

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

Brian Ellis for Congress

ADDRESS (number and street)

PO Box 6568

Check if different than previously reported. (ACC)

Grand Rapids

MI

49516-6568

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C C00550624

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MI

03

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

MM / DD / YYYY

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY 01 / 01 / 2014

through

MM / DD / YYYY 03 / 31 / 2014

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 Hilary Snell

Signature of Treasurer Hilary Snell

[Electronically Filed]

Date

MM / DD / YYYY 04 / 15 / 2014

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  
**Brian Ellis 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))....	122109.55	429641.64
(b) Total Contribution Refunds (from Line 20(d)) .....	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	122109.55	429641.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	247640.72	416218.26
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	247640.72	416218.26
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	413423.38	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	400100	

**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

**Brian Ellis for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	93860.01	93860.01
(ii) Unitemized .....	5762.42	310794.51
(iii) TOTAL of contributions from individuals .....	99622.43	404654.52
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	18500	21000
(d) The Candidate .....	3987.12	3987.12
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	122109.55	429641.64
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	200000	400000
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	200000	400000
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	0
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0	0
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	322109.55	829641.64

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	247640.72	416218.26
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS .....	0	0
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	247640.72	416218.26

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	338954.55
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	322109.55
25. SUBTOTAL (add Line 23 and Line 24).....	661064.1
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	247640.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	413423.38

**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 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Patrick B. Umphrey**

Mailing Address **PO Box 429**

City **Ada** State **MI** Zip Code **49301-0429**

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

Name of Employer **Hibbard Umphrey & Assoc** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 17 / 2014**

**Transaction ID : A-CF556**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Katherine E Lloyd**

Mailing Address **5511 Alhambra Drive SE**

City **Grand Rapids** State **MI** Zip Code **49546-9001**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 03 / 2014**

**Transaction ID : A-CF364**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Tim Vande Bunte**

Mailing Address **15066 Silver Fir Drive**

City **Holland** State **MI** Zip Code **49424-1694**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 01 / 2014**

**Transaction ID : A-CF491**

Amount of Each Receipt this Period  
**500**

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

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

**1200.00**

**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 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Tammy Huizenga**

Mailing Address 1551 Briarcliff Drive SE

City Grand Rapids State MI Zip Code 49546-9689

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

Name of Employer Born Clinic Occupation physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

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

**Transaction ID : A-CF403**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Peter J. Gorman**

Mailing Address 72 Pine Hill Road

City Highland Mills State NY Zip Code 10930-3423

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

Name of Employer Ace Endico Corporation Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 06 / 2014**

**Transaction ID : A-CF434**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Gary McInerney**

Mailing Address 330 Fulton Street E

City Grand Rapids State MI Zip Code 49503-4302

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

Name of Employer McInerney & Associates Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : A-CF580**

Amount of Each Receipt this Period  
**250**

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

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

**2250.00**

**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 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gerardo Norcia**

Mailing Address 17743 Stonebrook Drive

City Northville State MI Zip Code 48168-4329

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

Name of Employer DTE Energy Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

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

**Transaction ID : A-CF635**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Claudia Valente**

Mailing Address 7055 Leestone Street

City Springfield State VA Zip Code 22151-3520

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

Name of Employer Valente and Associates Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-CF515**

Amount of Each Receipt this Period  
**1600**

**C.** Full Name (Last, First, Middle Initial)  
**Gerard M. Anderson**

Mailing Address 191 Orchard Hills Court

City Ann Arbor State MI Zip Code 48104-1826

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

Name of Employer DTE ENERGY Occupation PRESIDENT/COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

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

**Transaction ID : A-CF633**

Amount of Each Receipt this Period  
**2500**

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

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

**5100.00**

**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 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>Micki M Benz</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 817 Gladstone Drive SE		<b>Transaction ID : A-CF494</b>
City East Grand Rapids	State MI	Zip Code 49506-3333
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500	
Name of Employer Mercy Health Saint Mary's	Occupation Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900	

Full Name (Last, First, Middle Initial) <b>Christian B. Jones</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address 3507 Broadrun Drive		<b>Transaction ID : A-CF624</b>
City Fairfax	State VA	Zip Code 22033-2164
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000	
Name of Employer Ferguson Strategies	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Douglas A. Decamp</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 3485 W M179 Highway		<b>Transaction ID : A-CF634</b>
City Hastings	State MI	Zip Code 49058
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5200	
Name of Employer FlexFlab Horizon Int'l	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6700.00
<b>TOTAL</b> 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 9 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Frederick Shell**

Mailing Address 5599 Great Hawk Circle

City Ann Arbor State MI Zip Code 48105-9583

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

Name of Employer DTE Occupation VP Corp & Government Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2014**

**Transaction ID : A-CF619**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Paul Hillemonds**

Mailing Address 47088 Brooks Lane

City Plymouth State MI Zip Code 48170-3476

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2014**

**Transaction ID : A-CF621**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Douglas Meijer**

Mailing Address PO Box 1791

City Grand Rapids State MI Zip Code 49501-1791

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

Name of Employer Meijer Inc Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

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

**Transaction ID : A-MCNF90**

Amount of Each Receipt this Period  
**2600**

redesignate to  
**[MEMO ITEM]**

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

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

**750.00**

**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 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Norman Keller**

Mailing Address 559 Lakeside Drive SE

City East Grand Rapids State MI Zip Code 49506-2937

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

Name of Employer Retired Occupation Osteopathic Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : A-CF498**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Ray Loeschner**

Mailing Address 2565 Frederick Drive SE

City Grand Rapids State MI Zip Code 49506-3105

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

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

**Transaction ID : A-CF487**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Timothy F Nicholson**

Mailing Address 4 Woodland Place

City Grosse Pointe Farms State MI Zip Code 48230-1920

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

Name of Employer PVS Chemicals, Inc. Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 03 / 2014**

**Transaction ID : A-MCNF76**

Amount of Each Receipt this Period  
**2600**

Redesignation to  
**[MEMO ITEM]**

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

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

**1000.00**

**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 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Brower**

Mailing Address 1416 Pontiac Road SE

City State Zip Code  
Grand Rapids MI 49506-3344

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

Name of Employer Occupation  
Miller Johnson Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 17 2014**

**Transaction ID : A-CF386**

Amount of Each Receipt this Period  
**300**

**B.** Full Name (Last, First, Middle Initial)  
**Trevor F. Lauer**

Mailing Address 5480 Carrollton Court

City State Zip Code  
Oakland Township MI 48306-2393

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

Name of Employer Occupation  
DTE Energy Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

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

**Transaction ID : A-CF630**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Barbara A. Parfet**

Mailing Address 15570 Northwood Lane

City State Zip Code  
Hickory Corners MI 49060-9562

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 04 2014**

**Transaction ID : A-MCNF84**

Amount of Each Receipt this Period  
**2600**

Reattribution to  
**[MEMO ITEM]**

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

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

**800.00**

**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 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Herbruck**

Mailing Address 7420 Biscayne Way SE

City Grand Rapids State MI Zip Code 49546-9760

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

Name of Employer Herbrucks Poultry Ranch Inc Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-CF610**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Claudia Valente**

Mailing Address 7055 Leestone Street

City Springfield State VA Zip Code 22151-3520

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

Name of Employer Valente and Associates Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 25 / 2014**

**Transaction ID : A-CF469**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Margaret E. Goebel**

Mailing Address 2127 Durant Drive SE

City East Grand Rapids State MI Zip Code 49506-2003

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

Name of Employer Goebel Group Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 17 / 2014**

**Transaction ID : A-CF562**

Amount of Each Receipt this Period  
**250**

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

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

**3850.00**

**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 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Kent J. Vana**

Mailing Address 5999 Grand River Drive NE

City State Zip Code  
Ada MI 49301-9549

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

Name of Employer Occupation  
Varnum Law Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 10 / 2014**

**Transaction ID : A-CF527**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Martin Allen Jr.**

Mailing Address 670 Manhattan Road SE

City State Zip Code  
Grand Rapids MI 49506-2025

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

Name of Employer Occupation  
retired retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : A-CF543**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Doyal**

Mailing Address 943 Floral Avenue SE

City State Zip Code  
East Grand Rapids MI 49506-3430

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

Name of Employer Occupation  
RDV Corp Managing Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1062**

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

**Transaction ID : A-IF660**

Amount of Each Receipt this Period  
**62**

Inkind: Fundraiser/food/beverage

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

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

**1062.00**

**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 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Christopher Cox**

Mailing Address 2205 Windsor Road

City State Zip Code  
Alexandria VA 22307-1019

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

Name of Employer Occupation  
Navigators Global LLC Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

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

**Transaction ID : A-CF627**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**William U. Parfet**

Mailing Address 15570 Northwood Lane

City State Zip Code  
Hickory Corners MI 49060-9562

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

Name of Employer Occupation  
MPI Research CEO and Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : A-MCNF83**

Amount of Each Receipt this Period  
**-2600**

retribution from  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Nancy L Lubbers**

Mailing Address 4195 N Oak Pointe Court NE

City State Zip Code  
Grand Rapids MI 49525-9417

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

Name of Employer Occupation  
Grand Valley State Univ Foundation Board

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2014**

**Transaction ID : A-CF572**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**

**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 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey S Ammon**

Mailing Address 1545 Breton Road SE

City East Grand Rapids State MI Zip Code 49506-4157

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

Name of Employer Miller Johnson Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

**Transaction ID : A-CF575**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Terrence M. O'Rourke**

Mailing Address 1064 Pinecrest Avenue SE

City Grand Rapids State MI Zip Code 49506-3439

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : A-CF495**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Steve Millman**

Mailing Address 2714 Beechwood Drive SE

City East Grand Rapids State MI Zip Code 49506-4209

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

Name of Employer Northstar Command Occupation Real Estate Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2014**

**Transaction ID : A-CF614**

Amount of Each Receipt this Period  
**500**

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

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 16 OF 118  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ellen Nelson**

Mailing Address 2002 Robinson Road SE

City State Zip Code  
Grand Rapids MI 49506-1846

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

Name of Employer Occupation  
Mason and Jones Retail Associate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : A-CF542**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Ben C Benjamin**

Mailing Address PO Box 349

City State Zip Code  
Harbor Springs MI 49740-0349

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

Name of Employer Occupation  
retired retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 07 / 2014**

**Transaction ID : A-CF368**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Batts**

Mailing Address 915 Cascade Hills East Dr. SE

City State Zip Code  
Grand Rapids MI 49546

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

Name of Employer Occupation  
retired retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : A-CF409**

