

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

2013 AUG -11 AM 10:31  
12FE4MS  
FEC MAIL CENTER

Friends of WSUGAM

ADDRESS (number and street)

PO Box 4406

Check if different than previously reported. (ACC)

Detroit

MI 48244-0406

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

00452961

3. IS THIS REPORT

NEW (N) OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

MM / DD / YYYY

in the State of

State

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

State

5. Covering Period

07 / 01 / 2013

through

06 / 30 / 2013

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

Douglas Strzyniarz

Signature of Treasurer

*Douglas Strzyniarz*

Date

07 / 31 / 2013

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 3X  
Rev. 12/2004

13031102861

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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

Page 2

Write or Type Committee Name

Friends of WSUSOM

Report Covering the Period:

From:

01 ' 01 ' 2013

To:

06 ' 30 ' 2013

COLUMN A  
This Period

COLUMN B  
Calendar Year-to-Date

6. (a) Cash on Hand January 1, <u>2013</u>	<u>12,612.65</u>	<u>12,612.65</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>12,612.65</u>	<u>12,612.65</u>
(c) Total Receipts (from Line 19).....	<u>21,400.00</u>	<u>21,400.00</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>34,012.65</u>	<u>34,012.65</u>
7. Total Disbursements (from Line 31).....	<u>25,414.01</u>	<u>25,414.01</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>8,598.64</u>	<u>8,598.64</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0.00</u>	<u>0.00</u>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0.00</u>	<u>0.00</u>



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

**For further information contact:**

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

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

13031102862

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Friends of WSUSOM**

Report Covering the Period:

From:

**01 01 2013**

To:

**06 30 2013**

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

**21,400.00**

**21,400.00**

(ii) Unitemized.....

**0.00**

**0.00**

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

**21,400.00**

**21,400.00**

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)..... ▶

**21,400.00**

**21,400.00**

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

17. Other Federal Receipts

(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

**21,400.00**

**21,400.00**

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

13031102863

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....	17,164.01	17,164.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	17,164.01	17,164.01
22. Transfers to Affiliated/Other Party Committees .....		
28. Contributions to Federal Candidates/Committees and Other Political Committees .....	2,950.00	2,950.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....	5,300.00	5,300.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25,414.01	25,414.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	25,414.01	25,414.01

13031102864

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Expenditures**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	21,400.00	21,400.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21,400.00	21,400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	17,164.01	17,164.01
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17,164.01	17,164.01

13031102865

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

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

FOR LINE NUMBER: PAGE 1 OF 7

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Friends of WSU90M**

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

Mailing Address  
**10228 Merrick Drive**

City **Troy** State **MI** Zip Code **48098**

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

Name of Employer **Wayne State University** Occupation **Physician**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1,200.00**

Date of Receipt  
**04 / 03 / 2013**

Amount of Each Receipt this Period  
**1,200.00**

B. Full Name (Last, First, Middle Initial)  
**Andre Konksi**

Mailing Address  
**411 S. Old Woodward Ave Unit 718**

City **Birmingham** State **MI** Zip Code **48009**

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

Name of Employer **Wayne State University** Occupation **Physician**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1,200.00**

Date of Receipt  
**04 / 25 / 2013**

Amount of Each Receipt this Period  
**1,200.00**

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

Mailing Address  
**26810 Drake Road**

City **Farmington Hills** State **MI** Zip Code **48331**

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

Name of Employer **Wayne State University** Occupation **Physician**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1,200.00**

Date of Receipt  
**04 / 26 / 2013**

Amount of Each Receipt this Period  
**1,200.00**

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

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

**3,600.00**

13031102866

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

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

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

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NAME OF COMMITTEE (In Full)  
Friends of WSUSOM

A. Full Name (Last, First, Middle Initial)  
Rosenberg, David

Mailing Address  
31800 Nottingham Drive

City Franklin State MI Zip Code 48025

FEC ID number of contributing federal political committee. C

Name of Employer Wayne State University Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date 1,200.00

Date of Receipt 04 / 21 / 2013

Amount of Each Receipt this Period 1,200.00

B. Full Name (Last, First, Middle Initial)  
Markova, Tsveti

Mailing Address  
42524 Flis Drive

City Sterling Heights State MI Zip Code 48314

FEC ID number of contributing federal political committee. C

Name of Employer Wayne State University Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date 1,200.00

Date of Receipt 04 / 01 / 2013

Amount of Each Receipt this Period 1,200.00

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

Mailing Address  
00 Virginia Park

City Detroit State MI Zip Code 48202

FEC ID number of contributing federal political committee. C

Name of Employer Wayne State University Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date 1,200.00

