

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Philip A. Hart Democratic Club

ADDRESS (number and street) 230 North Avenue Suite 12
Mount Clemens MI 48043
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00224717
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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2008 through 03 31 2008

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 Michelle DeBeaussaert

Signature of Treasurer Electronically Filed by Michelle DeBeaussaert Date 04 15 2008

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)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Philip A. Hart Democratic Club

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|--------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 8 | | 379.70 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 8 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 379.70 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 116069.50 | 116069.50 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 116449.20 | 116449.20 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 114128.07 | 114128.07 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 2321.13 | 2321.13 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Philip A. Hart Democratic Club

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| 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 | 8569.50 | 8569.50 |
| (i) Itemized (use Schedule A) | | |
| (ii) Unitemized | 107500.00 | 107500.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 116069.50 | 116069.50 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 116069.50 | 116069.50 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 116069.50 | 116069.50 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 116069.50 | 116069.50 |

DETAILED SUMMARY PAGE

of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 907.02 | 907.02 |
| (ii) Non-Federal Share..... | 1612.48 | 1612.48 |
| (b) Other Federal Operating Expenditures..... | 111608.57 | 111608.57 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 114128.07 | 114128.07 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 114128.07 | 114128.07 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 112515.59 | 112515.59 |

DETAILED SUMMARY PAGE
of Disbursements

| 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) | 116069.50 | 116069.50 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 116069.50 | 116069.50 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 112515.59 | 112515.59 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 112515.59 | 112515.59 |

**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 / 73 |
| | <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 | |

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)
Philip A. Hart Democratic Club

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Annette Beninati | Date of Receipt MM / DD / YYYY 03 / 08 / 2008 |
| | Mailing Address 34172 Clinton Plaza | Transaction ID: SA11AI.7525 |
| | City State Zip Code Clinton Twp MI 48035 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) Donna Bletch | Date of Receipt MM / DD / YYYY 02 / 16 / 2008 |
| | Mailing Address 15996 14 Mile Rd. | Transaction ID: SA11AI.7284 |
| | City State Zip Code Fraser MI 48026 | Amount of Each Receipt this Period 225.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|-----------|---|---|
| C. | Full Name (Last, First, Middle Initial) Frank Caballero | Date of Receipt MM / DD / YYYY 02 / 23 / 2008 |
| | Mailing Address 35834 Monaco Dr | Transaction ID: SA11AI.7297 |
| | City State Zip Code Sterling Heights MI 48312 | Amount of Each Receipt this Period 175.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 500.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|---|---|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 73 |
| | <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)
Philip A. Hart Democratic Club

| | | | |
|---|--|--------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Anthony Capizzi | | Date of Receipt |
| | Mailing Address 38825 Westchester | | <input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Sterling Heights | MI | 48310 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | | Occupation | Transaction ID: SA11AI.7558 Amount of Each Receipt this Period <input type="text" value="100.00"/> Contribution |
| | | Retired | |
| Receipt For: | | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="285.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|--------------------------|--|
| B. | Full Name (Last, First, Middle Initial) Carol Cole | | Date of Receipt |
| | Mailing Address 18630 Gina Court | | <input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Clinton Township | MI | 48036 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | | Occupation | Transaction ID: SA11AI.7227 Amount of Each Receipt this Period <input type="text" value="285.00"/> Contribution |
| None | | Homemaker | |
| Receipt For: | | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="435.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|--------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Carol Cole | | Date of Receipt |
| | Mailing Address 18630 Gina Court | | <input type="text" value="02"/> / <input type="text" value="09"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Clinton Township | MI | 48036 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | | Occupation | Transaction ID: SA11AI.7252 Amount of Each Receipt this Period <input type="text" value="100.00"/> Contribution |
| None | | Homemaker | |
| Receipt For: | | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="535.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="485.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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

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

FOR LINE NUMBER: PAGE 8 / 73
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Philip A. Hart Democratic Club

A. Full Name (Last, First, Middle Initial)
Carol Cole

Mailing Address 18630 Gina Court

City State Zip Code
Clinton Township MI 48036

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.7255

Amount of Each Receipt this Period
125.00

Contribution

B. Full Name (Last, First, Middle Initial)
Carol Cole

Mailing Address 18630 Gina Court

City State Zip Code
Clinton Township MI 48036

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 735.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.7259

Amount of Each Receipt this Period
75.00

Contribution

C. Full Name (Last, First, Middle Initial)
Brenda Diamond

Mailing Address 37310 Emery

City State Zip Code
Clinton Twp MI 48036

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.7169

Amount of Each Receipt this Period
185.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 385.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 73
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Philip A. Hart Democratic Club

A. Full Name (Last, First, Middle Initial)
Pat Franks

Mailing Address 8991 Franklin

City State Zip Code
Detroit MI 48234

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.7194

Amount of Each Receipt this Period
83.00

Contribution

B. Full Name (Last, First, Middle Initial)
Pat Franks

Mailing Address 8991 Franklin

City State Zip Code
Detroit MI 48234

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
308.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.7200

Amount of Each Receipt this Period
100.00

Contribution

C. Full Name (Last, First, Middle Initial)
Tim Hader

Mailing Address 198 N Wilson

City State Zip Code
Mt. Clemens MI 48043

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.7530

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **283.00**

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 73
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Philip A. Hart Democratic Club

A. Full Name (Last, First, Middle Initial)
Jack Jones
Mailing Address 22747 Nevada
City State Zip Code
Eastpointe MI 48021
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt MM / DD / YYYY
03 / 15 / 2008
Transaction ID: SA11AI.7537
Amount of Each Receipt this Period 100.00
Contribution

B. Full Name (Last, First, Middle Initial)
Jack Jones
Mailing Address 22747 Nevada
City State Zip Code
Eastpointe MI 48021
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt MM / DD / YYYY
03 / 29 / 2008
Transaction ID: SA11AI.7582
Amount of Each Receipt this Period 100.00
Contribution

C. Full Name (Last, First, Middle Initial)
Debra Katen
Mailing Address 17009 W. Eleanor
City State Zip Code
Clinton Township MI 48038
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt MM / DD / YYYY
01 / 12 / 2008
Transaction ID: SA11AI.7150
Amount of Each Receipt this Period 225.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 425.00
TOTAL This Period (last page this line number only) ►

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 73
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Philip A. Hart Democratic Club