Amount of Each Receipt this Period  
**250**

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

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

**1250.00**



**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 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert F Kennedy**

Mailing Address 13201 Addington Drive

City State Zip Code  
Dewitt MI 48820-9098

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

Name of Employer Occupation  
CAPITOL AFFAIRS LLC PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

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

**Transaction ID : A-CF636**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Eric Bronstein**

Mailing Address 12934 Vernon Avenue

City State Zip Code  
Huntington Woods MI 48070-1450

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

Name of Employer Occupation  
The Scion Group Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

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

**Transaction ID : A-CF599**

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**Timothy J. Brutsche**

Mailing Address 654 Country Club Drive

City State Zip Code  
Battle Creek MI 49015-3651

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

Name of Employer Occupation  
BRUSCHKE CONCRETE PRODUCTS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
752.68

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 13 / 2014

**Transaction ID : A-CF536**

Amount of Each Receipt this Period  
100

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

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

850.00

**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 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas G. Kyros**

Mailing Address 933 Floral Avenue SE

City Grand Rapids State MI Zip Code 49506-3430

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

Name of Employer Varnum LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF476**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Douglas Meijer**

Mailing Address PO Box 1791

City Grand Rapids State MI Zip Code 49501-1791

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

Name of Employer Meijer Inc Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

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

**Transaction ID : A-MCNF89**

Amount of Each Receipt this Period  
**-2600**

Redesignate from  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**James Keane**

Mailing Address 940 San Jose Drive SE

City Grand Rapids State MI Zip Code 49506-3422

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

Name of Employer Steelcase Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 22 / 2014**

**Transaction ID : A-CF388**

Amount of Each Receipt this Period  
**1000**

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

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

**1500.00**

**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 19 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas A. Decamp**

Mailing Address 3485 W M179 Highway

City Hastings State MI Zip Code 49058

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

Name of Employer FlexFlab Horizon Int'l Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-MCNF86**

Amount of Each Receipt this Period  
**-2600**

Reattributed from

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Hal G. Ostrow**

Mailing Address 144 Baynton Avenue NE

City Grand Rapids State MI Zip Code 49503-3757

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

Name of Employer The Ostrow Law Firm PLC Occupation Attorney/Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : A-CF598**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Dawn S. Johnson**

Mailing Address 1344 Ballybunion Court SE

City Grand Rapids State MI Zip Code 49546-3800

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

Name of Employer SPARTAN DISTRIBUTORS Occupation BUSINESS MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF479**

Amount of Each Receipt this Period  
**1000**

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

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

**1250.00**

**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 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brad Ditmar**

Mailing Address 3025 Woodcliff Circle SE

City East Grand Rapids State MI Zip Code 49506-3158

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

Name of Employer Keller Williams Realty Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

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

**Transaction ID : A-CF609**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Margaret Decamp**

Mailing Address 3485 W M179 Highway

City Hastings State MI Zip Code 49058

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-MCNF85**

Amount of Each Receipt this Period  
**2600**

Reattributed to  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Charles M. Denton**

Mailing Address 1134 Conlon Avenue SE

City Grand Rapids State MI Zip Code 49506-3581

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

Name of Employer Barnes & Thornburg LLP Occupation Attorney/Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : A-CF577**

Amount of Each Receipt this Period  
**100**

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

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

**600.00**

**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 21 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David S. Whitescarver**

Mailing Address 1710 Flowers Mill Court NE

City State Zip Code  
Grand Rapids MI 49525-9696

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

Name of Employer Occupation  
VanAndel Research Institute Chief Legal Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

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

**Transaction ID : A-CF485**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Michael Ferguson**

Mailing Address 13 The Arbors

City State Zip Code  
New Providence NJ 07974-1994

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

Name of Employer Occupation  
Ferguson Strategies Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

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

**Transaction ID : A-CF625**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Carla Sikkema**

Mailing Address 4309 Del Mar Court SW

City State Zip Code  
Wyoming MI 49418-8738

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

Name of Employer Occupation  
D.A. Blodgett for Childre Board of Directors

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

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

**Transaction ID : A-MCNF88**

Amount of Each Receipt this Period  
**2600**

Reattribute to  
**[MEMO ITEM]**

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

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

**1500.00**

**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 22 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ken Sikkema**

Mailing Address 4309 Del Mar Court SW

City Wyoming State MI Zip Code 49418-8738

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-MCNF87**

Amount of Each Receipt this Period  
**-2600**

Reattribute from

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Milton W. Rohwer**

Mailing Address 30 College Avenue SE  
Apt. 64

City Grand Rapids State MI Zip Code 49503-4455

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

Name of Employer Porter Hills Foundation Occupation Immediate Past-Chair

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 26 / 2014**

**Transaction ID : A-CF607**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**George Franklin**

Mailing Address 2010 Hudson Avenue

City Kalamazoo State MI Zip Code 49008-1810

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : A-CF555**

Amount of Each Receipt this Period  
**250**

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

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

**500.00**

**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 23 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Valente III**

Mailing Address 7055 Leestone Street

City Springfield State VA Zip Code 22151-3520

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

Name of Employer Valente & Associates Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2295.33**

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

**Transaction ID : A-CF643**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**David J. Levitt**

Mailing Address 855 Plymouth Avenue SE

City Grand Rapids State MI Zip Code 49506-6521

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

Name of Employer Third Coast Development Occupation Realestate Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : A-CF653**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Earl D. Holton**

Mailing Address 4438 Mystic Ridge Court NE

City Grand Rapids State MI Zip Code 49525-9464

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 27 / 2014**

**Transaction ID : A-CF482**

Amount of Each Receipt this Period  
**500**

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

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

**1750.00**

**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 24 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Norman Palm**

Mailing Address 3030 Bonnell Avenue SE

City Grand Rapids State MI Zip Code 49506-3134

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

Name of Employer SELF-EMPLOYED Occupation DENTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

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

**Transaction ID : A-CF529**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Linda Dresner**

Mailing Address 711 S Bates Street

City Birmingham State MI Zip Code 48009-1955

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

Name of Employer Self Occupation Retail Merchant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

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

**Transaction ID : A-CF597**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**David E. Meador**

Mailing Address 1590 Cranbrook Drive

City Troy State MI Zip Code 48084-1440

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

Name of Employer DTE Energy Occupation Vice Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

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

**Transaction ID : A-CF644**

Amount of Each Receipt this Period  
**1500**

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

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

**2750.00**



**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 25 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kathleen L. Rushmore**

Mailing Address 4955 Hillside Farms Estates DR NE

City Grand Rapids State MI Zip Code 49525-9693

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 10 / 2014**

**Transaction ID : A-CF525**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Kim L. Gary**

Mailing Address 7635 Luca Vista Drive NE

City Rockford State MI Zip Code 49341-7015

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

Name of Employer Alliance Beverage Distributi Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 20 / 2014**

**Transaction ID : A-CF571**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Regan Lamothe**

Mailing Address 9760 Ravine Ridge Dr.

City Caledonia State MI Zip Code 49316

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

Name of Employer Regan LaMothe LLC Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-IF637**

Amount of Each Receipt this Period  
**2600**  
 Inkind: Advertising/radio production

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

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

**3600.00**

**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 26 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Timothy J. Brutsche**

Mailing Address 654 Country Club Drive

City State Zip Code  
Battle Creek MI 49015-3651

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
BRUTSCHE CONCRETE PRODUCTS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-IF618**

Amount of Each Receipt this Period

Inkind: Food/ beverage

**B.** Full Name (Last, First, Middle Initial)  
**Charles R. Caldwell**

Mailing Address 2037 Lake Pointe Drive SE

City State Zip Code  
Grand Rapids MI 49506-2914

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Self Orthodontist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-CF606**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**William E. LaMothe**

Mailing Address 6169 Victory Drive

City State Zip Code  
Ave Maria FL 34142-9514

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
retired retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-CF538**

Amount of Each Receipt this Period

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

**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 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John H. Wert**

Mailing Address 6880 N Ocean Boulevard  
Apt. 17

City State Zip Code  
Ocean Ridge FL 33435-3348

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 17 / 2014**

**Transaction ID : A-CF557**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William Currie**

Mailing Address 1830 Beard Drive SE

City State Zip Code  
Grand Rapids MI 49546-6458

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

Name of Employer Occupation  
Universal Forest Products Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 29 / 2014**

**Transaction ID : A-CF612**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Paul O. Farr**

Mailing Address 1715 Danby Lane SE

City State Zip Code  
Grand Rapids MI 49506-4823

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

Name of Employer Occupation  
Grand River Gastroenterology Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 03 / 2014**

**Transaction ID : A-CF362**

Amount of Each Receipt this Period  
**1000**

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

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

**2500.00**

**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 28 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tanya Vanden Bosch**

Mailing Address 130 Park Hills Drive SE

City Grand Rapids State MI Zip Code 49506-1900

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

Name of Employer none Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 10 / 2014**

**Transaction ID : A-CF371**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Rudean R. Fairman**

Mailing Address 3399 Eagle Creek Court NE

City Grand Rapids State MI Zip Code 49525-7001

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

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

**Transaction ID : A-CF484**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Michael Ellis**

Mailing Address 40 Pearl Street NW

City Grand Rapids State MI Zip Code 49503-3028

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

Name of Employer Ellis Parkng Company Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 06 / 2014**

**Transaction ID : A-CF521**

Amount of Each Receipt this Period  
**500**

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

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

**2000.00**

**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 29 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Wert**

Mailing Address 1620 Alexander Street SE

City Grand Rapids State MI Zip Code 49506-3306

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

Name of Employer Norris Pernt & French LLP Occupation Partner Portfolio Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 27 / 2014**

**Transaction ID : A-CF483**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mary Schaff**

Mailing Address 240 Tadd Ave. NE

City Ada State MI Zip Code 49301

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-MCNF82**

Amount of Each Receipt this Period  
**2600**

Reattribution to  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Robert C Woodhouse Jr.**

Mailing Address 3073 Fulton Street E

City Grand Rapids State MI Zip Code 49506-1813

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

Name of Employer Restoration Technology Inc Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 19 / 2014**

**Transaction ID : A-CF567**

Amount of Each Receipt this Period  
**500**

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

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

**1000.00**

**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 30 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Naif Khouri**

Mailing Address 49988 Powell Ridge Court

City Plymouth State MI Zip Code 48170-6378

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

Name of Employer DTE Energy Occupation Senior VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : A-CF620**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Janet Kim**