Date of Receipt 05 / 01 / 2013

Amount of Each Receipt this Period 1,200.00

SUBTOTAL of Receipts This Page (optional) ..... 3,600.00

TOTAL This Period (last page this line number only) ..... 3,600.00

13031102867

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

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

FOR LINE NUMBER: PAGE **3** OF **7**

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Friends of WSUSOM**

Full Name (Last, First, Middle Initial)

**A. Murali Gouthikonda**

Mailing Address

**6 Higbie Ct.**

City

**Grosse Pointe Farms**

State

**MT**

Zip Code

**48236**

FEC ID number of contributing federal political committee.

**C**

Name of Employer

**Wayne State University**

Occupation

**Physician**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**1,200.00**

Date of Receipt

**05 / 08 / 2013**

Amount of Each Receipt this Period

**1,200.00**

Full Name (Last, First, Middle Initial)

**B. Jim Fox**

Mailing Address

**338 Provencal Road**

City

**Grosse Pointe**

State

**MI**

Zip Code

**48236**

FEC ID number of contributing federal political committee.

**C**

Name of Employer

**St. John Providence**

Occupation

**Physician**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**1,200.00**

Date of Receipt

**04 / 13 / 2013**

Amount of Each Receipt this Period

**1,200.00**

Full Name (Last, First, Middle Initial)

**C. Robert Frank**

Mailing Address

**1135 Shelby Street Apt. 2810**

City

**Detroit**

State

**MI**

Zip Code

**48226**

FEC ID number of contributing federal political committee.

**C**

Name of Employer

**Wayne State University**

Occupation

**Physician**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**1,200.00**

Date of Receipt

**04 / 26 / 2013**

Amount of Each Receipt this Period

**1,200.00**

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

**3,600.00**

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

**3,600.00**

13031102868



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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)

PAGE **4** OF **7**

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Friends of WSUSOM**

**A. Sprague, Carolyn**

Full Name (Last, First, Middle Initial)  
 Mailing Address: **4573 Chelsea Lane**  
 City: **Bloomfield Hills** State: **MI** Zip Code: **48301**

Date of Receipt: **04/25/2013**

Amount of Each Receipt this Period: **1,200.00**

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

Name of Employer: **Henry Ford Health System** Occupation: **Physician**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **1,200.00**

**B. Jedumakas, Kimberly**

Full Name (Last, First, Middle Initial)  
 Mailing Address: **1170 Fairfax**  
 City: **Birmingham** State: **MI** Zip Code: **48009**

Date of Receipt: **04/24/2013**

Amount of Each Receipt this Period: **600.00**

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

Name of Employer: **Hall Render** Occupation: **Attorney**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **600.00**

**C. Simmer, Thomas**

Full Name (Last, First, Middle Initial)  
 Mailing Address: **4975 S. Ridgeside Circle**  
 City: **Ann Arbor** State: **MI** Zip Code: **48105**

Date of Receipt: **04/24/2013**

Amount of Each Receipt this Period: **500.00**

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

Name of Employer: **Blue Cross Blue Shield of Michigan** Occupation: **Physician**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **500.00**

**SUBTOTAL** of Receipts This Page (optional)..... **2,300.00**

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

13031102869

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

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

FOR LINE NUMBER: PAGE 5 OF 7  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, either than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Friends of WSU SOM**

Full Name (Last, First, Middle Initial)  
**A. John Flack**  
 Mailing Address  
**4489 Cranbrook Trail**  
 City State Zip Code  
**Orchard Lake MI 48323**  
 FEC ID number of contributing federal political committee.  
**C**  
 Name of Employer Occupation  
**Wayne State University Physician**  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**1,200.00**

Date of Receipt  
**04 / 24 / 2013**  
 Amount of Each Receipt this Period  
**1,200.00**

Full Name (Last, First, Middle Initial)  
**B. Michael Busvito**  
 Mailing Address  
**2556 Amherst Court**  
 City State Zip Code  
**Troy MI 48098**  
 FEC ID number of contributing federal political committee.  
**C**  
 Name of Employer Occupation  
**Beaumont Physician**  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**1,200.00**

Date of Receipt  
**04 / 26 / 2013**  
 Amount of Each Receipt this Period  
**1,200.00**

Full Name (Last, First, Middle Initial)  
**c. Bonita Stanton**  
 Mailing Address  
**544 Lakeland Street**  
 City State Zip Code  
**Grosse Pointe MI 48230**  
 FEC ID number of contributing federal political committee.  
**C**  
 Name of Employer Occupation  
**Wayne State University Physician**  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**1,200.00**