A. Full Name (Last, First, Middle Initial)
Jean Kinney
Mailing Address 26600 Ponchartrain
City Harrison Township State MI Zip Code 48045
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 29 / 2008
Transaction ID: SA11AI.7577
Amount of Each Receipt this Period 100.00
Contribution

B. Full Name (Last, First, Middle Initial)
Joanne Kortas
Mailing Address 18220 Buchanan
City Roseville State MI Zip Code 48066
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 01 / 2008
Transaction ID: SA11AI.7491
Amount of Each Receipt this Period 125.00
Contribution

C. Full Name (Last, First, Middle Initial)
Kathy MacDonald
Mailing Address 17332 Normandy
City Macomb State MI Zip Code 48044
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Home Maker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 03 / 08 / 2008
Transaction ID: SA11AI.7513
Amount of Each Receipt this Period 275.00
Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 500.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 73
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Philip A. Hart Democratic Club

A. Full Name (Last, First, Middle Initial)
Chris Malburg

Mailing Address 1109 Cynthia Ave.

City State Zip Code
Madison Heights MI 48071

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 02 / 23 / 2008
Transaction ID: SA11AI.7296
Amount of Each Receipt this Period: 225.00
Contribution

B. Full Name (Last, First, Middle Initial)
Jona Michele

Mailing Address 17009 Langton

City State Zip Code
Clinton Twp MI 48038

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 09 / 2008
Transaction ID: SA11AI.7309
Amount of Each Receipt this Period: 300.00
Contribution

C. Full Name (Last, First, Middle Initial)
Theresa Miller

Mailing Address 36120 Harcourt

City State Zip Code
Clinton Township MI 48035

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

Name of Employer None Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 01 / 05 / 2008
Transaction ID: SA11AI.7124
Amount of Each Receipt this Period: 275.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 800.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 73
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Philip A. Hart Democratic Club

A. Full Name (Last, First, Middle Initial)
Theresa Miller
Mailing Address 36120 Harcourt
City Clinton Township State MI Zip Code 48035
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 355.00
Date of Receipt 01 / 12 / 2008
Transaction ID: SA11AI.7155
Amount of Each Receipt this Period 80.00
Contribution

B. Full Name (Last, First, Middle Initial)
Theresa Miller
Mailing Address 36120 Harcourt
City Clinton Township State MI Zip Code 48035
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt 02 / 16 / 2008
Transaction ID: SA11AI.7278
Amount of Each Receipt this Period 125.00
Contribution

C. Full Name (Last, First, Middle Initial)
Christine Millon
Mailing Address 57557 Verellen
City Lenox State MI Zip Code 48048
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00
Date of Receipt 03 / 22 / 2008
Transaction ID: SA11AI.7555
Amount of Each Receipt this Period 175.00
Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 380.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 73
(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)
Philip A. Hart Democratic Club

A.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Barbara Moutard | | Date of Receipt MM / DD / YYYY 01 / 05 / 2008 |
| Mailing Address 17456 Kingsbrooke Circle | | Transaction ID: SA11AI.7146 |
| City Clinton Township | State MI | Zip Code 48038 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 80.00 |
| Name of Employer None | Occupation Homemaker | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

B.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Barbara Moutard | | Date of Receipt MM / DD / YYYY 01 / 19 / 2008 |
| Mailing Address 17456 Kingsbrooke Circle | | Transaction ID: SA11AI.7176 |
| City Clinton Township | State MI | Zip Code 48038 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 90.00 |
| Name of Employer None | Occupation Homemaker | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 330.00 | |

C.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Barbara Moutard | | Date of Receipt MM / DD / YYYY 01 / 19 / 2008 |
| Mailing Address 17456 Kingsbrooke Circle | | Transaction ID: SA11AI.7187 |
| City Clinton Township | State MI | Zip Code 48038 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 60.00 |
| Name of Employer None | Occupation Homemaker | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 390.00 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 230.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 73 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Philip A. Hart Democratic Club

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Christine Mrozek | Date of Receipt MM / DD / YYYY 03 / 22 / 2008 |
| | Mailing Address 36687 Maas | Transaction ID: SA11AI.7547 |
| | City State Zip Code Sterling Heights MI 48312 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) Robert Myers | Date of Receipt MM / DD / YYYY 02 / 09 / 2008 |
| | Mailing Address 11126 Nottingham | Transaction ID: SA11AI.7253 |
| | City State Zip Code Fair Haven MI 48023 | Amount of Each Receipt this Period 60.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer Occupation Retired None Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) Robert Myers | Date of Receipt MM / DD / YYYY 02 / 16 / 2008 |
| | Mailing Address 11126 Nottingham | Transaction ID: SA11AI.7281 |
| | City State Zip Code Fair Haven MI 48023 | Amount of Each Receipt this Period 75.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer Occupation Retired None Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 335.00 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 235.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 73

(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)
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)
Robert Myers

Mailing Address 11126 Nottingham

City State Zip Code
Fair Haven MI 48023

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

Name of Employer Occupation
Retired None

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 08 / 2008

Transaction ID: SA11AI.7507

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Gail Novak

Mailing Address 2249 Purcell

City State Zip Code
Sterling Heights MI 48310

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

Name of Employer Occupation
None Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 12 / 2008

Transaction ID: SA11AI.7158

Amount of Each Receipt this Period

275.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Gail Novak

Mailing Address 2249 Purcell

City State Zip Code
Sterling Heights MI 48310

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

Name of Employer Occupation
None Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 535.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 23 / 2008

Transaction ID: SA11AI.7305

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 17 / 73 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Philip A. Hart Democratic Club

| | | | |
|---|--|---|--|
| A. | Full Name (Last, First, Middle Initial) Janice Perry | | Date of Receipt |
| | Mailing Address 28740 Alden | | <input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Madison Heights | MI | 48071 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer None | | Occupation Homemaker | Transaction ID: SA11AI.7143 Amount of Each Receipt this Period <input type="text" value="100.00"/> Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <input type="text" value="220.00"/> | |

| | | | |
|---|--|---|--|
| B. | Full Name (Last, First, Middle Initial) Janice Perry | | Date of Receipt |
| | Mailing Address 28740 Alden | | <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Madison Heights | MI | 48071 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer None | | Occupation Homemaker | Transaction ID: SA11AI.7207 Amount of Each Receipt this Period <input type="text" value="100.00"/> Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <input type="text" value="320.00"/> | |

| | | | |
|---|--|---|---|
| C. | Full Name (Last, First, Middle Initial) Janice Perry | | Date of Receipt |
| | Mailing Address 28740 Alden | | <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Madison Heights | MI | 48071 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer None | | Occupation Homemaker | Transaction ID: SA11AI.7212 Amount of Each Receipt this Period <input type="text" value="85.00"/> Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <input type="text" value="405.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="285.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 73