Mailing Address 33 Brooktree Lane SE

City Grand Rapids State MI Zip Code 49503-3911

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

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

**Transaction ID : A-CF626**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**John Schaff**

Mailing Address 240 Tadd Ave NE

City Ada State MI Zip Code 49301

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

Name of Employer Schaff Mgmt and Consulting Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-CF456**

Amount of Each Receipt this Period  
**5200**

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

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

**5950.00**

**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 31 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Harvey Minkin Dr.**

Mailing Address 1639 Apple Lane

City Bloomfield Hills State MI Zip Code 48302-1304

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

Name of Employer Michigan Radiology Serv Occupation Radiologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : A-CF652**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Ami M Rabideau**

Mailing Address 3000 Hall Street SE

City Grand Rapids State MI Zip Code 49506-3100

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

Name of Employer St. Mary's Health Systems Occupation Director of Development

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF473**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Doyal**

Mailing Address 943 Floral Avenue SE

City East Grand Rapids State MI Zip Code 49506-3430

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

Name of Employer RDV Corp Occupation Managing Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1062**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF472**

Amount of Each Receipt this Period  
**500**

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

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

**1000.00**

**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 32 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Murray R. Hertzberg**

Mailing Address 15 Thomas Place

City Valhalla State NY Zip Code 10595-1629

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

Name of Employer Ace Endico Corp Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

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

**Transaction ID : A-CF406**

Amount of Each Receipt this Period  
**2000**

**B.** Full Name (Last, First, Middle Initial)  
**Shawn Gary**

Mailing Address 626 Saddlebrook

City Ada State MI Zip Code 49301-9505

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

Name of Employer Alliance Beverage Distributi Occupation President-Kent Beverage

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 20 / 2014**

**Transaction ID : A-CF573**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mark Valente III**

Mailing Address 7055 Leestone Street

City Springfield State VA Zip Code 22151-3520

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

Name of Employer Valente & Associates Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2295.33**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 25 / 2014**

**Transaction ID : A-CF468**

Amount of Each Receipt this Period  
**1000**

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

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

**3500.00**



**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 33 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Frank G. Dunten**

Mailing Address 3187 Bonnell Avenue SE

City East Grand Rapids State MI Zip Code 49506-3135

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

Name of Employer Dickensen Wright Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : A-CF426**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Douglas Meijer**

Mailing Address PO Box 1791

City Grand Rapids State MI Zip Code 49501-1791

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

Name of Employer Meijer Inc Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

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

**Transaction ID : A-CF646**

Amount of Each Receipt this Period  
**5200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James P Mcfadden**

Mailing Address 65 Morningside Drive

City Milford State CT Zip Code 06460

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : A-CF424**

Amount of Each Receipt this Period  
**1000**

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

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

**6700.00**

**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 34 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steven E. Kurmas**

Mailing Address 5807 Bradbury Run

City Washington State MI Zip Code 48094-1065

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

Name of Employer DTE Energy Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

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

**Transaction ID : A-CF651**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**William U. Parfet**

Mailing Address 15570 Northwood Lane

City Hickory Corners State MI Zip Code 49060-9562

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

Name of Employer MPI Research Occupation CEO and Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : A-CF499**

Amount of Each Receipt this Period  
**4700**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. David M Mulenberg**

Mailing Address 971 Spaulding Ave SE Suite A

City Ada State MI Zip Code 49301

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

Name of Employer Self Occupation Business Owner/Financial

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-CF410**

Amount of Each Receipt this Period  
**2600**

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

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

**8300.00**

**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 35 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Ford**

Mailing Address 545 Sanctuary Court NE

City State Zip Code  
Ada MI 49301-8784

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

Name of Employer Occupation  
retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

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

**Transaction ID : A-CF533**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Dr John Schwarz**

Mailing Address 251 Central Street

City State Zip Code  
Battle Creek MI 49017-3346

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

Name of Employer Occupation  
Self Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

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

**Transaction ID : A-CF544**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Barbara Gerson**

Mailing Address 2000 Robinson Road SE

City State Zip Code  
Grand Rapids MI 49506-1846

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

Name of Employer Occupation  
Self Philantropy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

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

**Transaction ID : A-CF532**

Amount of Each Receipt this Period  
**1000**

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

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

**1750.00**

**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 36 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Hilary F. Snell**

Mailing Address 1065 Plymouth Avenue SE

City	State	Zip Code
Grand Rapids	MI	49506-6525

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

Name of Employer	Occupation
retired	attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : A-CF534**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Armen S. Kassouni**

Mailing Address 2454 Elmwood Drive SE

City	State	Zip Code
East Grand Rapids	MI	49506-4217

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

Name of Employer	Occupation
NK Manufacturing Tech	Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

**Transaction ID : A-CF569**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Timothy F Nicholson**

Mailing Address 4 Woodland Place

City	State	Zip Code
Grosse Pointe Farms	MI	48230-1920

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

Name of Employer	Occupation
PVS Chemicals, Inc.	Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2013**

**Transaction ID : A-RRF353**

Amount of Each Receipt this Period  
**5200**

**[MEMO ITEM]**  
 As originally reported -- see reattribution/redesignation memos.

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

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

**2850.00**

**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 37 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Timothy F Nicholson**

Mailing Address 4 Woodland Place

City State Zip Code  
Grosse Pointe Farms MI 48230-1920

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

Name of Employer Occupation  
PVS Chemicals, Inc. Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 03 / 2014**

**Transaction ID : A-MCNF77**

Amount of Each Receipt this Period  
**-2600**

Redesignation from

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Catherine Bissell**

Mailing Address PO Box 1888

City State Zip Code  
Grand Rapids MI 49501-1888

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

Name of Employer Occupation  
Bissell, Inc Director of Corporate Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 19 / 2014**

**Transaction ID : A-CF457**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mitchel Weisblatt**

Mailing Address 201 Seven Fields Lane

City State Zip Code  
Brewster NY 10509-6030

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

Name of Employer Occupation  
Ace Endico Corp VP Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

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

**Transaction ID : A-CF596**

Amount of Each Receipt this Period  
**1000**

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

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

**1100.00**

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

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

FOR LINE NUMBER: PAGE 38 OF 118  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Meijer**

Mailing Address **PO Box 2284**

City **Grand Rapids** State **MI** Zip Code **49501-2284**

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

Name of Employer **Life EMS** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2014**

**Transaction ID : A-CF613**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Vincent L. Pavone Jr.**

Mailing Address **295 W Dickman Road**

City **Battle Creek** State **MI** Zip Code **49037-8453**

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

Name of Employer **Lakeview Ford Lincoln** Occupation **Dealer Principal**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 27 / 2014**

**Transaction ID : A-CF480**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Ken Sikkema**

Mailing Address **4309 Del Mar Court SW**

City **Wyoming** State **MI** Zip Code **49418-8738**

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

Name of Employer **Self** Occupation **Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-CF645**

Amount of Each Receipt this Period  
**5200**

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

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

**8050.00**

**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 39 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Valente III**

Mailing Address 7055 Leestone Street

City Springfield State VA Zip Code 22151-3520

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

Name of Employer Valente & Associates Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2295.33

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : A-IF486**

Amount of Each Receipt this Period  
295.33

Inkind: Fundraiser/food/beverage

**B.** Full Name (Last, First, Middle Initial)  
**Jeanne M. Glowicki**

Mailing Address 222 Lakewood Drive SE

City Grand Rapids State MI Zip Code 49506-2013

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

Name of Employer East Grand Rapids Pub Schs Occupation Asst. Superintendent of Instruct.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : A-CF558**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**John Schaff**

Mailing Address 240 Tadd Ave NE

City Ada State MI Zip Code 49301

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

Name of Employer Schaff Mgmt and Consulting Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

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

**Transaction ID : A-MCNF81**

Amount of Each Receipt this Period  
-2600

retribution from  
**[MEMO ITEM]**

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

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

795.33

**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 40 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia. A. Lamothe**

Mailing Address 6169 Victory Drive

City Ave Maria State FL Zip Code 34142-9514

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : A-CF539**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Brown**

Mailing Address 589 Aquila Drive

City East Lansing State MI Zip Code 48823-8318

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

Name of Employer Jackson National Life Occupation VP Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 08 / 2014**

**Transaction ID : A-CF428**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Kevin Sullivan**

Mailing Address 2545 Ridgcroft Avenue SE

City Grand Rapids State MI Zip Code 49546-8010

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

Name of Employer B&B BEER DISTRIBUTION Occupation BEVERAGE DISTRIBUTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2014**

**Transaction ID : A-CF574**

Amount of Each Receipt this Period  
**500**

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

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

**2500.00**



**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 41 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Mark J. Wassink**

Mailing Address 62 Lakeside Drive SE

City State Zip Code  
Grand Rapids MI 49506-1836

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

Name of Employer Occupation  
Warner Norcross & Judd Attorney/Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 14 / 2014

**Transaction ID : A-CF452**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Walsh**

Mailing Address 211 Manor Drive

City State Zip Code  
Edinburg VA 22824-3566

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

Name of Employer Occupation  
Greenberg Traurig LLP Director of Government affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : A-CF431**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Larry Titley**

Mailing Address 897 Reeds Hollow Drive SE

City State Zip Code  
Grand Rapids MI 49546-8345

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

Name of Employer Occupation  
Varnum Law Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : A-CF526**

Amount of Each Receipt this Period  
**500**

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

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

**1000.00**

**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 42 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan K. Smith**

Mailing Address 2720 Darby Avenue SE

City Grand Rapids State MI Zip Code 49506-3140

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

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

**Transaction ID : A-CF554**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Henry A Fox**

Mailing Address 19573 N Shore Drive

City Spring Lake State MI Zip Code 49456-9107

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

Name of Employer Henry A. Fox Sales Co. Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

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

**Transaction ID : A-CF488**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Michael W. Haley**

Mailing Address 12121 W End

City West Palm Bch State FL Zip Code 33408-2942

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

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

**Transaction ID : A-CF404**

Amount of Each Receipt this Period  
**1000**

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

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

**2500.00**

**93860.01**

**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 43 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Council Of Insurance Agents & Brokers**

Mailing Address 701 Pennsylvania Avenue NW  
Suite 750

City Washington State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : A-CF528**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Fund For American Opportunity PAC**

Mailing Address PO Box 65796

City Washington State DC Zip Code 20035-5796

FEC ID number of contributing federal political committee. **C** C00336297

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : A-CF470**

Amount of Each Receipt this Period  
 2500

**C.** Full Name (Last, First, Middle Initial)  
**Fund For American Opportunity PAC**

Mailing Address PO Box 65796

City Washington State DC Zip Code 20035-5796

FEC ID number of contributing federal political committee. **C** C00336297

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

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

**Transaction ID : A-CF516**

Amount of Each Receipt this Period  
 2500

**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 44 OF 118
<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)  
**Brian Ellis for Congress**