Date of Receipt  
**04 / 03 / 2013**  
 Amount of Each Receipt this Period  
**1,200.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **3,600.00**  
 TOTAL This Period (last page this line number only)..... ▶ **3,600.00**

13031102870

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 7	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
**Friends of WSUSOM**

**A. Lee, Kenneth**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**44104 Broadmoor Circle North**  
 City State Zip Code  
**Northville MI 48168**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**Wayne State University Vice Dean**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1,200.00**

Date of Receipt  
**05 / 17 / 2013**  
 Amount of Each Receipt this Period  
**1,200.00**

**B. Lucas, Charles**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**19331 Strathcona**  
 City State Zip Code  
**Detroit MI 48203**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**Detroit Receiving Hospital Physician**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1,200.00**

Date of Receipt  
**05 / 08 / 2013**  
 Amount of Each Receipt this Period  
**1,200.00**

**C. Hassan, Lucas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**25734 Island Lake Drive**  
 City State Zip Code  
**Novi MI 48374**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**Wayne State University Physician**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1,200.00**

Date of Receipt  
**05 / 01 / 2013**  
 Amount of Each Receipt this Period  
**1,200.00**

**SUBTOTAL** of Receipts This Page (optional) **3,600.00**  
**TOTAL** This Period (last page this line number only)

13031102871

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

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

FOR LINE NUMBER: PAGE **7** OF **7**

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Friends of WSUSOM**

**A. Marykan Schenk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **6639 Belle River**  
 City: **China** State: **MI** Zip Code: **48054**  
 Name of Employer: **Wayne State University** Occupation: **Physician**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **500.00**  
 FEC ID number of contributing federal political committee: **C**

Date of Receipt: **04 / 05 / 2013**  
 Amount of Each Receipt this Period: **500.00**

**B. Michael Philbrick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **20330 Maver**  
 City: **Saint Clair Shores** State: **MI** Zip Code: **48080**  
 Name of Employer: **Hall Render** Occupation: **Attorney**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **600.00**  
 FEC ID number of contributing federal political committee: **C**

Date of Receipt: **04 / 25 / 2013**  
 Amount of Each Receipt this Period: **600.00**

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date

Date of Receipt  
 Amount of Each Receipt this Period

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

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

**1,100.00**  
**21,400.00**

13031102872

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

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

FOR LINE NUMBER:  
(check only one)

PAGE

OF

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

A. The Detroit Tigers

Date of Disbursement

01 / 10 / 2013

Mailing Address

2100 Woodward Ave

City

Detroit

State

MI

Zip Code

48201

Purpose of Disbursement

Deposit for fundraising Venue

003

Amount of Each Disbursement this Period

500.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Amazon.com

Date of Disbursement

01 / 22 / 2013

Mailing Address

P.O. Box 81226

City

Seattle

State

WA

Zip Code

98108

Purpose of Disbursement

Office Equipment - Printer

003

Amount of Each Disbursement this Period

438.78

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Skip Printing

Date of Disbursement

04 / 08 / 2013

Mailing Address

29032 Groesbeck

City

Roseville

State

MI

Zip Code

48066

Purpose of Disbursement

Fundraising Invitations

003

Amount of Each Disbursement this Period

572.40

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

1511.18

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

1511.18

13031102873

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 4

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

Full Name (Last, First, Middle Initial)

A. Tortilla Coast

Date of Disbursement

04 ' 10 ' 2003

Mailing Address

400 First St. SE

City

Washington

State

DC

Zip Code

20003

Purpose of Disbursement

Fundraising Meeting

003

Category/  
Type

Amount of Each Disbursement this Period

200.65

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Skrzyniarz, Doug

Date of Disbursement

04 ' 14 ' 2013

Mailing Address

14469 Maisano

City

Sterling Heights

State

MI

Zip Code

48312

Purpose of Disbursement

Detroit Tigers Suite Fundraiser  
Reimbursement

003

Category/  
Type

Amount of Each Disbursement this Period

6,102.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Skrzyniarz, Doug

Date of Disbursement

04 ' 30 ' 2013

Mailing Address

14469 Maisano

City

Sterling Heights

State

MI

Zip Code

48312

Purpose of Disbursement

Reimbursement - Fundraising  
Costs: Tigers Fundraiser

003

Category/  
Type

Amount of Each Disbursement this Period

4,096.48

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

10,399.13

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

1303110287A

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**A. Library of Michigan Foundation**

Full Name (Last, First, Middle Initial)

Mailing Address  
702 W. Kalamazoo

City Lansing State MI Zip Code 48915

Purpose of Disbursement  
Fundraising Ticket

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
04 21 2013

Amount of Each Disbursement this Period  
500.00

Category/Type  
003

**B. Apple Store**

Full Name (Last, First, Middle Initial)

Mailing Address  
2800 W Big Beaver Rd.

