

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 1295
Check if different than previously reported. (ACC) East Lansing MI 48826

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00375584 3. IS THIS REPORT NEW (N) OR AMENDED (A) AMENDED (A)

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

5. Covering Period 08 / 01 / 2020 through 08 / 31 / 2020

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 Kaltenschbach, Tim , , ,

Signature of Treasurer Kaltenschbach, Tim , , , [Electronically Filed] Date 12 / 01 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Great Lakes PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		82421.17
(b) Cash on Hand at Beginning of Reporting Period.....	184475.22	
(c) Total Receipts (from Line 19)	72380.71	443580.33
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	256855.93	526001.50
7. Total Disbursements (from Line 31).....	68329.07	337474.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	188526.86	188526.86
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	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Great Lakes PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	18000.00	108333.34
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	18000.00	88333.34
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	36500.00	206000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	54500.00	294333.34
12. Transfers From Affiliated/Other Party Committees.....	17880.71	149246.99
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	72380.71	443580.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	72380.71	443580.33

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	10829.07	107474.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10829.07	107474.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	57500.00	232500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	- 2500.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	- 2500.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	68329.07	337474.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	68329.07	337474.64

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	54500.00	294333.34
34. Total Contribution Refunds (from Line 28(d))	0.00	- 2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54500.00	296833.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10829.07	107474.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10829.07	107474.64

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Contribution dollar amount was corrected for Dr. Al Gross for Senate from \$5000.00 to \$2500.00. Sunbelt Beverage Co. LLC was entered incorrectly, changed to DBA Breaktru Beverage Group. Arcadia Bluffs check has been changed from a contribution to a refund to operating expense for an event that was cancelled.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Great Lakes PAC

A. Crisses, Andrew, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Cow Lane
 City Kings Point State NY Zip Code 11024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Charmer Sunbelt Group Occupation (for Individual) Executive
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 08 / 06 / 2020
Transaction ID : C7173234
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. DBA Breakthru Beverage Group
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 Progress Dr Suite K
 City Llinthicum State MD Zip Code 21090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 08 / 14 / 2020
Transaction ID : C7173243
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Merinoff, Alicia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 Massachussets Avenue
 City Haworth State NJ Zip Code 07641-1838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Farmer
 Receipt For: 2020
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 08 / 17 / 2020
Transaction ID : C7173239
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. Merinoff, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 Massachussetts Avenue
 City Haworth State NJ Zip Code 07641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Charmer Sunbelt Group Occupation (for Individual) Executive
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2020
Transaction ID : C7173237
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Zenker, Jennifer, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 W. 84th Street Apt. B
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Charmer Sunbelt Group Occupation (for Individual) Vice President
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2020
Transaction ID : C7173245
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	18000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. American Academy of Dermatology Association PAC

Mailing Address 1445 New York Avenue, NW
Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
08 / 05 / 2020
Transaction ID : C7173240

Amount of Each Receipt this Period
1500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. American College of Radiology Association Political Action Committee

Mailing Address 1891 Preston White Drive

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
08 / 20 / 2020
Transaction ID : C7173256

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. American Federation of Teachers COPE

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 (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 12 / 2020
Transaction ID : C7173255

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 9000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. AMERICAN PODIATRIC MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9312 OLD GEORGETOWN ROAD
 City BETHESDA State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C** C00008839
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2020
Transaction ID : C7173241
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. American Psychiatric Association PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Maine Ave., SW Suite 900
 City Washington State DC Zip Code 20024
 FEC ID number of contributing federal political committee. **C** C00373696
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2020
Transaction ID : C7173246
 Amount of Each Receipt this Period
 1500.00
 Memo Item

C. International Association of Bridge Structural Ornamental & Reinforcing Iron Workers PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1750 New York Avenue, NW Suite 400
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00027359
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2020
Transaction ID : C7173244
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	11500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. Laborers' International Union of North America (LIUNA) PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 905 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2020

Transaction ID : C7173238

Amount of Each Receipt this Period
5000.00

Memo Item

B. National Emergency Medicine Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1125 Executive Circle

City Irving	State TX	Zip Code 75038
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FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2020

Transaction ID : C7173235

Amount of Each Receipt this Period
2000.00

Memo Item

C. National Turkey Federation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1225 New York Avenue NW
Suite 400

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00076182

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2020

Transaction ID : C7173236

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. SOCIETY FOR VASCULAR SURGERY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 633 N. ST. CLAIR ST.
24TH FLOOR

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00381459

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2020

Transaction ID : C7173232

Amount of Each Receipt this Period
 1500.00

Memo Item

B. United Fresh Produce Association Fresh PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1901 Pennsylvania Avenue
Suite 1100

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00040725

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2020

Transaction ID : C7173242

Amount of Each Receipt this Period
 5000.00

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	6500.00
TOTAL This Period (last page this line number only).....	36500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. Stabenow Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 4426