**A. Franchising Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1501 K Street NW  
Suite 350  
City Washington State DC Zip Code 20005-1412

FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 21 / 2014

**Transaction ID : A-CF581**

Amount of Each Receipt this Period  
5000

**B. The Home Depot Inc. Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1155 F Street NW  
Suite 400  
City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

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

**Transaction ID : A-CF647**

Amount of Each Receipt this Period  
5000

**C. Association For Advanced Life Underwriting**

Full Name (Last, First, Middle Initial)  
Mailing Address 11921 Freedom Drive  
Suite 1100  
City Reston State VA Zip Code 20190-5634

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

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

**Transaction ID : A-CF407**

Amount of Each Receipt this Period  
2500

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

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

12500.00

18500.00

**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 45 OF 118
	<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)  
**Brian Ellis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brian Ellis**

Mailing Address PO Box 6367

City: Grand Rapids State: MI Zip Code: 49516-6367

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

Name of Employer: Brooktree Capital Management Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 403987.12

Date of Receipt: 03 / 19 / 2014

**Transaction ID : A-IF564**

Amount of Each Receipt this Period: 1632.18

Inkind: Travel

**B.** Full Name (Last, First, Middle Initial)  
**Brian Ellis**

Mailing Address PO Box 6367

City: Grand Rapids State: MI Zip Code: 49516-6367

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

Name of Employer: Brooktree Capital Management Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 403987.12

Date of Receipt: 03 / 19 / 2014

**Transaction ID : A-IF563**

Amount of Each Receipt this Period: 2354.94

Inkind: Travel

**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

Amount of Each Receipt this Period

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

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

3987.12

3987.12

**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 46 OF 118
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>Brian Ellis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2014
Mailing Address PO Box 6367		<b>Transaction ID : A-LL4</b>
City Grand Rapids	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200000
Name of Employer Brooktree Capital Management	Occupation President	Loan from Candidate
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 403987.12	

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200000.00
<b>TOTAL</b> This Period (last page this line number only).....	200000.00

**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 118	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Topfundraising.Com Llc</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2014
Mailing Address 3886 Old Elm Drive SE		Amount of Each Disbursement this Period 1500 <b>Transaction ID : B-E-377</b>
City Kentwood	State MI	
Zip Code 49512-9523	Purpose of Disbursement Fundraising: Consulting/fundraising	Category/ Type 003
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>B. Megan J Wells</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 38.1 <b>Transaction ID : B-E-419</b>
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement Reimbursement see below	Category/ Type 001
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:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement MM / DD / YYYY 01 / 24 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 1200.25 <b>Transaction ID : B-E-413</b>
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement Administrative/Salary/Overhead: wages	Category/ Type 001
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:	Original vendors exceeding reporting threshold itemized as memo transactions.

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2738.35
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Virginia A. Huff</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 343.67
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement Wages	Transaction ID : B-S-141
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(01/24/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Megan J Wells</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 856.58
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement Salary	Transaction ID : B-S-140
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(01/24/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Perrigo Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 125 Ottawa Avenue NW		Amount of Each Disbursement this Period 1357.58
City Grand Rapids	State MI	
Zip Code 49503-2837	Purpose of Disbursement Advertising: Fundraising/mailer	Transaction ID : B-E-449
Candidate Name	004 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1357.58
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 65 <b>Transaction ID : B-E-517</b>
City Novi	State MI	
Purpose of Disbursement Payroll charges		Category/ Type 001
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>B. Regan LaMothe LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2014
Mailing Address 9760 Ravine Ridge Dr.		Amount of Each Disbursement this Period 2600 <b>Transaction ID : B-S-220</b> <b>[MEMO ITEM]</b> Subitemization of Regan Lamothe(03/24/14)
City Caledonia	State MI	
Purpose of Disbursement Advertising/radio production		Category/ Type 004
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>c. Paychex</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 1078.43 <b>Transaction ID : B-E-436</b>  Original vendors exceeding reporting threshold itemized as memo transactions.
City Novi	State MI	
Purpose of Disbursement Administrative/Salary/Overhead: Wages		Category/ Type 001
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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1143.43
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Megan J Wells</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 856.58
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement Salary	Transaction ID : B-S-143
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)	[MEMO ITEM] Subitemization of Paychex(02/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Virginia A. Huff</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 221.85
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement Wages	Transaction ID : B-S-144
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)	[MEMO ITEM] Subitemization of Paychex(02/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Brian Ellis</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address PO Box 6367		Amount of Each Disbursement this Period 275.35
City Grand Rapids	State MI	
Zip Code 49516-6367	Purpose of Disbursement Reimbursement see below	Transaction ID : B-E-448
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	275.35
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Straight Talk</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 9700 NW 112th Avenue		Amount of Each Disbursement this Period 49.32
City Medley	State FL	
Zip Code 33178-1353	Purpose of Disbursement Phone expense	<b>Transaction ID : B-S-158</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Subitemization of Brian Ellis(02/12/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 2895 Radcliff Avenue SE		Amount of Each Disbursement this Period 121.86
City Grand Rapids	State MI	
Zip Code 49512-1701	Purpose of Disbursement Office supplies	<b>Transaction ID : B-S-159</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Subitemization of Brian Ellis(02/12/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Perrigo Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 125 Ottawa Avenue NW		Amount of Each Disbursement this Period 422.94
City Grand Rapids	State MI	
Zip Code 49503-2837	Purpose of Disbursement Administrative/Salary/Overhead: Printing	<b>Transaction ID : B-E-508</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	422.94
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Perrigo Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 125 Ottawa Avenue NW		Amount of Each Disbursement this Period 3959.1 <b>Transaction ID : B-E-583</b>
City Grand Rapids	State MI	
Zip Code 49503-2837	Purpose of Disbursement Fundraising: Printing	Category/ Type 003
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>B. Perrigo Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 125 Ottawa Avenue NW		Amount of Each Disbursement this Period 870.26 <b>Transaction ID : B-E-506</b>
City Grand Rapids	State MI	
Zip Code 49503-2837	Purpose of Disbursement Fundraising: Printing	Category/ Type 003
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>c. Topfundraising.Com Llc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 3886 Old Elm Drive SE		Amount of Each Disbursement this Period 1500 <b>Transaction ID : B-E-464</b>
City Kentwood	State MI	
Zip Code 49512-9523	Purpose of Disbursement Fundraising: Consulting/fundraising	Category/ Type 003
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6329.36
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

**A. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 3625 Ruffin Road Suite 100  
City San Diego State CA Zip Code 92123-1841  
Purpose of Disbursement credit card processing fee  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)  
State: District:

Date of Disbursement: 01 / 06 / 2014  
Amount of Each Disbursement this Period: 25.05  
Transaction ID : B-E-399  
Category/Type: 001

**B. 1053 Communications**

Full Name (Last, First, Middle Initial)  
Mailing Address 5014 Glendurgan Court  
City Holt State MI Zip Code 48842-9438  
Purpose of Disbursement Travel: Reimbursement see below  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)  
State: District:

Date of Disbursement: 02 / 12 / 2014  
Amount of Each Disbursement this Period: 443.43  
Transaction ID : B-E-444  
Original vendors exceeding reporting threshold itemized as memo transactions.  
Category/Type: 002

**C. South West Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 36647  
City Dallas State TX Zip Code 75235-1647  
Purpose of Disbursement Travel/airline ticket  
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: 224  
Transaction ID : B-S-149  
[MEMO ITEM]  
Subitemization of 1053 Communications(02/12/14)  
Category/Type: 002

**SUBTOTAL** of Disbursements This Page (optional) ..... 468.48  
**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 54 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. K(eight)</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 293 Main Street		Amount of Each Disbursement this Period 1375 <b>Transaction ID : B-E-396</b>
City Coopersville	State MI	
Purpose of Disbursement Advertising: Website		Category/ Type 004
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>B. Topfundraising.Com Llc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 3886 Old Elm Drive SE		Amount of Each Disbursement this Period 245 <b>Transaction ID : B-E-463</b>
City Kentwood	State MI	
Purpose of Disbursement Fundraising: Reimbursement see below		Category/ Type 003
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 245 <b>Transaction ID : B-S-166</b>
City Grand Rapids	State MI	
Purpose of Disbursement Postage		Category/ Type 003
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)	<b>[MEMO ITEM]</b> Subitemization of Topfundraising.Com Llc(02/21/14)
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1620.00
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 2761.4
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement Administrative/Salary/Overhead: Wages	<b>Transaction ID : B-E-593</b>
Candidate Name	Category/Type 001	
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Virginia A. Huff</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 319.98
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement Wages	<b>Transaction ID : B-S-211</b>
Candidate Name	Category/Type 001	
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)	<b>[MEMO ITEM]</b> Subitemization of Paychex(03/20/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Megan J Wells</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 1021.81
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement Salary	<b>Transaction ID : B-S-212</b>
Candidate Name	Category/Type 001	
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)	<b>[MEMO ITEM]</b> Subitemization of Paychex(03/20/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2761.40
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Adam Wright</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 3780 Raintree Drive		Amount of Each Disbursement this Period 1419.61
City Hudsonville State MI Zip Code 49426	Purpose of Disbursement Salary	
Candidate Name	Category/Type 001	Transaction ID : B-S-213
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:		[MEMO ITEM] Subitemization of Paychex(03/20/14)