City Troy State MI Zip Code 48084

Purpose of Disbursement  
Computer Equipment/Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
06 07 2013

Amount of Each Disbursement this Period  
465.24

Category/Type  
003

**C. Donation Pages, Com**

Full Name (Last, First, Middle Initial)

Mailing Address  
30 Wacker Drive Ste 2200

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
Internet Payment Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
06 30 2013

Amount of Each Disbursement this Period  
642.94

Category/Type  
003

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

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

1608.18

13031102875

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 4 OF 4

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) A. Detroit Athletic Club		Date of Disbursement 05 / 21 / 2013
Mailing Address 241 Madison Ave		Amount of Each Disbursement this Period 540.00
City Detroit	State MI	
Purpose of Disbursement Fundraising Expenses		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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

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

540.00  
14,056.49

13031102876



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Friends of WSU SOM

Full Name (Last, First, Middle Initial)

**A.** Peters for Michigan

Mailing Address: P.O. Box 226  
City: Bloomfield Hills MI Zip Code: 48303  
Purpose of Disbursement: fundraiser  
Candidate Name: Gary Peters  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)   
State: MI District: 00

Date of Disbursement: 05 / 28 / 2013  
Amount of Each Disbursement this Period: 25000

**B.** Benishek for Congress

Mailing Address: P.O. Box 108  
City: Gladstone MI Zip Code: 49837  
Purpose of Disbursement: fundraiser  
Candidate Name: Daniel Benishek  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)   
State: MI District: 01

Date of Disbursement: 05 / 30 / 2013  
Amount of Each Disbursement this Period: 50000

**C.** America's Leadership PAC

Mailing Address: 700 13th Street, NW Suite 1000  
City: Washington DC Zip Code: 20005  
Purpose of Disbursement: fundraiser  
Candidate Name: [Blank]  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)   
State: [Blank] District: [Blank]

Date of Disbursement: 05 / 30 / 2013  
Amount of Each Disbursement this Period: 1000.00

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

1750.00

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

[Blank]

13031102877

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 2

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Friends of WSU SOM**

Full Name (Last, First, Middle Initial) <b>A. Camp Upton Victory Committee</b>		Date of Disbursement <b>05 30 2013</b>
Mailing Address <b>228 Washington Street, Suite 115</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Alexandria</b>	State <b>VA</b>	
Zip Code <b>22314</b>		
Purpose of Disbursement <b>Fundraiser</b>		
Candidate Name <b>David Camp</b>		Category/Type <b>011</b>
Office Sought: <input checked="" 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: <b>MI</b>	District: <b>D4</b>	

Full Name (Last, First, Middle Initial) <b>B. Rudy Hobbs for Congress</b>		Date of Disbursement <b>06 28 2013</b>
Mailing Address <b>P.O. Box 442056</b>		Amount of Each Disbursement this Period <b>200.00</b>
City <b>Detroit</b>	State <b>MI</b>	
Zip Code <b>48244</b>		
Purpose of Disbursement <b>fundraiser</b>		
Candidate Name <b>Rudy Hobbs</b>		Category/Type <b>011</b>
Office Sought: <input checked="" 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: <b>MI</b>	District: <b>14</b>	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	<b>1,200.00</b>
TOTAL This Period (last page this line number only).....▶	<b>2,950.00</b>

13031102878

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 4

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

Friends of WSUSOM

Full Name (Last, First, Middle Initial)