(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)
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)

Janice Perry

Mailing Address 28740 Alden

City State Zip Code
Madison Heights MI 48071

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

Name of Employer Occupation
None Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 530.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.7277

Amount of Each Receipt this Period

125.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Janice Perry

Mailing Address 28740 Alden

City State Zip Code
Madison Heights MI 48071

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

Name of Employer Occupation
None Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 630.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.7477

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Debra Pinarde

Mailing Address 524 Marshall

City State Zip Code
Coldwater MI 48036

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

Name of Employer Occupation
None Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 285.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.7250

Amount of Each Receipt this Period

285.00

Contribution

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 73
(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)
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)
Wanda Reager

Mailing Address 41880 Ryan

City State Zip Code
Sterling Heights MI 48314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
03 / 01 / 2008

Transaction ID: SA11AI.7475

Amount of Each Receipt this Period
100.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Tiawnte Roberts

Mailing Address 20150 Weybridge, #202

City State Zip Code
Clinton Township MI 48036

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

Name of Employer Occupation
None Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2008

Transaction ID: SA11AI.7258

Amount of Each Receipt this Period
100.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Tiawnte Roberts

Mailing Address 20150 Weybridge, #202

City State Zip Code
Clinton Township MI 48036

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

Name of Employer Occupation
None Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 22 / 2008

Transaction ID: SA11AI.7553

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **300.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 73
(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)
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)
Frank Sansome

Mailing Address 60893 Middle River

City State Zip Code
Macomb MI 48044

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2008

Transaction ID: SA11AI.7578

Amount of Each Receipt this Period
175.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Frank Sansone

Mailing Address 17618 E. Kirkwood

City State Zip Code
Clinton Twp MI 48035

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2008

Transaction ID: SA11AI.7206

Amount of Each Receipt this Period
85.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Patricia Schroeder

Mailing Address 38800 Willowmere

City State Zip Code
Harrison Township MI 48045

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2008

Transaction ID: SA11AI.7579

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **360.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 73
(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)
Philip A. Hart Democratic Club

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Lori Veres</p> <p>Mailing Address 13831 Murthum</p> <p>City Warren State MI Zip Code 48088</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p> | <p>Date of Receipt 02 / 02 / 2008</p> <p>Transaction ID: SA11AI.7230</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Contribution</p> |
|--|--|

| | |
|--|---|
| <p>B. Full Name (Last, First, Middle Initial) Lori Veres</p> <p>Mailing Address 13831 Murthum</p> <p>City Warren State MI Zip Code 48088</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 375.00</p> | <p>Date of Receipt 02 / 09 / 2008</p> <p>Transaction ID: SA11AI.7247</p> <p>Amount of Each Receipt this Period 75.00</p> <p>Contribution</p> |
|--|---|

| | |
|--|--|
| <p>C. Full Name (Last, First, Middle Initial) Lori Veres</p> <p>Mailing Address 13831 Murthum</p> <p>City Warren State MI Zip Code 48088</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 475.00</p> | <p>Date of Receipt 02 / 23 / 2008</p> <p>Transaction ID: SA11AI.7306</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Contribution</p> |
|--|--|

| | |
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| SUBTOTAL of Receipts This Page (optional) | 275.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 / 73 |
| | <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)
Philip A. Hart Democratic Club

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Lori Veres | Date of Receipt MM / DD / YYYY 03 / 01 / 2008 |
| | Mailing Address 13831 Murthum | Transaction ID: SA11AI.7476 |
| | City Warren State MI Zip Code 48088 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) Lori Veres | Date of Receipt MM / DD / YYYY 03 / 01 / 2008 |
| | Mailing Address 13831 Murthum | Transaction ID: SA11AI.7480 |
| | City Warren State MI Zip Code 48088 | Amount of Each Receipt this Period 125.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) Lori Veres | Date of Receipt MM / DD / YYYY 03 / 22 / 2008 |
| | Mailing Address 13831 Murthum | Transaction ID: SA11AI.7543 |
| | City Warren State MI Zip Code 48088 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 325.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 / 73 |
| | <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)
Philip A. Hart Democratic Club

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Evelyn White | Date of Receipt MM / DD / YYYY 01 / 26 / 2008 |
| | Mailing Address 13119 Clinton River Road | Transaction ID: SA11AI.7201 |
| | City State Zip Code Sterling Heights MI 48313 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) Evelyn White | Date of Receipt MM / DD / YYYY 02 / 02 / 2008 |
| | Mailing Address 13119 Clinton River Road | Transaction ID: SA11AI.7224 |
| | City State Zip Code Sterling Heights MI 48313 | Amount of Each Receipt this Period 50.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) Evelyn White | Date of Receipt MM / DD / YYYY 02 / 02 / 2008 |
| | Mailing Address 13119 Clinton River Road | Transaction ID: SA11AI.7237 |
| | City State Zip Code Sterling Heights MI 48313 | Amount of Each Receipt this Period 50.00 |
| | FEC ID number of contributing federal political committee. C | Contribution |
| | Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 200.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one) <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | PAGE 24 / 73 |
|---|--|--------------|

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NAME OF COMMITTEE (In Full)
Philip A. Hart Democratic Club

| | | | |
|---|---|------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Evelyn White | | Date of Receipt MM / DD / YYYY 02 / 09 / 2008 |
| | Mailing Address 13119 Clinton River Road | | Transaction ID: SA11AI.7242 |
| | City Sterling Heights | State MI | Zip Code 48313 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| | Name of Employer None | Occupation Retired | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 410.00 | |

| | | | |
|---|---|------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Evelyn White | | Date of Receipt MM / DD / YYYY 03 / 01 / 2008 |
| | Mailing Address 13119 Clinton River Road | | Transaction ID: SA11AI.7479 |
| | City Sterling Heights | State MI | Zip Code 48313 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 150.00 |
| | Name of Employer None | Occupation Retired | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 560.00 | |

| | | | |
|---|---|------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Evelyn White | | Date of Receipt MM / DD / YYYY 03 / 08 / 2008 |
| | Mailing Address 13119 Clinton River Road | | Transaction ID: SA11AI.7501 |
| | City Sterling Heights | State MI | Zip Code 48313 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| | Name of Employer None | Occupation Retired | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 660.00 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 300.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 73
(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)
Philip A. Hart Democratic Club

