transaction ID : D522611
City Bethesda	State MD	Zip Code 20816	
Purpose of Disbursement New Media Strategy Services		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional)	3010.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. New Blue Interactive LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 4906 Glen Cove Pkwy		Amount of Each Disbursement this Period 2500.00 Transaction ID : D522033
City Bethesda	State MD	
Zip Code 20816	Purpose of Disbursement New Media Strategy Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. NGP VAN		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2579.00 Transaction ID : D522034
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement Software Support	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. NGP VAN		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 8700.00 Transaction ID : D522506
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement Software Support	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	13779.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 562.50 Transaction ID : D520994
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software Support	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kelsey Odom		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 228 2nd St SE		Amount of Each Disbursement this Period 225.81 Transaction ID : D520353
City Washington State DC Zip Code 20003-1943	Purpose of Disbursement Reimb. - Travel, Food/Beverage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 28512 Telegraph Rd		Amount of Each Disbursement this Period 64.83 Transaction ID : D520343
City Southfield State MI Zip Code 48034-7505	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	853.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 28512 Telegraph Rd		Amount of Each Disbursement this Period 339.18 Transaction ID : D518579
City Southfield State MI Zip Code 48034-7505	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 28512 Telegraph Rd		Amount of Each Disbursement this Period 136.60 Transaction ID : D518580
City Southfield State MI Zip Code 48034-7505	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 28512 Telegraph Rd		Amount of Each Disbursement this Period 167.92 Transaction ID : D521007
City Southfield State MI Zip Code 48034-7505	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	643.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 32251 John R Rd		Amount of Each Disbursement this Period 107.56 Transaction ID : D518568
City Madison Heights	State MI	
Zip Code 48071-4723	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Perkins Coie		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 1201 3rd Ave FI 40		Amount of Each Disbursement this Period 134.50 Transaction ID : D520315
City Seattle	State WA	
Zip Code 98101-3029	Purpose of Disbursement Legal Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Petty Cash		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 20225 Livernois Ave		Amount of Each Disbursement this Period 80.00 Transaction ID : D520322
City Detroit	State MI	
Zip Code 48221-1283	Purpose of Disbursement Misc. Campaign Expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	322.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Petty Cash		Date of Disbursement
Mailing Address 20225 Livernois Ave		M M / D D / Y Y Y Y 01 / 28 / 2014
City Detroit	State MI	Zip Code 48221-1283
Purpose of Disbursement Misc. Campaign Expenses		Amount of Each Disbursement this Period 100.00
Candidate Name	Category/ Type	Transaction ID : D520323
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Petty Cash		Date of Disbursement
Mailing Address 20225 Livernois Ave		M M / D D / Y Y Y Y 01 / 24 / 2014
City Detroit	State MI	Zip Code 48221-1283
Purpose of Disbursement Misc. Campaign Expenses		Amount of Each Disbursement this Period 100.00
Candidate Name	Category/ Type	Transaction ID : D520324
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Petty Cash		Date of Disbursement
Mailing Address 20225 Livernois Ave		M M / D D / Y Y Y Y 01 / 21 / 2014
City Detroit	State MI	Zip Code 48221-1283
Purpose of Disbursement Misc. Campaign Expenses		Amount of Each Disbursement this Period 100.00
Candidate Name	Category/ Type	Transaction ID : D520325
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" 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 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Petty Cash		Date of Disbursement
Mailing Address 20225 Livernois Ave		M M / D D / Y Y Y Y 01 / 06 / 2014
City Detroit	State MI	Zip Code 48221-1283
Purpose of Disbursement Misc. Campaign Expenses	Candidate Name	Amount of Each Disbursement this Period 60.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : D518564

Full Name (Last, First, Middle Initial) B. Petty Cash		Date of Disbursement
Mailing Address 20225 Livernois Ave		M M / D D / Y Y Y Y 01 / 09 / 2014
City Detroit	State MI	Zip Code 48221-1283
Purpose of Disbursement Misc. Campaign Expenses	Candidate Name	Amount of Each Disbursement this Period 20.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : D518565