Full Name (Last, First, Middle Initial) <b>B. Postmaster</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 49
City Grand Rapids State MI Zip Code 49506-1760	Purpose of Disbursement Administrative/Salary/Overhead: Postage	
Candidate Name	Category/Type 001	Transaction ID : B-E-447
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>c. The Maven Group</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 335 Bridge Street NW Apt. 1300		Amount of Each Disbursement this Period 130
City Grand Rapids State MI Zip Code 49504-8709	Purpose of Disbursement Computer/consulting	
Candidate Name	Category/Type 001	Transaction ID : B-E-439
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	179.00
<b>TOTAL</b> 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 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 570.03
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement Administrative/Salary/Overhead: Wages	<b>Transaction ID : B-E-519</b>
Candidate Name	Category/Type 001	
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Megan J Wells</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 297.27
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement Salary	<b>Transaction ID : B-S-189</b>
Candidate Name	Category/Type 001	
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)	<b>[MEMO ITEM]</b> Subitemization of Paychex(03/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Virginia A. Huff</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 84.49
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement Wages	<b>Transaction ID : B-S-190</b>
Candidate Name	Category/Type 001	
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)	<b>[MEMO ITEM]</b> Subitemization of Paychex(03/07/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	570.03
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. State Of Michigan</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 3024 W Grand Boulevard		Amount of Each Disbursement this Period 3233.59
City Detroit	State MI	
Zip Code 48202-6024	Purpose of Disbursement Payroll tax	Transaction ID : B-S-192
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(03/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address PO Box 70503		Amount of Each Disbursement this Period 129.12
City Charlotte	State NC	
Zip Code 28272-0503	Purpose of Disbursement Payroll tax	Transaction ID : B-S-191
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(03/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Theodore Company LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address PO Box 320412		Amount of Each Disbursement this Period 3233.59
City Alexandria	State VA	
Zip Code 22320-4412	Purpose of Disbursement Fundraising: Consulting/fundraising	Transaction ID : B-E-549
Candidate Name	003 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3233.59
<b>TOTAL</b> 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 118			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dykema Gossett</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 124 W Allegan Street Suite 800		Amount of Each Disbursement this Period 3000 <b>Transaction ID : B-E-374</b>
City Lansing State MI Zip Code 48933-1724	Purpose of Disbursement legal fees Candidate Name 001 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>B. C-Suite Strategic, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 5910 Blakely Drive NE		Amount of Each Disbursement this Period 3000 <b>Transaction ID : B-E-440</b>
City Belmont State MI Zip Code 49306-9016	Purpose of Disbursement Consulting Campaign Candidate Name 001 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>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 1411.46 <b>Transaction ID : B-E-594</b>
City Novi State MI Zip Code 48377-2951	Purpose of Disbursement Payroll Tax Candidate Name 001 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:	Original vendors exceeding reporting threshold itemized as memo transactions.

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7411.46
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Virginia A. Huff</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 82.52
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement Wages	Transaction ID : B-S-216
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(03/21/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Megan J Wells</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 362.81
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement Salary	Transaction ID : B-S-214
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(03/21/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address PO Box 70503		Amount of Each Disbursement this Period 306.45
City Charlotte	State NC	
Zip Code 28272-0503	Purpose of Disbursement Payroll Tax	Transaction ID : B-S-217
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(03/21/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. State Of Michigan</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 3024 W Grand Boulevard		Amount of Each Disbursement this Period 403.96
City Detroit	State MI	
Purpose of Disbursement Payroll tax	Category/ Type 001	
Candidate Name		Transaction ID : B-S-218
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>B. Adam Wright</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 3780 Raintree Drive		Amount of Each Disbursement this Period 518.85
City Hudsonville	State MI	
Purpose of Disbursement Salary	Category/ Type 001	
Candidate Name		Transaction ID : B-S-215
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>c. Brian Ellis</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address PO Box 6367		Amount of Each Disbursement this Period 403.96
City Grand Rapids	State MI	
Purpose of Disbursement Other: reimbursement see below	Category/ Type	
Candidate Name		Transaction ID : B-E-402
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	403.96
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Straight Talk</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address 9700 NW 112th Avenue		Amount of Each Disbursement this Period 49.32
City Medley State FL Zip Code 33178-1353	Purpose of Disbursement Phone 001	
Candidate Name	Category/Type	<b>Transaction ID : B-S-134</b> <b>[MEMO ITEM]</b> Subitemization of Brian Ellis(01/23/14)
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>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 2895 Radcliff Avenue SE		Amount of Each Disbursement this Period 59.76
City Grand Rapids State MI Zip Code 49512-1701	Purpose of Disbursement Office supplies 001	
Candidate Name	Category/Type	<b>Transaction ID : B-S-135</b> <b>[MEMO ITEM]</b> Subitemization of Brian Ellis(01/23/14)
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>c. Grand Rapids Area Chamber Of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 111 Pearl Street NW		Amount of Each Disbursement this Period 65
City Grand Rapids State MI Zip Code 49503-2804	Purpose of Disbursement Conference fee 001	
Candidate Name	Category/Type	<b>Transaction ID : B-S-131</b> <b>[MEMO ITEM]</b> Subitemization of Brian Ellis(01/23/14)
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Grand Rapids Area Chamber Of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 111 Pearl Street NW		Amount of Each Disbursement this Period 100 <b>Transaction ID : B-S-132</b>
City Grand Rapids	State MI	
Zip Code 49503-2804	Purpose of Disbursement conference fee	[MEMO ITEM] Subitemization of Brian Ellis(01/23/14)
Candidate Name	001 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>B. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 2400 <b>Transaction ID : B-E-545</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Compuoter/software	001 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>c. Perrigo Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 125 Ottawa Avenue NW		Amount of Each Disbursement this Period 132.5 <b>Transaction ID : B-E-585</b>
City Grand Rapids	State MI	
Zip Code 49503-2837	Purpose of Disbursement Printing/business cards	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2532.50
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brooktree Capital Management</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address PO Box 6367		Amount of Each Disbursement this Period 400 <b>Transaction ID : B-E-441</b>
City Grand Rapids	State MI	
Zip Code 49516-6367	Purpose of Disbursement Administrative/Salary/Overhead: Rent	Category/ Type 001
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>B. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 600 <b>Transaction ID : B-E-375</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement computer software	Category/ Type 001
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>c. 1053 Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 5014 Glendurgan Court		Amount of Each Disbursement this Period 5000 <b>Transaction ID : B-E-587</b>
City Holt	State MI	
Zip Code 48842-9438	Purpose of Disbursement Campaign Consulting	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 118			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brian Ellis</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address PO Box 6367		Amount of Each Disbursement this Period 1632.18
City Grand Rapids	State MI	
Zip Code 49516-6367	Purpose of Disbursement Inkind: Travel	Transaction ID : B-I-564
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>B. Amanda Roelofs Design</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 230 Sligh Boulevard NE		Amount of Each Disbursement this Period 6250
City Grand Rapids	State MI	
Zip Code 49505-3563	Purpose of Disbursement Advertising: Advertising/newspaper	Transaction ID : B-E-460
Candidate Name	Category/ Type 004	
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>c. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 3625 Ruffin Road Suite 100		Amount of Each Disbursement this Period 272.5
City San Diego	State CA	
Zip Code 92123-1841	Purpose of Disbursement credit card processing fee	Transaction ID : B-E-367
Candidate Name	Category/ Type 001	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8154.68
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial)  
**A. Paychex**

Mailing Address 29065 Cabot Drive

City State Zip Code  
Novi MI 48377-2951

Purpose of Disbursement  
Administrative/Salary/Overhead: Wages

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
577.63

Transaction ID : B-E-412

Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial)  
**B. Virginia A. Huff**

Mailing Address 107 S Main Street

City State Zip Code  
Rockford MI 49341-1221

Purpose of Disbursement  
wages/withholdings

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 10 / 2014

Amount of Each Disbursement this Period  
89.46

Transaction ID : B-S-137

[MEMO ITEM]  
Subitemization of Paychex(01/24/14)

Full Name (Last, First, Middle Initial)  
**c. Megan J Wells**

Mailing Address 223 Lafayette Avenue NE  
Apt. 2

City State Zip Code  
Grand Rapids MI 49503-3376

Purpose of Disbursement  
salary/withholding

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
297.27

Transaction ID : B-S-136

[MEMO ITEM]  
Subitemization of Paychex(01/24/14)

**SUBTOTAL** of Disbursements This Page (optional)..... 577.63

**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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. State Of Michigan</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 3024 W Grand Boulevard		Amount of Each Disbursement this Period 59.98
City Detroit	State MI	
Zip Code 48202-6024	Purpose of Disbursement payroll tax	Transaction ID : B-S-139
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(01/24/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address PO Box 70503		Amount of Each Disbursement this Period 130.92
City Charlotte	State NC	
Zip Code 28272-0503	Purpose of Disbursement payroll taxes	Transaction ID : B-S-138
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(01/24/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Megan J Wells</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 12.99
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement Fundraising: reimbursement see below	Transaction ID : B-E-392
Candidate Name	003 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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12.99
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		Date of Disbursement MM / DD / YYYY 01 / 09 / 2014
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 64.4 <b>Transaction ID : B-E-378</b>
City Grand Rapids	State MI	
Zip Code 49506-1760	Purpose of Disbursement Administrative/Salary/Overhead: postage	Category/ Type 001
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>B. Timothy J. Brutsche</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2014
Mailing Address 654 Country Club Drive		Amount of Each Disbursement this Period 652.68 <b>Transaction ID : B-I-618</b>
City Battle Creek	State MI	
Zip Code 49015-3651	Purpose of Disbursement Inkind: Food/ beverage	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>c. Ionia Area Chamber Of Commerce</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 439 W Main Street		Amount of Each Disbursement this Period 105 <b>Transaction ID : B-E-467</b>
City Ionia	State MI	
Zip Code 48846-1553	Purpose of Disbursement Campaign Event: Petitioning	Category/ Type 007
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	822.08
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

**A. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 3625 Ruffin Road Suite 100

City San Diego State CA Zip Code 92123-1841

Purpose of Disbursement credit card processing fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 16 / 2014