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) Evelyn White</p> <p>Mailing Address 13119 Clinton River Road</p> <p>City State Zip Code Sterling Heights MI 48313</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 760.00</p> | <p>Date of Receipt 03 / 08 / 2008</p> <p>Transaction ID: SA11AI.7508</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Contribution</p> |
|---|--|

| | |
|--|--|
| <p>B. Full Name (Last, First, Middle Initial) Renee White</p> <p>Mailing Address 35633 Georgetown</p> <p>City State Zip Code Sterling Heights MI 48312</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Homemaker</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p> | <p>Date of Receipt 03 / 29 / 2008</p> <p>Transaction ID: SA11AI.7562</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Contribution</p> |
|--|--|

| | |
|---|---|
| <p>C. Full Name (Last, First, Middle Initial) Frances Witkowski</p> <p>Mailing Address 11651 Ebony</p> <p>City State Zip Code Sterling Heights MI 48312</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 276.50</p> | <p>Date of Receipt 02 / 23 / 2008</p> <p>Transaction ID: SA11AI.7302</p> <p>Amount of Each Receipt this Period 91.50</p> <p>Contribution</p> |
|---|---|

| | |
|--|--|
| SUBTOTAL of Receipts This Page (optional) | 291.50 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 73
(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)
Philip A. Hart Democratic Club

A.

| | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| Full Name (Last, First, Middle Initial) Frances Witkowski | | Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 0 | 1 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 0 | 1 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| Mailing Address 11651 Ebony | | Transaction ID: SA11AI.7482 | | | | | | | | | | | | | | | | | | | | |
| City Sterling Heights | State MI | Zip Code 48312 | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>125.00</td></tr></table> | 125.00 | | | | | | | | | | | | | | | | | | | |
| 125.00 | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer None | Occupation Retired | Contribution | | | | | | | | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>401.50</td></tr></table> | | 401.50 | | | | | | | | | | | | | | | | | | | |
| 401.50 | | | | | | | | | | | | | | | | | | | | | | |

B.

| | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| Full Name (Last, First, Middle Initial) Frances Witkowski | | Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 1 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 1 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| Mailing Address 11651 Ebony | | Transaction ID: SA11AI.7529 | | | | | | | | | | | | | | | | | | | | |
| City Sterling Heights | State MI | Zip Code 48312 | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>100.00</td></tr></table> | 100.00 | | | | | | | | | | | | | | | | | | | |
| 100.00 | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer None | Occupation Retired | Contribution | | | | | | | | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>501.50</td></tr></table> | | 501.50 | | | | | | | | | | | | | | | | | | | |
| 501.50 | | | | | | | | | | | | | | | | | | | | | | |

C.

| | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| Full Name (Last, First, Middle Initial) Frances Witkowski | | Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 2 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 2 | 2 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| Mailing Address 11651 Ebony | | Transaction ID: SA11AI.7548 | | | | | | | | | | | | | | | | | | | | |
| City Sterling Heights | State MI | Zip Code 48312 | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>100.00</td></tr></table> | 100.00 | | | | | | | | | | | | | | | | | | | |
| 100.00 | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer None | Occupation Retired | Contribution | | | | | | | | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>601.50</td></tr></table> | | 601.50 | | | | | | | | | | | | | | | | | | | |
| 601.50 | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|---|---------------|
| SUBTOTAL of Receipts This Page (optional) | <table border="1" style="width: 100%;"><tr><td style="text-align: right;">325.00</td></tr></table> | 325.00 |
| 325.00 | | |
| TOTAL This Period (last page this line number only) | <table border="1" style="width: 100%;"><tr><td style="text-align: right;"> </td></tr></table> | |
| | | |

**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 27 / 73 |
| | <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)
Philip A. Hart Democratic Club

| | | | |
|---|---|--------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Lois Zakoor | | Date of Receipt |
| | Mailing Address 13647 Murthum | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 1 / 2 6 / 2 0 0 8 |
| | City | State | Zip Code |
| | Warren | MI | 48088 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.7192 |
| Name of Employer None | | Occupation Homemaker | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text"/> 250.00 |
| | | | Contribution |

| | | | |
|---|---|--------------------------|--|
| B. | Full Name (Last, First, Middle Initial) Teresa Zombek | | Date of Receipt |
| | Mailing Address 39783 Chart | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 6 / 2 0 0 8 |
| | City | State | Zip Code |
| | Harrison Twp | MI | 48045 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.7285 |
| Name of Employer None | | Occupation Retired | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text"/> 225.00 |
| | | | Contribution |

| | | | |
|---|---|--------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Teresa Zombek | | Date of Receipt |
| | Mailing Address 39783 Chart | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 3 / 2 0 0 8 |
| | City | State | Zip Code |
| | Harrison Twp | MI | 48045 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.7295 |
| Name of Employer None | | Occupation Retired | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text"/> 450.00 |
| | | | Contribution |

| | |
|--|--|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 700.00 |
| TOTAL This Period (last page this line number only) | <input type="text"/> 8569.50 |

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)
Philip A. Hart Democratic Club