Full Name (Last, First, Middle Initial) c. Petty Cash		Date of Disbursement
Mailing Address 20225 Livernois Ave		M M / D D / Y Y Y Y 01 / 10 / 2014
City Detroit	State MI	Zip Code 48221-1283
Purpose of Disbursement Misc. Campaign Expenses	Candidate Name	Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : D518566

SUBTOTAL of Disbursements This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 01 / 13 / 2014

Amount of Each Disbursement this Period 100.00

Transaction ID : D518567

B. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 02 / 24 / 2014

Amount of Each Disbursement this Period 60.00

Transaction ID : D521009

c. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 02 / 24 / 2014

Amount of Each Disbursement this Period 100.00

Transaction ID : D521010

SUBTOTAL of Disbursements This Page (optional) 260.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 18 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : D521015

B. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 10 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : D521027

c. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 05 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : D521028

SUBTOTAL of Disbursements This Page (optional) 300.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Petty Cash		M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 20225 Livernois Ave		Amount of Each Disbursement this Period
City Detroit	State MI	Zip Code 48221-1283
Purpose of Disbursement Misc. Campaign Expenses	Category/Type	
Candidate Name	Transaction ID : D521029	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Petty Cash		M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 20225 Livernois Ave		Amount of Each Disbursement this Period
City Detroit	State MI	Zip Code 48221-1283
Purpose of Disbursement Misc. Campaign Expenses	Category/Type	
Candidate Name	Transaction ID : D522618	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Petty Cash		M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 20225 Livernois Ave		Amount of Each Disbursement this Period
City Detroit	State MI	Zip Code 48221-1283
Purpose of Disbursement Misc. Campaign Expenses	Category/Type	
Candidate Name	Transaction ID : D522619	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 21 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : D522620

B. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 19 / 2014

Amount of Each Disbursement this Period: 40.00

Transaction ID : D522621

c. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 17 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : D522047

SUBTOTAL of Disbursements This Page (optional) 240.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 17 / 2014

Amount of Each Disbursement this Period: 60.00

Transaction ID : D522048

B. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 07 / 2014

Amount of Each Disbursement this Period: 20.00

Transaction ID : D522049

c. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 03 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : D522050

SUBTOTAL of Disbursements This Page (optional) 180.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Conyers for Congress

A. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 20225 Livernois Ave

City Detroit State MI Zip Code 48221-1283

Purpose of Disbursement Misc. Campaign Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 31 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : D522633