**A.** Friends of Jim Ananich for Senate

Date of Disbursement: 02/14/2013

Mailing Address: 932 Maxine Street

City: Flint State: MI Zip Code: 48503

Purpose of Disbursement: fundraiser

Candidate Name: Jim Ananich

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period: 500.00

Category/Type: 011

**B.** CTE Brian Banks for State Rep District 1

Date of Disbursement: 02/14/2013

Mailing Address: P.O. Box 15644

City: Detroit State: MI Zip Code: 48215

Purpose of Disbursement: fundraiser

Candidate Name: Brian Banks

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period: 200.00

Category/Type: 011

**C.** Al Pscholka for State Representative Committee

Date of Disbursement: 02/14/2013

Mailing Address: 5810 Longhorn Trail

City: Stevensville State: MI Zip Code: 49127

Purpose of Disbursement: fundraiser

Candidate Name: Al Pscholka

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period: 200.00

Category/Type: 011

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

900.00

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

13031102879

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 4

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Friends of WSU SOM**

**A.** Full Name (Last, First, Middle Initial) Greimel for michigan Date of Disbursement 02 ' 14 ' 2013

Mailing Address PO. Box 14045

City Lansing State MI Zip Code 48901

Purpose of Disbursement Fundraiser Category/Type 011

Candidate Name \_\_\_\_\_ Amount of Each Disbursement this Period 250.00

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

State: \_\_\_\_\_ District: \_\_\_\_\_

**B.** Full Name (Last, First, Middle Initial) Friends of Roger Kahn for Senate Date of Disbursement 02 ' 14 ' 2013

Mailing Address P.O. Box 1127

City Saginaw State MI Zip Code 48605

Purpose of Disbursement Fundraiser Category/Type 011

Candidate Name Roger Kahn Amount of Each Disbursement this Period 1,000.00

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

State: \_\_\_\_\_ District: \_\_\_\_\_

**C.** Full Name (Last, First, Middle Initial) John Moolenaar for State Senate Date of Disbursement 03 ' 07 ' 2013

Mailing Address 5915 Eastman Ave, Suite 100

City Midland State MI Zip Code 48604

Purpose of Disbursement Fundraiser Category/Type 011

Candidate Name \_\_\_\_\_ Amount of Each Disbursement this Period 500.00

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

State: \_\_\_\_\_ District: \_\_\_\_\_

**SUBTOTAL** of Disbursements This Page (optional) ..... 1750.00

**TOTAL** This Period (last page this line number only) ..... 1750.00

13031102880

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 4

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Friends of WSUSOM

Full Name (Last, First, Middle Initial)

A. Committee to Elect Gail Haines

Mailing Address

P.O. Box 301085

City

Waterford

State

MI

Zip Code

48330

Purpose of Disbursement

Fundraiser

Candidate Name

Gail Haines

011  
Category/  
Type

Date of Disbursement

03 07 2013

Amount of Each Disbursement this Period

250.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Committee to Elect Matt Lori State Representative

Mailing Address

14941 Roberts Shores Drive

City

Constantine

State

MI

Zip Code

49042

Purpose of Disbursement

Fundraiser

Candidate Name

Mathew Lori

011  
Category/  
Type

Date of Disbursement

03 07 2013

Amount of Each Disbursement this Period

250.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Tonya Schuitmaker for State Senate

Mailing Address

P.O. Box 1116

City

Portage

State

MI

Zip Code

49081

Purpose of Disbursement

Fundraiser

Candidate Name

Tonya Schuitmaker

011  
Category/  
Type

Date of Disbursement

03 07 2013

Amount of Each Disbursement this Period

250.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

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

750.00

13031102881

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 4 OF 4

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Friends of WSUSOM

Full Name (Last, First, Middle Initial)

<p><b>A.</b> Detroit Regional Chamber Political Action Committee</p> <p>Mailing Address P.O. Box 75000</p> <p>City: Detroit State: MI Zip Code: 48275</p> <p>Purpose of Disbursement: fundraiser</p> <p>Candidate Name: _____</p>		<p>Date of Disbursement 05 ' 23 ' 2013</p> <p>Amount of Each Disbursement this Period 400.00</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Category/Type: 011</p>

<p><b>B.</b> Friends of Henry Yanez</p> <p>Mailing Address P.O. Box 7213</p> <p>City: Sterling Heights State: MI Zip Code: 48311</p> <p>Purpose of Disbursement: fundraiser</p> <p>Candidate Name: _____</p>		<p>Date of Disbursement 05 ' 05 ' 2013</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Category/Type: 011</p>

<p><b>C.</b> Mike Duggan for Mayor Committee</p> <p>Mailing Address 3011 W. Grand Blvd Ste 2500</p> <p>City: Detroit State: MI Zip Code: 48202</p> <p>Purpose of Disbursement: Fundraiser</p> <p>Candidate Name: _____</p>		<p>Date of Disbursement 02 ' 11 ' 2013</p> <p>Amount of Each Disbursement this Period 1,000.00</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Category/Type: 011</p>

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

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

1,900.00  
5,300.00

13031102882

**Federal Election Commission**  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Ex* Shipping Date  
*7/31/13*

Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*[Signature]*

*8/1/13*

PREPARER

DATE PREPARED

13031102683