| | | |
|-----------|---|--|
| A. | Full Name (Last, First, Middle Initial) Kathleen Adams Mailing Address 34049 Charlotte City Sterling Heights State MI Zip Code 48312 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.7437 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 0 8 Amount of Each Disbursement this Period 1000.00 |
| B. | Full Name (Last, First, Middle Initial) Advance Novelty Mailing Address 29199 W. Six Mile City Livonia State MI Zip Code 48152 Purpose of Disbursement Bingo Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.6798 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 0 8 Amount of Each Disbursement this Period 1784.16 |
| C. | Full Name (Last, First, Middle Initial) Advance Novelty Mailing Address 29199 W. Six Mile City Livonia State MI Zip Code 48152 Purpose of Disbursement Bingo Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.6800 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 896.76 |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3680.92 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 29 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Advance Novelty | Transaction ID: SB21B.6804 Date of Disbursement |
| | Mailing Address 29199 W. Six Mile | <input type="text" value="01"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/> |
| | City Livonia State MI Zip Code 48152 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bingo Supplies | <input type="text" value="445.20"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) Advance Novelty | Transaction ID: SB21B.6812 Date of Disbursement |
| | Mailing Address 29199 W. Six Mile | <input type="text" value="01"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="08"/> |
| | City Livonia State MI Zip Code 48152 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bingo Supplies | <input type="text" value="2001.58"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Advance Novelty | Transaction ID: SB21B.6814 Date of Disbursement |
| | Mailing Address 29199 W. Six Mile | <input type="text" value="02"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="08"/> |
| | City Livonia State MI Zip Code 48152 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bingo Supplies | <input type="text" value="1200.33"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 30 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Advance Novelty | Transaction ID: SB21B.6818 Date of Disbursement |
| | Mailing Address 29199 W. Six Mile | <input type="text" value="02"/> <input type="text" value="13"/> / <input type="text" value="2008"/> |
| | City Livonia State MI Zip Code 48152 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bingo Supplies | <input type="text" value="1464.93"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Advance Novelty | Transaction ID: SB21B.6822 Date of Disbursement |
| | Mailing Address 29199 W. Six Mile | <input type="text" value="02"/> <input type="text" value="27"/> / <input type="text" value="2008"/> |
| | City Livonia State MI Zip Code 48152 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bingo Supplies | <input type="text" value="1679.74"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Advance Novelty | Transaction ID: SB21B.6826 Date of Disbursement |
| | Mailing Address 29199 W. Six Mile | <input type="text" value="03"/> <input type="text" value="11"/> / <input type="text" value="2008"/> |
| | City Livonia State MI Zip Code 48152 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bingo Supplies | <input type="text" value="1716.36"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="4861.03"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Advance Novelty | Transaction ID: SB21B.6831 Date of Disbursement |
| | Mailing Address 29199 W. Six Mile | <input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2008"/> |
| | City Livonia State MI Zip Code 48152 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bingo Supplies | <input type="text" value="2941.51"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Nadia Anderson | Transaction ID: SB21B.6927 Date of Disbursement |
| | Mailing Address 42400 Malbeck | <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2008"/> |
| | City Sterling Heights State MI Zip Code 48314 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="60.00"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Annette Beninati | Transaction ID: SB21B.7113 Date of Disbursement |
| | Mailing Address 34172 Clinton Plaza | <input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2008"/> |
| | City Clinton Twp State MI Zip Code 48035 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="100.00"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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|--|--------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="3101.51"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