B. PNC Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230-0609

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 03 / 2014

Amount of Each Disbursement this Period: 3.00

Transaction ID : D522051

c. PNC Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230-0609

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 07 / 2014

Amount of Each Disbursement this Period: 3.00

Transaction ID : D522052

SUBTOTAL of Disbursements This Page (optional) 106.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D522053
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D522054
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D522614
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00 Transaction ID : D522615
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00 Transaction ID : D522616
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00 Transaction ID : D522617
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D521033
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D521034
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D521035
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D521046
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D521016
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D521011
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D521012
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 2.50
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D518560
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D518561
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D518562
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D518563
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D520318
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D520319
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D520320
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address PO Box 609		Amount of Each Disbursement this Period 3.00
City Pittsburgh	State PA	
Zip Code 15230-0609	Purpose of Disbursement Bank Fees	Transaction ID : D520321
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Priceline.com			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 800 Connecticut Ave			Amount of Each Disbursement this Period 140.36 Transaction ID : D521053
City Norwalk	State CT	Zip Code 06854-1631	
Purpose of Disbursement Travel		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Ronin America			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 14450 Scripps St			Amount of Each Disbursement this Period 3000.00 Transaction ID : D522031
City Detroit	State MI	Zip Code 48215-3176	
Purpose of Disbursement Petition Signature Collection Services		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. Ronin America			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 14450 Scripps St			Amount of Each Disbursement this Period 5500.00 Transaction ID : D520351
City Detroit	State MI	Zip Code 48215-3176	
Purpose of Disbursement Petition Signature Collection Services		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8640.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address PO Box 2463		Amount of Each Disbursement this Period 40.00
City Houston	State TX Zip Code 77252-2463	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : D521003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address PO Box 2463		Amount of Each Disbursement this Period 50.00
City Houston	State TX Zip Code 77252-2463	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : D518581
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address PO Box 2463		Amount of Each Disbursement this Period 45.00
City Houston	State TX Zip Code 77252-2463	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : D521047
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address PO Box 2463		Amount of Each Disbursement this Period 50.00
City Houston	State TX	
Zip Code 77252-2463	Purpose of Disbursement Travel	Transaction ID : D522046
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Speedway		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 34750 Woodward Ave		Amount of Each Disbursement this Period 45.00
City Birmingham	State MI	
Zip Code 48009-0926	Purpose of Disbursement Travel	Transaction ID : D521022
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 5564 Woodward Ave		Amount of Each Disbursement this Period 60.00
City Detroit	State MI	
Zip Code 48202-3804	Purpose of Disbursement Travel	Transaction ID : D520342
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 5564 Woodward Ave		Amount of Each Disbursement this Period 40.00
City Detroit	State MI	
Zip Code 48202-3804	Purpose of Disbursement Travel	Transaction ID : D522045
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 5564 Woodward Ave		Amount of Each Disbursement this Period 45.00
City Detroit	State MI	
Zip Code 48202-3804	Purpose of Disbursement Travel	Transaction ID : D522622
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 5564 Woodward Ave		Amount of Each Disbursement this Period 50.00
City Detroit	State MI	
Zip Code 48202-3804	Purpose of Disbursement Travel	Transaction ID : D521039
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Suntrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address PO Box 27572		Amount of Each Disbursement this Period 25.55
City Richmond	State VA Zip Code 23261-7572	
Purpose of Disbursement Merchant Fees	Candidate Name	Transaction ID : D521024
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Suntrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address PO Box 27572		Amount of Each Disbursement this Period 43.11
City Richmond	State VA Zip Code 23261-7572	
Purpose of Disbursement Merchant Fees	Candidate Name	Transaction ID : D521025
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Suntrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address PO Box 27572		Amount of Each Disbursement this Period 56.08
City Richmond	State VA Zip Code 23261-7572	
Purpose of Disbursement Merchant Fees	Candidate Name	Transaction ID : D521026
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	124.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Suntrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address PO Box 27572		Amount of Each Disbursement this Period 29.12
City Richmond	State VA Zip Code 23261-7572	
Purpose of Disbursement Merchant Fees	Candidate Name	Transaction ID : D522042
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Suntrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address PO Box 27572		Amount of Each Disbursement this Period 28.42
City Richmond	State VA Zip Code 23261-7572	
Purpose of Disbursement Merchant Fees	Candidate Name	Transaction ID : D522043
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Suntrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address PO Box 27572		Amount of Each Disbursement this Period 7.94
City Richmond	State VA Zip Code 23261-7572	
Purpose of Disbursement Merchant Fees	Candidate Name	Transaction ID : D522044
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	65.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Suntrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address PO Box 27572		Amount of Each Disbursement this Period 128.19 Transaction ID : D518582
City Richmond	State VA Zip Code 23261-7572	
Purpose of Disbursement Merchant Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Suntrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address PO Box 27572		Amount of Each Disbursement this Period 81.74 Transaction ID : D518583
City Richmond	State VA Zip Code 23261-7572	
Purpose of Disbursement Merchant Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Suntrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address PO Box 27572		Amount of Each Disbursement this Period 27.73 Transaction ID : D518584
City Richmond	State VA Zip Code 23261-7572	
Purpose of Disbursement Merchant Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	237.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Target Insyght		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address PO Box 80505		Amount of Each Disbursement this Period 2500.00 Transaction ID : D520350
City Lansing	State MI	
Purpose of Disbursement Campaign Management Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. The Beverly Hilton		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 9876 Wilshire Blvd		Amount of Each Disbursement this Period 726.08 Transaction ID : D521042
City Beverly Hills	State CA	
Purpose of Disbursement Catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. The Beverly Hilton		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 9876 Wilshire Blvd		Amount of Each Disbursement this Period 750.00 Transaction ID : D521073
City Beverly Hills	State CA	
Purpose of Disbursement Catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	3976.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial)
A. Things Remembered