City East Lansing	State MI	Zip Code 48826
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FEC ID number of contributing federal political committee. **C** C00495580

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
149246.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2020

Transaction ID : C7173247

Amount of Each Receipt this Period
17880.71

Memo Item

B. Light, Joy, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 2317

City Portage	State MI	Zip Code 49081
-----------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual) Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	27	/	2020

Transaction ID : C7173251

Amount of Each Receipt this Period
5000.00

Memo Item

C. Light, Timothy, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1017 Essex Circle

City Kalamazoo	State MI	Zip Code 49008
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	27	/	2020

Transaction ID : C7173250

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	17880.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. Penske, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2555 Telegraph Road
 City Bloomfield Hills State MI Zip Code 48302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Penske Corporation Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 23 / 2020**
Transaction ID : C7173249
 Amount of Each Receipt this Period 5000.00
 Memo Item
 *

B. Profit, Kirk, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4370 Stonemeadow Ct
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSCI Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **07 / 16 / 2020**
Transaction ID : C7173248
 Amount of Each Receipt this Period 1000.00
 Memo Item
 *

C. Profit, Kirk, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4370 Stonemeadow Ct
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSCI Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **08 / 03 / 2020**
Transaction ID : C7173252
 Amount of Each Receipt this Period 1000.00
 Memo Item
 *

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Profit, Kirk, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 14 / 2020	
Mailing Address 4370 Stonemeadow Ct		Transaction ID : C7173253	
City Ann Arbor	State MI	Zip Code 48103	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input checked="" type="checkbox"/> Memo Item	
Name of Employer (for Individual) GSCI		Occupation (for Individual) Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00	

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

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

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	17880.71

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2020

FEC Identification Number

C []

Transaction ID : D485421

Amount of Each Disbursement this Period

[] 197.50

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2020

FEC Identification Number

C []

Transaction ID : D485422

Amount of Each Disbursement this Period

[] 197.50

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2020

FEC Identification Number

C []

Transaction ID : D485424

Amount of Each Disbursement this Period

[] 39.50

Memo Item

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

[] 434.50

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

Full Name (Last, First, Middle Initial) A. Arcadia Bluffs Golf Club		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 14710 Northwood Highway		FEC Identification Number C [] Transaction ID : D485500 Amount of Each Disbursement this Period [] - 2000.00
City Arcadia	State MI	Zip Code 49613
Purpose of Disbursement Refund for deposit on event that was cancelled.		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:	Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) B. Matthew VanKuiken		Date of Disbursement MM / DD / YYYY 08 / 15 / 2020
Mailing Address 939 Powhatan St		FEC Identification Number C [] Transaction ID : D485429 Amount of Each Disbursement this Period [] 2333.33
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Finance Consulting		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:	Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) C. NGP Van, Inc.		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 1101 15th Street NW Suite 500		FEC Identification Number C [] Transaction ID : D485425 Amount of Each Disbursement this Period [] 100.00
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Database Services		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:	Memo Item <input type="checkbox"/>	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 433.33
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. Rodgers, Annette, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12405 Jennings Rd

City Linden State MI Zip Code 48451-9433

Purpose of Disbursement Fundraising Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2020

FEC Identification Number: C

Transaction ID : D485428

Amount of Each Disbursement this Period: 4000.00

Memo Item

B. Selden Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 328 Massachusetts Ave, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Fundraising Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2020

FEC Identification Number: C

Transaction ID : D485430

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. Wilson, Scott, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3234 Brisbane Dr

City Lansing State MI Zip Code 48911-1302

Purpose of Disbursement Compliance Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 01 / 2020

FEC Identification Number: C

Transaction ID : D485447

Amount of Each Disbursement this Period: 850.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9850.00

TOTAL This Period (last page this line number only)..... ▶ 10717.83

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. BRYAN BERGHOEF FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5748 141ST AVE

M M M	/	D D D	/	Y Y Y Y Y
08		17		2020

City HOLLAND State MI Zip Code 49423

FEC Identification Number

Purpose of Disbursement Contribution

C	C00712950
---	-----------

Candidate Name
BERGHOEF, BRYAN, , ,

Category/Type

Transaction ID : D485434

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: MI District: 02

1000.00

Memo Item

B. Colorado Democratic Party

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 789 Sherman Street Suite 110

M M M	/	D D D	/	Y Y Y Y Y
08		17		2020

City Denver State CO Zip Code 80203

FEC Identification Number

Purpose of Disbursement Contribution

C	C00161786
---	-----------

Candidate Name

Category/Type

Transaction ID : D485441

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: District:

5000.00

Memo Item

C. Committee to Elect Kimberly Bizon

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 7472 Elmwood P.O. Box 52

M M M	/	D D D	/	Y Y Y Y Y
08		17		2020

City Lexington State MI Zip Code 48450

FEC Identification Number

Purpose of Disbursement Contribution

C	C00666594
---	-----------

Candidate Name
Bizon, Kimberly, , ,

Category/Type

Transaction ID : D485437

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: MI District: 10

1000.00

Memo Item

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

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. Democratic Party of New Mexico