**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)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Annette Beninati | Transaction ID: SB21B.7385 Date of Disbursement 03 / 08 / 2008 |
| | Mailing Address 34172 Clinton Plaza | Amount of Each Disbursement this Period 50.00 |
| | City Clinton Twp State MI Zip Code 48035 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Sherry Blake | Transaction ID: SB21B.7472 Date of Disbursement 03 / 29 / 2008 |
| | Mailing Address 23787 Jackson | Amount of Each Disbursement this Period 300.00 |
| | City Clinton Township State MI Zip Code 48035 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Donna Bletch | Transaction ID: SB21B.7083 Date of Disbursement 02 / 16 / 2008 |
| | Mailing Address 15996 14 Mile Rd. | Amount of Each Disbursement this Period 500.00 |
| | City Fraser State MI Zip Code 48026 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) | 850.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 33 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Connie Burat | Transaction ID: SB21B.7467 |
| | Mailing Address 34419 Esper Rd. | Date of Disbursement MM / DD / YYYY 03 / 29 / 2008 |
| | City Sterling Heights State MI Zip Code 48312 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Ruth Butucel | Transaction ID: SB21B.6811 |
| | Mailing Address 44518 N. Bunker Hill | Date of Disbursement MM / DD / YYYY 01 / 26 / 2008 |
| | City Clinton Township State MI Zip Code 48038 | Amount of Each Disbursement this Period 1024.50 |
| | Purpose of Disbursement Progressive Bingo Prize | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Ruth Butucel | Transaction ID: SB21B.7397 |
| | Mailing Address 44518 N. Bunker Hill | Date of Disbursement MM / DD / YYYY 03 / 15 / 2008 |
| | City Clinton Township State MI Zip Code 48038 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 3024.50 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Frank Caballero | Transaction ID: SB21B.7103 |
| | Mailing Address 35834 Monaco Dr | Date of Disbursement MM / DD / YYYY 02 / 23 / 2008 |
| | City Sterling Heights State MI Zip Code 48312 | Amount of Each Disbursement this Period 250.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Anthony Capizzi | Transaction ID: SB21B.7329 |
| | Mailing Address 38825 Westchester | Date of Disbursement MM / DD / YYYY 03 / 01 / 2008 |
| | City Sterling Heights State MI Zip Code 48310 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Anthony Capizzi | Transaction ID: SB21B.7432 |
| | Mailing Address 38825 Westchester | Date of Disbursement MM / DD / YYYY 03 / 22 / 2008 |
| | City Sterling Heights State MI Zip Code 48310 | Amount of Each Disbursement this Period 55.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) | 455.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 35 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Carol Cole | Transaction ID: SB21B.6905 |
| | Mailing Address 18630 Gina Court | Date of Disbursement 01 / 12 / 2008 |
| | City Clinton Township State MI Zip Code 48036 | Amount of Each Disbursement this Period 60.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Carol Cole | Transaction ID: SB21B.7000 |
| | Mailing Address 18630 Gina Court | Date of Disbursement 02 / 02 / 2008 |
| | City Clinton Township State MI Zip Code 48036 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Carol Cole | Transaction ID: SB21B.7036 |
| | Mailing Address 18630 Gina Court | Date of Disbursement 02 / 09 / 2008 |
| | City Clinton Township State MI Zip Code 48036 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1210.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 36 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Carol Cole | Transaction ID: SB21B.7039 |
| | Mailing Address 18630 Gina Court | Date of Disbursement MM / DD / YYYY 02 / 09 / 2008 |
| | City Clinton Township State MI Zip Code 48036 | Amount of Each Disbursement this Period 200.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Carol Cole | Transaction ID: SB21B.7045 |
| | Mailing Address 18630 Gina Court | Date of Disbursement MM / DD / YYYY 02 / 09 / 2008 |
| | City Clinton Township State MI Zip Code 48036 | Amount of Each Disbursement this Period 100.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Virginia Davis | Transaction ID: SB21B.7331 |
| | Mailing Address 24143 Grace | Date of Disbursement MM / DD / YYYY 03 / 01 / 2008 |
| | City Clinton Township State MI Zip Code 48036 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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|--|--------|
| SUBTOTAL of Disbursements This Page (optional) | 800.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 37 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Janet Dearbin | Transaction ID: SB21B.7601 |
| | Mailing Address 12859 Denoter | Date of Disbursement MM / DD / YYYY 01 / 26 / 2008 |
| | City Sterling Heights State MI Zip Code 48313 | Amount of Each Disbursement this Period 1024.50 |
| | Purpose of Disbursement Bingo Prize | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Brenda Diamond | Transaction ID: SB21B.6909 |
| | Mailing Address 37310 Emery | Date of Disbursement MM / DD / YYYY 01 / 19 / 2008 |
| | City Clinton Twp State MI Zip Code 48036 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Lois Diffenbaugh | Transaction ID: SB21B.7445 |
| | Mailing Address 714 Stonewillow | Date of Disbursement MM / DD / YYYY 03 / 29 / 2008 |
| | City Quincy State MI Zip Code 49082 | Amount of Each Disbursement this Period 177.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1701.50 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Helen Farmer | Transaction ID: SB21B.7049 |
| | Mailing Address 17055 N Eleanor | Date of Disbursement MM / DD / YYYY 02 / 16 / 2008 |
| | City Clinton Township State MI Zip Code 48038 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Karen Fordham | Transaction ID: SB21B.7050 |
| | Mailing Address 17263 Kingsbrook | Date of Disbursement MM / DD / YYYY 02 / 16 / 2008 |
| | City Clinton Twp State MI Zip Code 48038 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) John Foster | Transaction ID: SB21B.7106 |
| | Mailing Address 31172 Clinton Plaza | Date of Disbursement MM / DD / YYYY 02 / 23 / 2008 |
| | City Clinton Twp State MI Zip Code 48035 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 450.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | | | |
|-----------|---|--|--|
| A. | Full Name (Last, First, Middle Initial) Pat Franks Mailing Address 8991 Franklin City Detroit State MI Zip Code 48234 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.6950 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 8 | Amount of Each Disbursement this Period 55.00 |
| B. | Full Name (Last, First, Middle Initial) Pat Franks Mailing Address 8991 Franklin City Detroit State MI Zip Code 48234 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.6959 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 8 | Amount of Each Disbursement this Period 166.75 |
| C. | Full Name (Last, First, Middle Initial) Xema Goerke Mailing Address 17386 Toepfer City Eastpointe State MI Zip Code 48021 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.7412 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 0 8 | Amount of Each Disbursement this Period 227.00 |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) | 448.75 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 40 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Tina Golden | Transaction ID: SB21B.7342 |
| | Mailing Address 35544 Acton | Date of Disbursement MM / DD / YYYY 03 / 01 / 2008 |
| | City Clinton Township State MI Zip Code 48038 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Tim Hader | Transaction ID: SB21B.7391 |
| | Mailing Address 198 N Wilson | Date of Disbursement MM / DD / YYYY 03 / 15 / 2008 |
| | City Mt. Clemens State MI Zip Code 48043 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Kimberley Johnson | Transaction ID: SB21B.6955 |
| | Mailing Address 50 Michigan St. | Date of Disbursement MM / DD / YYYY 01 / 26 / 2008 |
| | City Mt. Clemens State MI Zip Code 48043 | Amount of Each Disbursement this Period 100.00 |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) | 750.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | |
|---|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Jack Jones</p> <p>Mailing Address 22747 Nevada</p> <p>City Eastpointe State MI Zip Code 48021</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p> | <p>Transaction ID: SB21B.7389</p> <p>Date of Disbursement <input type="text"/> 03 / <input type="text"/> 15 / <input type="text"/> 2008</p> <p>Amount of Each Disbursement this Period <input type="text"/> 150.00</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Jack Jones</p> <p>Mailing Address 22747 Nevada</p> <p>City Eastpointe State MI Zip Code 48021</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p> | <p>Transaction ID: SB21B.7400</p> <p>Date of Disbursement <input type="text"/> 03 / <input type="text"/> 15 / <input type="text"/> 2008</p> <p>Amount of Each Disbursement this Period <input type="text"/> 110.00</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Jack Jones</p> <p>Mailing Address 22747 Nevada</p> <p>City Eastpointe State MI Zip Code 48021</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p> | <p>Transaction ID: SB21B.7470</p> <p>Date of Disbursement <input type="text"/> 03 / <input type="text"/> 29 / <input type="text"/> 2008</p> <p>Amount of Each Disbursement this Period <input type="text"/> 110.00</p> |

| | |
|---|------------------------------------|
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text"/> 370.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p><input type="text"/></p> |

**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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Debra Katen | Transaction ID: SB21B.6884 Date of Disbursement |
| | Mailing Address 17009 W. Eleanor | <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2008"/> |
| | City Clinton Township State MI Zip Code 48038 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="500.00"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Jean Kinney | Transaction ID: SB21B.7463 Date of Disbursement |
| | Mailing Address 26600 Ponchartrain | <input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2008"/> |
| | City Harrison Township State MI Zip Code 48045 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="150.00"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Joanne Kortas | Transaction ID: SB21B.7332 Date of Disbursement |
| | Mailing Address 18220 Buchanan | <input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2008"/> |
| | City Roseville State MI Zip Code 48066 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="500.00"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="1150.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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 43 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Kathy MacDonald | Transaction ID: SB21B.7367 |
| | Mailing Address 17332 Normandy | Date of Disbursement MM / DD / YYYY 03 / 08 / 2008 |
| | City Macomb State MI Zip Code 48044 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Chris Malburg | Transaction ID: SB21B.7102 |
| | Mailing Address 1109 Cynthia Ave. | Date of Disbursement MM / DD / YYYY 02 / 23 / 2008 |
| | City Madison Heights State MI Zip Code 48071 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Troy McGowan | Transaction ID: SB21B.7031 |
| | Mailing Address 17263 Kingbrook | Date of Disbursement MM / DD / YYYY 02 / 09 / 2008 |
| | City Clinton Twp State MI Zip Code 48038 | Amount of Each Disbursement this Period 110.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1610.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)
MDP (nfa)