Amount of Each Disbursement this Period: 5

Transaction ID : B-E-398

Category/Type: 001

**B. Grassroots Targeting, Llc**

Full Name (Last, First, Middle Initial)  
Mailing Address 707 Prince Street

City Alexandria State VA Zip Code 22314-3004

Purpose of Disbursement Fundraising: Database

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 17 / 2014

Amount of Each Disbursement this Period: 5500

Transaction ID : B-E-461

Category/Type: 003

**C. Postmaster**

Full Name (Last, First, Middle Initial)  
Mailing Address 1451 Lake Drive SE

City Grand Rapids State MI Zip Code 49506-1760

Purpose of Disbursement Administrative/Salary/Overhead: Postage

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: 245

Transaction ID : B-E-507

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 5750.00

**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 118			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jamestown Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 12897.49
City Princeton	State NJ	
Zip Code 08540-9646	Purpose of Disbursement Advertising: Advertising/TV production	Transaction ID : B-E-547
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>B. Battle Creek Country Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 318 Country Club Drive		Amount of Each Disbursement this Period 652.68
City Battle Creek	State MI	
Zip Code 49015-3622	Purpose of Disbursement Food/ beverage	Transaction ID : B-S-219
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)	[MEMO ITEM] Subitemization of Timothy Brutsche(03/21/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Brooktree Capital Management</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address PO Box 6367		Amount of Each Disbursement this Period 400
City Grand Rapids	State MI	
Zip Code 49516-6367	Purpose of Disbursement Office rent	Transaction ID : B-E-553
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13297.49
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dykema Gossett</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 124 W Allegan Street Suite 800		Amount of Each Disbursement this Period 1410 <b>Transaction ID : B-E-418</b>
City Lansing	State MI Zip Code 48933-1724	
Purpose of Disbursement Legal Services	Category/Type 001	
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>B. C-Suite Strategic, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 5910 Blakely Drive NE		Amount of Each Disbursement this Period 3750 <b>Transaction ID : B-E-380</b>
City Belmont	State MI Zip Code 49306-9016	
Purpose of Disbursement Consulting/Campaign	Category/Type 001	
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>c. K(eight)</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 293 Main Street		Amount of Each Disbursement this Period 675 <b>Transaction ID : B-E-420</b>
City Coopersville	State MI Zip Code 49404-1232	
Purpose of Disbursement Advertising: Website services	Category/Type 004	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5835.00
<b>TOTAL</b> 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 118			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cabrio On Ionia, C/O CWD Real Estate Investment</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 50 Louis Street NW Suite 600		Amount of Each Disbursement this Period 100 <b>Transaction ID : B-E-546</b>
City Grand Rapids	State MI Zip Code 49503-2633	
Purpose of Disbursement Administrative/Salary/Overhead: Parking		Category/Type 001
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>B. The Maven Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 335 Bridge Street NW Apt. 1300		Amount of Each Disbursement this Period 29.84 <b>Transaction ID : B-E-548</b>
City Grand Rapids	State MI Zip Code 49504-8709	
Purpose of Disbursement Website services		Category/Type 001
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>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 132 <b>Transaction ID : B-E-411</b>
City Novi	State MI Zip Code 48377-2951	
Purpose of Disbursement payroll charges		Category/Type 001
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	261.84
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Topfundraising.Com Llc</b>			Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 3886 Old Elm Drive SE			Amount of Each Disbursement this Period 94 <b>Transaction ID : B-E-465</b>
City Kentwood	State MI	Zip Code 49512-9523	
Purpose of Disbursement Reimbursemen/t see below		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.
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>B. City Of Grand Rapids</b>			Date of Disbursement MM / DD / YYYY 01 / 16 / 2014
Mailing Address 300 Monroe Avenue NW			Amount of Each Disbursement this Period 8 <b>Transaction ID : B-S-178</b>
City Grand Rapids	State MI	Zip Code 49503-2206	
Purpose of Disbursement Parking		Category/ Type 001	<b>[MEMO ITEM]</b> Subitemization of Topfundraising.Com Llc(02/21/14)
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>c. City Of Grand Rapids</b>			Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 300 Monroe Avenue NW			Amount of Each Disbursement this Period 10 <b>Transaction ID : B-S-172</b>
City Grand Rapids	State MI	Zip Code 49503-2206	
Purpose of Disbursement Parking		Category/ Type 001	<b>[MEMO ITEM]</b> Subitemization of Topfundraising.Com Llc(02/21/14)
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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	94.00
<b>TOTAL</b> 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 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 6
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-168
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(02/21/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 7
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-169
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(02/21/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 10
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement parking	Transaction ID : B-S-170
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(02/21/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 6
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-171
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(02/21/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 4
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-167
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(02/21/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 7
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-173
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(02/21/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 9
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-174
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(02/21/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 9
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-175
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(02/21/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 10
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement parking	Transaction ID : B-S-176
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(02/21/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. City Of Grand Rapids</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2014
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 8
City Grand Rapids	State MI	Zip Code 49503-2206
Purpose of Disbursement Parking	Category/ Type 001	
Candidate Name	Transaction ID : B-S-177	
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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(02/21/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Topfundraising.Com Llc</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2014
Mailing Address 3886 Old Elm Drive SE		Amount of Each Disbursement this Period 133
City Kentwood	State MI	Zip Code 49512-9523
Purpose of Disbursement Reimbursement see below	Category/ Type 001	
Candidate Name	Transaction ID : B-E-383	
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City Of Grand Rapids</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 7
City Grand Rapids	State MI	Zip Code 49503-2206
Purpose of Disbursement parking	Category/ Type 001	
Candidate Name	Transaction ID : B-S-116	
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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	133.00
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 6
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement parking	Transaction ID : B-S-117
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 8
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement parking	Transaction ID : B-S-118
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 9
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement parking	Transaction ID : B-S-119
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 79 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period ..... 5
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	<b>Transaction ID : B-S-110</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period ..... 10
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement parking	<b>Transaction ID : B-S-112</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period ..... 7
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	<b>Transaction ID : B-S-113</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 0.00
<b>TOTAL</b> 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 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 7
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement parking	Transaction ID : B-S-114
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 10
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-108
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 6
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-115
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 81 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 5
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-111
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 5
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-109
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 7
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement parking	Transaction ID : B-S-120
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 82 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 11
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement parking	Transaction ID : B-S-104
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 11
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-105
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 10
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-106
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 83 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. City Of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 300 Monroe Avenue NW		Amount of Each Disbursement this Period 9
City Grand Rapids	State MI	
Zip Code 49503-2206	Purpose of Disbursement Parking	Transaction ID : B-S-107
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Topfundraising.Com Llc(01/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jamestown Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 6260
City Princeton	State NJ	
Zip Code 08540-9646	Purpose of Disbursement Advertising: Advertising/TV air time	Transaction ID : B-E-615
Candidate Name	004 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>c. Jamestown Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 500
City Princeton	State NJ	
Zip Code 08540-9646	Purpose of Disbursement Consulting Campaign	Transaction ID : B-E-397
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6760.00
<b>TOTAL</b> 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 84 OF 118			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. C-Suite Strategic, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 5910 Blakely Drive NE		Amount of Each Disbursement this Period 2840 <b>Transaction ID : B-E-504</b>
City Belmont	State MI Zip Code 49306-9016	
Purpose of Disbursement Consulting/campaign	Category/Type 001	
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>B. Megan J Wells</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 59.92 <b>Transaction ID : B-E-592</b>
City Grand Rapids	State MI Zip Code 49503-3376	
Purpose of Disbursement Reimbursement see below	Category/Type 001	
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 80 <b>Transaction ID : B-E-390</b>
City Novi	State MI Zip Code 48377-2951	
Purpose of Disbursement payroll charges	Category/Type 001	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2979.92
<b>TOTAL</b> 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 85 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. 1053 Communications</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 5014 Glendurgan Court		Amount of Each Disbursement this Period 5000 <b>Transaction ID : B-E-446</b>
City Holt State MI Zip Code 48842-9438	Purpose of Disbursement Consulting/Campaign Candidate Name Category/Type 001	
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>B. J.W Marriot</b>		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address 1331 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 1487.94 <b>Transaction ID : B-S-200</b>
City Washington State DC Zip Code 20004-1710	Purpose of Disbursement Lodging/hotel Candidate Name Category/Type 002	
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:	<b>[MEMO ITEM]</b> Subitemization of Brian Ellis(03/19/14)

Full Name (Last, First, Middle Initial) <b>c. Topfundraising.Com Llc</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2014
Mailing Address 3886 Old Elm Drive SE		Amount of Each Disbursement this Period 1500 <b>Transaction ID : B-E-376</b>
City Kentwood State MI Zip Code 49512-9523	Purpose of Disbursement Fundraising: Consulting/fundraising Candidate Name Category/Type 003	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6500.00
<b>TOTAL</b> 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 86 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Perrigo Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 125 Ottawa Avenue NW		Amount of Each Disbursement this Period 2570.85
City Grand Rapids	State MI	
Zip Code 49503-2837	Purpose of Disbursement Fundraising: Printing	<b>Transaction ID : B-E-584</b>
Candidate Name	003 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>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 1122.44
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement Administrative/Salary/Overhead: Wages	<b>Transaction ID : B-E-454</b>
Candidate Name	001 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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Virginia A. Huff</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 265.85
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement Wages	<b>Transaction ID : B-S-161</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Subitemization of Paychex(02/20/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3693.29
<b>TOTAL</b> 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 87 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Megan J Wells</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 856.59
City Grand Rapids	State MI	Zip Code 49503-3376
Purpose of Disbursement Salary	Category/ Type 001	
Candidate Name	Transaction ID : B-S-160	
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:	[MEMO ITEM] Subitemization of Paychex(02/20/14)	

Full Name (Last, First, Middle Initial) <b>B. 1053 Communications</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2014
Mailing Address 5014 Glendurgan Court		Amount of Each Disbursement this Period 5000
City Holt	State MI	Zip Code 48842-9438
Purpose of Disbursement Consulting Campaign	Category/ Type 001	
Candidate Name	Transaction ID : B-E-387	
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>c. Paychex</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 65
City Novi	State MI	Zip Code 48377-2951
Purpose of Disbursement payroll charges	Category/ Type 001	
Candidate Name	Transaction ID : B-E-437	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5065.00
<b>TOTAL</b> 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 88 OF 118			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. 834 Design And Marketing</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2014
Mailing Address 560 5th Street NW Suite 205		Amount of Each Disbursement this Period 1530
City Grand Rapids	State MI Zip Code 49504-5219	
Purpose of Disbursement Advertising: Advertising/internet	Category/Type 004	<b>Transaction ID : B-E-373</b>
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>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 523.01
City Novi	State MI Zip Code 48377-2951	
Purpose of Disbursement Administrative/Salary/Overhead: wages	Category/Type 001	<b>Transaction ID : B-E-438</b>
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Megan J Wells</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 297.27
City Grand Rapids	State MI Zip Code 49503-3376	
Purpose of Disbursement Salary	Category/Type 001	<b>Transaction ID : B-S-145</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Paychex(02/07/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2053.01
<b>TOTAL</b> 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 89 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Virginia A. Huff</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 53.78
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement Wages	Transaction ID : B-S-146
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(02/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. State Of Michigan</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 3024 W Grand Boulevard		Amount of Each Disbursement this Period 54.03
City Detroit	State MI	
Zip Code 48202-6024	Purpose of Disbursement Payroll tax	Transaction ID : B-S-148
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(02/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address PO Box 70503		Amount of Each Disbursement this Period 117.93
City Charlotte	State NC	
Zip Code 28272-0503	Purpose of Disbursement Payroll tax	Transaction ID : B-S-147
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(02/07/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 90 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cabrio On Ionia, C/O CWD Real Estate Investment</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 50 Louis Street NW Suite 600		Amount of Each Disbursement this Period 100 <b>Transaction ID : B-E-395</b>
City Grand Rapids	State MI Zip Code 49503-2633	
Purpose of Disbursement Administrative/Salary/Overhead: Parking		Category/Type 001
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>B. Ellis Parking Company</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 40 Pearl Street NW Suite 824		Amount of Each Disbursement this Period 300 <b>Transaction ID : B-E-590</b>
City Grand Rapids	State MI Zip Code 49503-3031	
Purpose of Disbursement Fundraising: Parking		Category/Type 003
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>c. Dykema Gossett</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 124 W Allegan Street Suite 800		Amount of Each Disbursement this Period 5508 <b>Transaction ID : B-E-505</b>
City Lansing	State MI Zip Code 48933-1724	
Purpose of Disbursement Legal services		Category/Type 001
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5908.00
<b>TOTAL</b> 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 91 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Devon &amp; Blakely</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 1331 F Street NW		Amount of Each Disbursement this Period 254.93
City Washington	State DC Zip Code 20004-1107	
Purpose of Disbursement fundraising/food	Category/Type 003	<b>Transaction ID : B-S-180</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Mark Valente(02/25/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 3625 Ruffin Road Suite 100		Amount of Each Disbursement this Period 142.5
City San Diego	State CA Zip Code 92123-1841	
Purpose of Disbursement credit card processing fee	Category/Type 001	<b>Transaction ID : B-E-416</b>
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>c. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 614 E Service Drive		Amount of Each Disbursement this Period 867
City Detroit	State MI Zip Code 48242-1127	
Purpose of Disbursement Airfare	Category/Type 002	<b>Transaction ID : B-S-199</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Brian Ellis(03/19/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	142.50
<b>TOTAL</b> 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 92 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial)  
**A. Complete Campaigns**