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 8214 2nd Street NW
Suite A

M M M	/	D D D	/	Y Y Y Y Y
08		17		2020

City Albuquerque State NM Zip Code 87114

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00161810
---	-----------

Candidate Name

Transaction ID : D485444

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Category/
Type

5000.00

Memo Item

B. Dr. Al Gross for Senate

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 90938

M M M	/	D D D	/	Y Y Y Y Y
08		17		2020

City ANCHORAGE State AK Zip Code 99509

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00710822
---	-----------

Candidate Name

Transaction ID : D485431

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: AK District: 00

Disbursement For: 2020
 Primary General
 Other (specify)

Category/
Type

2500.00

Memo Item

C. Dr. Al Gross for Senate

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 90938

M M M	/	D D D	/	Y Y Y Y Y
08		17		2020

City ANCHORAGE State AK Zip Code 99509

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00710822
---	-----------

Candidate Name

Transaction ID : D485432

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: AK District: 00

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Category/
Type

5000.00

Memo Item

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

12500.00

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

--

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

Full Name (Last, First, Middle Initial) A. DANA FERGUSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 17 / 2020
Mailing Address 115 S BROWN AVE		FEC Identification Number C C00703983 Transaction ID : D485435
City NEGAUNEE	State MI	Zip Code 49866
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name FERGUSON, DANA ALAN, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 01	

Full Name (Last, First, Middle Initial) B. FRIENDS OF DESIREE TIMS		Date of Disbursement MM / DD / YYYY 08 / 17 / 2020
Mailing Address PO BOX 17034 4323 W. 3RD STREET		FEC Identification Number C C00713743 Transaction ID : D485438
City DAYTON	State OH	Zip Code 45417
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name TIMS, DESIREE, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 10	

Full Name (Last, First, Middle Initial) C. Friends Of Jerry Hilliard		Date of Disbursement MM / DD / YYYY 08 / 17 / 2020
Mailing Address P.O. Box 39		FEC Identification Number C C00649582 Transaction ID : D485436
City Standish	State MI	Zip Code 48658
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name Hilliard, Jerry, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 04	

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. SCHOLTEN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 6233

M M M	/	D D D	/	Y Y Y Y Y
08		17		2020

City
GRAND RAPIDS

State
MI

Zip Code
49510

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00711317
---	-----------

Transaction ID : D485433

Candidate Name
SCHOLTEN, HILLARY, , ,

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: MI District: 03

Disbursement For: 2020
 Primary General
 Other (specify) ▼

5000.00

Memo Item

B. Jaime Harrison For US Senate

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 1767

M M M	/	D D D	/	Y Y Y Y Y
08		17		2020

City
Columbia

State
SC

Zip Code
29202

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00696153
---	-----------

Transaction ID : D485442

Candidate Name
Harrison, Jaime, , ,

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: SC District:

Disbursement For: 2020
 Primary General
 Other (specify)

5000.00

Memo Item

C. JON HOADLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 51165

M M M	/	D D D	/	Y Y Y Y Y
08		17		2020

City
KALAMAZOO

State
MI

Zip Code
49005

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00701599
---	-----------

Transaction ID : D485446

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: MI District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

5000.00

Memo Item

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

15000.00

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

--

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

Full Name (Last, First, Middle Initial)
A. JON OSSOFF FOR SENATE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	2	0

Mailing Address PO BOX 450326

FEC Identification Number

C C00718866

Transaction ID : D485443

Amount of Each Disbursement this Period

5000.00

City ATLANTA State GA Zip Code 31145

Purpose of Disbursement
Contribution

Category/Type

Candidate Name

OSSOFF, T. JONATHAN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: GA District: 00

Memo Item

Full Name (Last, First, Middle Initial)
B. Massachusetts Democratic State Committee

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	2	0

Mailing Address 77 Summer Street
FI 10

FEC Identification Number

C

Transaction ID : D485445

Amount of Each Disbursement this Period

5000.00

City Boston State MA Zip Code 02110

Purpose of Disbursement
Contribution

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)
C. Minnesota DFL Party-Federal Account

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	2	0

Mailing Address 255 East Plato Blvd

FEC Identification Number

C C00380352

Transaction ID : D485440

Amount of Each Disbursement this Period

5000.00

City Saint Paul State MN Zip Code 55107

Purpose of Disbursement
Contribution

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Memo Item

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

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great Lakes PAC

A. Montana Democratic Party-Federal Account

Full Name (Last, First, Middle Initial)

Mailing Address 303 N Ewing St

City Helena State MT Zip Code 59601

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 17 / 2020

FEC Identification Number: C

Transaction ID : D485439

Amount of Each Disbursement this Period: 5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	57500.00