Transaction ID: SB21B.6805
Date of Disbursement

Mailing Address 606 Townsend

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 1 | 9 | | 2 | 0 | 0 | 8 |

City Lansing State MI Zip Code 48084

Amount of Each Disbursement this Period

Purpose of Disbursement
Bingo Hall Rental

| |
|--------|
| 620.00 |
|--------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
MDP (nfa)

Transaction ID: SB21B.6808
Date of Disbursement

Mailing Address 606 Townsend

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 2 | 6 | | 2 | 0 | 0 | 8 |

City Lansing State MI Zip Code 48084

Amount of Each Disbursement this Period

Purpose of Disbursement
Bingo Hall Rental

| |
|--------|
| 620.00 |
|--------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
MDP (nfa)

Transaction ID: SB21B.6813
Date of Disbursement

Mailing Address 606 Townsend

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | | 0 | 2 | | 2 | 0 | 0 | 8 |

City Lansing State MI Zip Code 48084

Amount of Each Disbursement this Period

Purpose of Disbursement
Bingo Hall Rental

| |
|--------|
| 620.00 |
|--------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|---------|
| 1860.00 |
|---------|

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

| |
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| |
|--|

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

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) MDP (nfa) | Transaction ID: SB21B.6817 |
| | Mailing Address 606 Townsend | Date of Disbursement MM / DD / YYYY 02 / 09 / 2008 |
| | City Lansing State MI Zip Code 48084 | Amount of Each Disbursement this Period 620.00 |
| | Purpose of Disbursement Bingo Hall Rental | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) MDP (nfa) | Transaction ID: SB21B.6819 |
| | Mailing Address 606 Townsend | Date of Disbursement MM / DD / YYYY 02 / 16 / 2008 |
| | City Lansing State MI Zip Code 48084 | Amount of Each Disbursement this Period 620.00 |
| | Purpose of Disbursement Bingo Hall Rental | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) MDP (nfa) | Transaction ID: SB21B.6821 |
| | Mailing Address 606 Townsend | Date of Disbursement MM / DD / YYYY 02 / 23 / 2008 |
| | City Lansing State MI Zip Code 48084 | Amount of Each Disbursement this Period 620.00 |
| | Purpose of Disbursement Bingo Hall Rental | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1860.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) MDP (nfa) | Transaction ID: SB21B.6823 |
| | Mailing Address 606 Townsend | Date of Disbursement MM / DD / YYYY 03 / 01 / 2008 |
| | City Lansing State MI Zip Code 48084 | Amount of Each Disbursement this Period 620.00 |
| | Purpose of Disbursement Bingo Hall Rental | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) MDP (nfa) | Transaction ID: SB21B.6825 |
| | Mailing Address 606 Townsend | Date of Disbursement MM / DD / YYYY 03 / 08 / 2008 |
| | City Lansing State MI Zip Code 48084 | Amount of Each Disbursement this Period 620.00 |
| | Purpose of Disbursement Bingo Hall Rental | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) MDP (nfa) | Transaction ID: SB21B.6827 |
| | Mailing Address 606 Townsend | Date of Disbursement MM / DD / YYYY 03 / 15 / 2008 |
| | City Lansing State MI Zip Code 48084 | Amount of Each Disbursement this Period 620.00 |
| | Purpose of Disbursement Bingo Hall Rental | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1860.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) MDP (nfa) | Transaction ID: SB21B.6830 |
| | Mailing Address 606 Townsend | Date of Disbursement MM / DD / YYYY 03 / 22 / 2008 |
| | City Lansing State MI Zip Code 48084 | Amount of Each Disbursement this Period 620.00 |
| | Purpose of Disbursement Bingo Hall Rental | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) MDP (nfa) | Transaction ID: SB21B.6834 |
| | Mailing Address 606 Townsend | Date of Disbursement MM / DD / YYYY 03 / 29 / 2008 |
| | City Lansing State MI Zip Code 48084 | Amount of Each Disbursement this Period 620.00 |
| | Purpose of Disbursement Bingo Hall Rental | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Eileen Melistas | Transaction ID: SB21B.7038 |
| | Mailing Address 39331 Della Rosa | Date of Disbursement MM / DD / YYYY 02 / 09 / 2008 |
| | City Sterling Heights State MI Zip Code 48313 | Amount of Each Disbursement this Period 225.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1465.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 49 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Jona Michele</p> <p>Mailing Address 17009 Langton</p> <p>City Clinton Twp State MI Zip Code 48038</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB21B.7119</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 | / | 0 | 9 | / | 2 | 0 | 0 | 8 | 500.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 2 | / | 0 | 9 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| 500.00 | | | | | | | | | | | | | | | | | | | | | | |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Patricia Mielke</p> <p>Mailing Address 1127 E. Hudson</p> <p>City Madison Heights State MI Zip Code 48071</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB21B.7377</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | / | 0 | 8 | / | 2 | 0 | 0 | 8 | 500.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | / | 0 | 8 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| 500.00 | | | | | | | | | | | | | | | | | | | | | | |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Christina Miller</p> <p>Mailing Address 47663 Lexington Dr.</p> <p>City Macomb State MI Zip Code 48044</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB21B.6908</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | / | 1 | 9 | / | 2 | 0 | 0 | 8 | 500.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 1 | / | 1 | 9 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| 500.00 | | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 50 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|-----------|---|--|
| A. | Full Name (Last, First, Middle Initial) Theresa Miller Mailing Address 36120 Harcourt City Clinton Township State MI Zip Code 48035 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.6842 Date of Disbursement 01 / 05 / 2008 Amount of Each Disbursement this Period 1000.00 |
| B. | Full Name (Last, First, Middle Initial) Theresa Miller Mailing Address 36120 Harcourt City Clinton Township State MI Zip Code 48035 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.6889 Date of Disbursement 01 / 12 / 2008 Amount of Each Disbursement this Period 100.00 |
| C. | Full Name (Last, First, Middle Initial) Theresa Miller Mailing Address 36120 Harcourt City Clinton Township State MI Zip Code 48035 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.7073 Date of Disbursement 02 / 16 / 2008 Amount of Each Disbursement this Period 250.00 |