Mailing Address 3625 Ruffin Road  
Suite 100

City San Diego State CA Zip Code 92123-1841

Purpose of Disbursement Credit card processing fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 11 / 2014

Amount of Each Disbursement this Period: 50

Transaction ID : B-E-430

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**B. Megan J Wells**

Mailing Address 223 Lafayette Avenue NE  
Apt. 2

City Grand Rapids State MI Zip Code 49503-3376

Purpose of Disbursement Reimbursement see below

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 27 / 2014

Amount of Each Disbursement this Period: 209.22

Transaction ID : B-E-641

Original vendors exceeding reporting threshold itemized as memo transactions.

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**c. Megan J Wells**

Mailing Address 223 Lafayette Avenue NE  
Apt. 2

City Grand Rapids State MI Zip Code 49503-3376

Purpose of Disbursement Mileage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 22 / 2014

Amount of Each Disbursement this Period: 18.92

Transaction ID : B-S-224

[MEMO ITEM]  
Subitemization of Megan Wells(03/27/14)

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 259.22

**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 93 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Megan J Wells</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 72
City Grand Rapids	State MI Zip Code 49503-3376	
Purpose of Disbursement mileage	001	<b>Transaction ID : B-S-225</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Megan Wells(03/27/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Megan J Wells</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 85.12
City Grand Rapids	State MI Zip Code 49503-3376	
Purpose of Disbursement Mileage	001	<b>Transaction ID : B-S-223</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Megan Wells(03/27/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 20.09
City Grand Rapids	State MI Zip Code 49506-1760	
Purpose of Disbursement Postage	001	<b>Transaction ID : B-S-221</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Megan Wells(03/27/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 94 OF 118			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Perrigo Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 125 Ottawa Avenue NW			Amount of Each Disbursement this Period 636.51 <b>Transaction ID : B-E-640</b>
City Grand Rapids	State MI	Zip Code 49503-2837	
Purpose of Disbursement Fundraising: Printing		Category/ Type 003	
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>B. Neff &amp; Associates CPA, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 125 Ottawa Avenue NW Suite 403			Amount of Each Disbursement this Period 350 <b>Transaction ID : B-E-502</b>
City Grand Rapids	State MI	Zip Code 49503-2873	
Purpose of Disbursement Consulting/accounting		Category/ Type 001	
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>c. Adam Wright</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 3780 Raintree Drive			Amount of Each Disbursement this Period 93.24 <b>Transaction ID : B-E-586</b>
City Hudsonville	State MI	Zip Code 49426	
Purpose of Disbursement Reimbursement see below		Category/ Type 001	
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)		Original vendors exceeding reporting threshold itemized as memo transactions.
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1079.75
<b>TOTAL</b> 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 95 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ionia Area Chamber Of Commerce</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 439 W Main Street			Amount of Each Disbursement this Period 20 <b>Transaction ID : B-S-207</b>
City Ionia	State MI	Zip Code 48846-1553	
Purpose of Disbursement Petitioning		Category/ Type 001	<b>[MEMO ITEM]</b> Subitemization of Adam Wright(03/19/14)
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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>B. Brooktree Capital Management</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address PO Box 6367			Amount of Each Disbursement this Period 400 <b>Transaction ID : B-E-382</b>
City Grand Rapids	State MI	Zip Code 49516-6367	
Purpose of Disbursement Office Rent		Category/ Type 001	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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>c. Perrigo Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 125 Ottawa Avenue NW			Amount of Each Disbursement this Period 2024.69 <b>Transaction ID : B-E-551</b>
City Grand Rapids	State MI	Zip Code 49503-2837	
Purpose of Disbursement Administrative/Salary/Overhead: Printing		Category/ Type 001	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2424.69
<b>TOTAL</b> 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 96 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brian Ellis</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address PO Box 6367		Amount of Each Disbursement this Period 2354.94
City Grand Rapids	State MI	
Zip Code 49516-6367	Purpose of Disbursement Inkind: Travel	Transaction ID : B-I-563
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>B. Grassroots Targeting, Llc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 707 Prince Street		Amount of Each Disbursement this Period 1016.58
City Alexandria	State VA	
Zip Code 22314-3004	Purpose of Disbursement Fundraising: Mailing list	Transaction ID : B-E-501
Candidate Name	Category/ Type 003	
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>c. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 98
City Grand Rapids	State MI	
Zip Code 49506-1760	Purpose of Disbursement Administrative/Salary/Overhead: Postage	Transaction ID : B-E-588
Candidate Name	Category/ Type 001	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3469.52
<b>TOTAL</b> 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 97 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 1064.9
City Novi	State MI	
Zip Code 48377-2951	Category/ Type 001	<b>Transaction ID : B-E-384</b>
Purpose of Disbursement Administrative/Salary/Overhead: wages	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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Virginia A. Huff</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 208.32
City Rockford	State MI	
Zip Code 49341-1221	Category/ Type 001	<b>Transaction ID : B-S-122</b>
Purpose of Disbursement Wages	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)	<b>[MEMO ITEM]</b> Subitemization of Paychex(01/10/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Megan J Wells</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 856.58
City Grand Rapids	State MI	
Zip Code 49503-3376	Category/ Type 001	<b>Transaction ID : B-S-121</b>
Purpose of Disbursement Salary	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)	<b>[MEMO ITEM]</b> Subitemization of Paychex(01/10/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1064.90
<b>TOTAL</b> 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 98 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 614 E Service Drive		Amount of Each Disbursement this Period 244
City Detroit	State MI Zip Code 48242-1127	
Purpose of Disbursement Airfare	Category/Type 002	<b>Transaction ID : B-S-201</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Brian Ellis(03/19/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Renaissance Financial Group</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 320 N Main Street Suite 104		Amount of Each Disbursement this Period 1167.5
City Ann Arbor	State MI Zip Code 48104-1127	
Purpose of Disbursement Consulting/Accounting	Category/Type 001	<b>Transaction ID : B-E-451</b>
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>c. Amanda Roelofs Design</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 230 Sligh Boulevard NE		Amount of Each Disbursement this Period 500
City Grand Rapids	State MI Zip Code 49505-3563	
Purpose of Disbursement Advertising: Advertising/newspaper	Category/Type 004	<b>Transaction ID : B-E-510</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1667.50
<b>TOTAL</b> 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 99 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Virginia A. Huff</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 25.52
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement Reimbursement see below	<b>Transaction ID : B-E-503</b>
Candidate Name	001 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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Postmaster</b>		Date of Disbursement MM / DD / YYYY 12 / 17 / 2013
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 5.8
City Grand Rapids	State MI	
Zip Code 49506-1760	Purpose of Disbursement Postage	<b>Transaction ID : B-S-181</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Subitemization of Virginia Huff(02/27/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Postmaster</b>		Date of Disbursement MM / DD / YYYY 01 / 14 / 2014
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 1.12
City Grand Rapids	State MI	
Zip Code 49506-1760	Purpose of Disbursement Postage	<b>Transaction ID : B-S-182</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Subitemization of Virginia Huff(02/27/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	25.52
<b>TOTAL</b> 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 100 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2014
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 2.38
City Grand Rapids	State MI	
Zip Code 49506-1760	Purpose of Disbursement Postage	Transaction ID : B-S-183
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Virginia Huff(02/27/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Postmaster</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 2.66
City Grand Rapids	State MI	
Zip Code 49506-1760	Purpose of Disbursement Postage	Transaction ID : B-S-184
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Virginia Huff(02/27/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Postmaster</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2014
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 10.69
City Grand Rapids	State MI	
Zip Code 49506-1760	Purpose of Disbursement Postage	Transaction ID : B-S-185
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Virginia Huff(02/27/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 101 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address 1451 Lake Drive SE		Amount of Each Disbursement this Period 2.87
City Grand Rapids	State MI	
Zip Code 49506-1760	Purpose of Disbursement Postage	<b>Transaction ID : B-S-186</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Subitemization of Virginia Huff(02/27/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. K(eight)</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2014
Mailing Address 293 Main Street		Amount of Each Disbursement this Period 1125
City Coopersville	State MI	
Zip Code 49404-1232	Purpose of Disbursement Advertising: website services	<b>Transaction ID : B-E-509</b>
Candidate Name	004 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>c. Renaissance Financial Group</b>		Date of Disbursement MM / DD / YYYY 03 / 12 / 2014
Mailing Address 320 N Main Street Suite 104		Amount of Each Disbursement this Period 95
City Ann Arbor	State MI	
Zip Code 48104-1127	Purpose of Disbursement Consulting/Accounting	<b>Transaction ID : B-E-541</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1220.00
<b>TOTAL</b> 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 102 OF 118			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 65 <b>Transaction ID : B-E-595</b>
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement Payroll charges	Category/ Type 001
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>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 542.72 <b>Transaction ID : B-E-455</b>
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement Administrative/Salary/Overhead: Wages	Category/ Type 001
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:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>c. Virginia A. Huff</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 66.65 <b>Transaction ID : B-S-165</b>
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement Wages	Category/ Type 001
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:	<b>[MEMO ITEM]</b> Subitemization of Paychex(02/20/14)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	607.72
<b>TOTAL</b> 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 103 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Megan J Wells</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 297.26
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement Salary	Transaction ID : B-S-164
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)	[MEMO ITEM] Subitemization of Paychex(02/20/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. State Of Michigan</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address 3024 W Grand Boulevard		Amount of Each Disbursement this Period 56.18
City Detroit	State MI	
Zip Code 48202-6024	Purpose of Disbursement Payroll taxes	Transaction ID : B-S-163
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)	[MEMO ITEM] Subitemization of Paychex(02/20/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address PO Box 70503		Amount of Each Disbursement this Period 122.63
City Charlotte	State NC	
Zip Code 28272-0503	Purpose of Disbursement Payroll tax	Transaction ID : B-S-162
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)	[MEMO ITEM] Subitemization of Paychex(02/20/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 104 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 516.65
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement payroll tax	<b>Transaction ID : B-E-385</b>
Candidate Name	001 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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Virginia A. Huff</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 49.81
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement payroll tax	<b>Transaction ID : B-S-124</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Paychex(01/10/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Megan J Wells</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 297.27
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement payroll tax	<b>Transaction ID : B-S-123</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Subitemization of Paychex(01/10/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	516.65
<b>TOTAL</b> 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 105 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address PO Box 70503		Amount of Each Disbursement this Period 116.48
City Charlotte	State NC	Zip Code 28272-0503
Purpose of Disbursement payroll tax	Category/ Type 001	
Candidate Name	Transaction ID : B-S-125	
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:	[MEMO ITEM] Subitemization of Paychex(01/10/14)	