Mailing Address 18000 Vernier Rd
Ste 829

City Harper Woods State MI Zip Code 48225-1042

Purpose of Disbursement Award for Supporter

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 03 / 31 / 2014

Amount of Each Disbursement this Period: 94.34

Transaction ID : D522630

Full Name (Last, First, Middle Initial)
B. Twenty-First Century Group Inc

Mailing Address 434 New Jersey Ave SE

City Washington State DC Zip Code 20003-4008

Purpose of Disbursement Catering & Room Rental for Event

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 03 / 06 / 2014

Amount of Each Disbursement this Period: 2100.00

Transaction ID : D522612

Full Name (Last, First, Middle Initial)
C. Union Services Agency Insurance Professionals

Mailing Address 119 Pere Marquette
Ste 1A

City Lansing State MI Zip Code 48912

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 02 / 26 / 2014

Amount of Each Disbursement this Period: 850.00

Transaction ID : D521393

SUBTOTAL of Disbursements This Page (optional) 3044.34

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 111 W Rio Salado Pkwy		Amount of Each Disbursement this Period 262.00
City Tempe	State AZ	
Zip Code 85281-2880	Purpose of Disbursement Travel	Transaction ID : D520339
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address Postal Center		Amount of Each Disbursement this Period 5.60
City Fredericksburg	State VA	
Zip Code 22704	Purpose of Disbursement Postage	Transaction ID : D518559
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Vesta Boost Mobile		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 51 Discovery Ste 250		Amount of Each Disbursement this Period 56.00
City Irvine	State CA	
Zip Code 92618-3124	Purpose of Disbursement Telephone Services	Transaction ID : D520340
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	323.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Vesta Boost Mobile		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 51 Discovery Ste 250		Amount of Each Disbursement this Period 44.80
City Irvine	State CA Zip Code 92618-3124	
Purpose of Disbursement Telephone Services	Candidate Name	Transaction ID : D520341
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Vesta Boost Mobile		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 51 Discovery Ste 250		Amount of Each Disbursement this Period 58.24
City Irvine	State CA Zip Code 92618-3124	
Purpose of Disbursement Telephone Services	Candidate Name	Transaction ID : D522035
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Vesta Boost Mobile		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 51 Discovery Ste 250		Amount of Each Disbursement this Period 47.04
City Irvine	State CA Zip Code 92618-3124	
Purpose of Disbursement Telephone Services	Candidate Name	Transaction ID : D522036
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	150.08
TOTAL This Period (last page this line number only).....	61534.11

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 80			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. Hyatt Hotels Chesapeake		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 100 Heron Blvd		Amount of Each Disbursement this Period 1150.00 Transaction ID : D521023
City Cambridge	State MD	
Purpose of Disbursement Lodging, Meals - Officially Connected		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Hyatt Hotels Chesapeake		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 100 Heron Blvd		Amount of Each Disbursement this Period 170.08 Transaction ID : D521019
City Cambridge	State MD	
Purpose of Disbursement Lodging, Meals - Officially Connected		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Hyatt Hotels Chesapeake		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 100 Heron Blvd		Amount of Each Disbursement this Period 250.00 Transaction ID : D521020
City Cambridge	State MD	
Purpose of Disbursement Lodging, Meals - Officially Connected		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	1570.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 80			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Conyers for Congress

Full Name (Last, First, Middle Initial) A. North American International Auto Show			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 1900 W Big Beaver Rd			Amount of Each Disbursement this Period 350.00
City Troy	State MI	Zip Code 48084-3508	
Purpose of Disbursement Tickets to Event		Category/ Type	Transaction ID : D521392
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	
Purpose of Disbursement		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:		

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	
Purpose of Disbursement		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).....	350.00
TOTAL This Period (last page this line number only).....	1920.08