Full Name (Last, First, Middle Initial) <b>B. State Of Michigan</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 3024 W Grand Boulevard		Amount of Each Disbursement this Period 53.09
City Detroit	State MI	Zip Code 48202-6024
Purpose of Disbursement payroll tax	Category/ Type 001	
Candidate Name	Transaction ID : B-S-126	
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:	[MEMO ITEM] Subitemization of Paychex(01/10/14)	

Full Name (Last, First, Middle Initial) <b>c. Ionia Area Chamber Of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 439 W Main Street		Amount of Each Disbursement this Period 80
City Ionia	State MI	Zip Code 48846-1553
Purpose of Disbursement Conference fee	Category/ Type 001	
Candidate Name	Transaction ID : B-E-639	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	80.00
<b>TOTAL</b> 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 106 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michigan Retailers Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 603 S Washington Avenue		Amount of Each Disbursement this Period 289 <b>Transaction ID : B-E-423</b>
City Lansing	State MI	
Zip Code 48933-2381	Purpose of Disbursement Credit Card processing fee	Category/ Type 001
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>B. The Maven Group</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 335 Bridge Street NW Apt. 1300		Amount of Each Disbursement this Period 65 <b>Transaction ID : B-E-462</b>
City Grand Rapids	State MI	
Zip Code 49504-8709	Purpose of Disbursement Computer/Consulting	Category/ Type 001
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>c. J.W Marriot</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 1331 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 1388.18 <b>Transaction ID : B-S-202</b>
City Washington	State DC	
Zip Code 20004-1710	Purpose of Disbursement Lodging/hotel	Category/ Type 002
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	354.00
<b>TOTAL</b> 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 107 OF 118			
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. 834 Design And Marketing</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 560 5th Street NW Suite 205		Amount of Each Disbursement this Period 2443.75
City Grand Rapids	State MI Zip Code 49504-5219	
Purpose of Disbursement Advertising: Advertising/internet	Category/Type 004	<b>Transaction ID : B-E-372</b>
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>B. Megan J Wells</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 165.8
City Grand Rapids	State MI Zip Code 49503-3376	
Purpose of Disbursement Reimbursement see below	Category/Type 001	<b>Transaction ID : B-E-550</b>
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Megan J Wells</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 10.07
City Grand Rapids	State MI Zip Code 49503-3376	
Purpose of Disbursement Mileage reimbursement	Category/Type 002	<b>Transaction ID : B-S-198</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Megan Wells(03/12/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2609.55
<b>TOTAL</b> 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 108 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Megan J Wells</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 665.00
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement Mileage reimbursement	Transaction ID : B-S-197
Candidate Name	Category/Type 002	
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)	[MEMO ITEM] Subitemization of Megan Wells(03/12/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 65.00
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement Payroll charges	Transaction ID : B-E-453
Candidate Name	Category/Type 001	
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>c. Aristotle International, Inc.</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 600.00
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Computer software	Transaction ID : B-E-391
Candidate Name	Category/Type 001	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	665.00
<b>TOTAL</b> 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 109 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. C-Suite Strategic, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 5910 Blakely Drive NE		Amount of Each Disbursement this Period 300 <b>Transaction ID : B-E-389</b>
City Belmont	State MI Zip Code 49306-9016	
Purpose of Disbursement Fundraising: reimbursement see below		Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/Type 003
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Grand Rapids Area Chamber Of Commerce</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 111 Pearl Street NW		Amount of Each Disbursement this Period 300 <b>Transaction ID : B-S-127</b>
City Grand Rapids	State MI Zip Code 49503-2804	
Purpose of Disbursement Fund raising/mailling labels		[MEMO ITEM] Subitemization of C-Suite Strategic, LLC(01/10/14)
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/Type 003
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mark Valente III</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address 7055 Leestone Street		Amount of Each Disbursement this Period 295.33 <b>Transaction ID : B-I-486</b>
City Springfield	State VA Zip Code 22151-3520	
Purpose of Disbursement Inkind: Fundraiser/food/beverage		Category/Type
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	595.33
<b>TOTAL</b> 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 110 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. National Research, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 146 State Route 34 Suite 250		Amount of Each Disbursement this Period 25000 <b>Transaction ID : B-E-417</b>
City Holmdel State NJ Zip Code 07733-2417	Purpose of Disbursement Polling: Polling Expense Category/Type 005	
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>B. Regan Lamothe</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 9760 Ravine Ridge Dr.		Amount of Each Disbursement this Period 2600 <b>Transaction ID : B-I-637</b>
City Caledonia State MI Zip Code 49316	Purpose of Disbursement Inkind: Advertising/radio production 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>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 1183.34 <b>Transaction ID : B-E-518</b>
City Novi State MI Zip Code 48377-2951	Purpose of Disbursement Administrative/Salary/Overhead: Wages Category/Type 001	
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	28783.34
<b>TOTAL</b> 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 111 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Virginia A. Huff</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 107 S Main Street		Amount of Each Disbursement this Period 326.76
City Rockford	State MI	
Zip Code 49341-1221	Purpose of Disbursement Wages	Transaction ID : B-S-188
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(03/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Megan J Wells</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 223 Lafayette Avenue NE Apt. 2		Amount of Each Disbursement this Period 856.58
City Grand Rapids	State MI	
Zip Code 49503-3376	Purpose of Disbursement Salary	Transaction ID : B-S-187
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Paychex(03/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jamestown Associates</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 95150
City Princeton	State NJ	
Zip Code 08540-9646	Purpose of Disbursement Advertising: Advertising/TV	Transaction ID : B-E-520
Candidate Name	004 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	95150.00
<b>TOTAL</b> 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 112 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Perrigo Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 125 Ottawa Avenue NW		Amount of Each Disbursement this Period 21.2
City Grand Rapids	State MI	
Zip Code 49503-2837	Purpose of Disbursement Advertising: Printing	<b>Transaction ID : B-E-379</b>
Candidate Name	004 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>B. Ada Business Association</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address PO Box 629		Amount of Each Disbursement this Period 250
City Ada	State MI	
Zip Code 49301-0629	Purpose of Disbursement Petitioning	<b>Transaction ID : B-E-540</b>
Candidate Name	001 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>C.</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	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	271.20
<b>TOTAL</b> This Period (last page this line number only).....	246331.75



**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 113 OF 118	
	<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)  
**Brian Ellis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brian Ellis for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address PO Box 6568		Amount of Each Disbursement this Period 2354.94
City Grand Rapids	State MI	
Zip Code 49516-6568	Purpose of Disbursement Travel	<b>Transaction ID : B-I-565</b>
Candidate Name	002 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)	<b>[MEMO ITEM]</b> Inkind Donation Made
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brian Ellis for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address PO Box 6568		Amount of Each Disbursement this Period 1632.18
City Grand Rapids	State MI	
Zip Code 49516-6568	Purpose of Disbursement Travel	<b>Transaction ID : B-I-566</b>
Candidate Name	002 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)	<b>[MEMO ITEM]</b> Inkind Donation Made
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</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	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	0.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Transaction ID : **SC/10-L1**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

**Brian Ellis**

Primary  
 General  
 Other (specify) ▼

Mailing Address  
PO Box 6367

City State ZIP Code  
Grand Rapids MI 49516-6367

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
50000 0 50000

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 50000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Brian Ellis for Congress** Transaction ID : **SC/10-L2**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Brian Ellis** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
PO Box 6367

City State ZIP Code  
Grand Rapids MI 49516-6367

Original Amount of Loan 120000	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period 120000
-----------------------------------	---------------------------------	---

**TERMS**

Date Incurred: M 12 / D 27 / Y 2013  
Date Due: M / D / Y None  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 120000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Brian Ellis for Congress** Transaction ID : **SC/10-L3**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Brian Ellis</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 6367		

City	State	ZIP Code
Grand Rapids	MI	49516-6367

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000	0	30000

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	M 12 / D 31 / Y 2013	M / D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	30000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Brian Ellis for Congress**

Transaction ID : **SC/10-L4**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Brian Ellis**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
PO Box 6367

City State ZIP Code  
Grand Rapids MI 49516-6367

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
200000 0 200000

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 03 / D 28 / Y 2014 M M / D D / Y None 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 200000.00  
**TOTALS** This Period (last page in this line only)..... ▶ 400000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Brian Ellis for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**1053 Communications**

Mailing Address 5014 Glendurgan Court

City State Zip Code  
 Holt MI 48842-9438

Nature of Debt (Purpose):  
 Advertising: Canvassing

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10-DEBT659</b>	
<input type="text" value="0"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="100"/>	<input type="text" value="0"/>
		Outstanding Balance at Close of This Period
		<input type="text" value="100"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="100.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="100.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="400000.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="400100.00"/>