SUBTOTAL of Disbursements This Page (optional) ▶

1350.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Christine Millon | Transaction ID: SB21B.7410 |
| | Mailing Address 57557 Verellen | Date of Disbursement MM / DD / YYYY 03 / 22 / 2008 |
| | City Lenox State MI Zip Code 48048 | Amount of Each Disbursement this Period 175.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Christine Millon | Transaction ID: SB21B.7427 |
| | Mailing Address 57557 Verellen | Date of Disbursement MM / DD / YYYY 03 / 22 / 2008 |
| | City Lenox State MI Zip Code 48048 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Cecelia Mosier | Transaction ID: SB21B.7401 |
| | Mailing Address 19341 Ike | Date of Disbursement MM / DD / YYYY 03 / 15 / 2008 |
| | City Roseville State MI Zip Code 48066 | Amount of Each Disbursement this Period 110.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1285.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Barbara Moutard | Transaction ID: SB21B.6921 Date of Disbursement |
| | Mailing Address 17456 Kingsbrooke Circle | <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2008"/> |
| | City Clinton Township State MI Zip Code 48038 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="150.00"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Barbara Moutard | Transaction ID: SB21B.6938 Date of Disbursement |
| | Mailing Address 17456 Kingsbrooke Circle | <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2008"/> |
| | City Clinton Township State MI Zip Code 48038 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="75.00"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Christine Mrozek | Transaction ID: SB21B.7415 Date of Disbursement |
| | Mailing Address 36687 Maas | <input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2008"/> |
| | City Sterling Heights State MI Zip Code 48312 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="50.00"/> |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|-------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="275.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

**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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Robert Myers | Transaction ID: SB21B.6980 |
| | Mailing Address 11126 Nottingham | Date of Disbursement MM / DD / YYYY 02 / 02 / 2008 |
| | City Fair Haven State MI Zip Code 48023 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | 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. | Full Name (Last, First, Middle Initial) Robert Myers | Transaction ID: SB21B.7037 |
| | Mailing Address 11126 Nottingham | Date of Disbursement MM / DD / YYYY 02 / 09 / 2008 |
| | City Fair Haven State MI Zip Code 48023 | Amount of Each Disbursement this Period 75.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | 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: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Robert Myers | Transaction ID: SB21B.7078 |
| | Mailing Address 11126 Nottingham | Date of Disbursement MM / DD / YYYY 02 / 16 / 2008 |
| | City Fair Haven State MI Zip Code 48023 | Amount of Each Disbursement this Period 100.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | 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: | |

| | | |
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| SUBTOTAL of Disbursements This Page (optional) | ▶ | 675.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | | | |
|-----------|--|--|---|
| A. | Full Name (Last, First, Middle Initial) Robert Myers Mailing Address 11126 Nottingham City Fair Haven State MI Zip Code 48023 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.7358 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 8 | Amount of Each Disbursement this Period 100.00 |
| B. | Full Name (Last, First, Middle Initial) National Security Patrol Mailing Address 27950 Jefferson City St. Clair Shores State MI Zip Code 48081 Purpose of Disbursement Security Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.6820 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 8 | Amount of Each Disbursement this Period 100.00 |
| C. | Full Name (Last, First, Middle Initial) National Security Patrol Mailing Address 27950 Jefferson City St. Clair Shores State MI Zip Code 48081 Purpose of Disbursement Security Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21B.6824 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 8 | Amount of Each Disbursement this Period 50.00 |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) | 250.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 55 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) National Security Patrol | Transaction ID: SB21B.6833 Date of Disbursement |
| | Mailing Address 27950 Jefferson | <input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2008"/> |
| | City State Zip Code St. Clair Shores MI 48081 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Security | <input type="text" value="250.00"/> |
| | Candidate Name | Category/ Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) Gail Novak | Transaction ID: SB21B.6893 Date of Disbursement |
| | Mailing Address 2249 Purcell | <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2008"/> |
| | City State Zip Code Sterling Heights MI 48310 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="1000.00"/> |
| | Candidate Name | Category/ Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Gail Novak | Transaction ID: SB21B.7114 Date of Disbursement |
| | Mailing Address 2249 Purcell | <input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2008"/> |
| | City State Zip Code Sterling Heights MI 48310 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="100.00"/> |
| | Candidate Name | Category/ Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="1350.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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)
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)
Lenora Obrecht

Transaction ID: SB21B.7395
Date of Disbursement

Mailing Address 17688 E. Kirkwood

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 1 | 5 | | 2 | 0 | 0 | 8 |

City Clinton Township State MI Zip Code 48038

Amount of Each Disbursement this Period

Purpose of Disbursement

| |
|--------|
| 110.00 |
|--------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Janice Perry

Transaction ID: SB21B.6872
Date of Disbursement

Mailing Address 28740 Alden

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 0 | 5 | | 2 | 0 | 0 | 8 |

City Madison Heights State MI Zip Code 48071

Amount of Each Disbursement this Period

Purpose of Disbursement

| |
|--------|
| 225.00 |
|--------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Janice Perry

Transaction ID: SB21B.6970
Date of Disbursement

Mailing Address 28740 Alden

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 2 | 6 | | 2 | 0 | 0 | 8 |

City Madison Heights State MI Zip Code 48071

Amount of Each Disbursement this Period

Purpose of Disbursement

| |
|--------|
| 150.00 |
|--------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

485.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 57 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Janice Perry | Transaction ID: SB21B.6976 |
| | Mailing Address 28740 Alden | Date of Disbursement MM / DD / YYYY 01 / 26 / 2008 |
| | City Madison Heights State MI Zip Code 48071 | Amount of Each Disbursement this Period 100.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Janice Perry | Transaction ID: SB21B.7072 |
| | Mailing Address 28740 Alden | Date of Disbursement MM / DD / YYYY 02 / 16 / 2008 |
| | City Madison Heights State MI Zip Code 48071 | Amount of Each Disbursement this Period 250.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Janice Perry | Transaction ID: SB21B.7312 |
| | Mailing Address 28740 Alden | Date of Disbursement MM / DD / YYYY 03 / 01 / 2008 |
| | City Madison Heights State MI Zip Code 48071 | Amount of Each Disbursement this Period 75.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 425.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Pat Pickell | Transaction ID: SB21B.7117 |
| | Mailing Address 7574 Sterling | Date of Disbursement MM / DD / YYYY 02 / 23 / 2008 |
| | City Centerline State MI Zip Code 48015 | Amount of Each Disbursement this Period 52.00 |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Ramona Pierce | Transaction ID: SB21B.7116 |
| | Mailing Address 15129 Northpointe | Date of Disbursement MM / DD / YYYY 02 / 23 / 2008 |
| | City Sterling Heights State MI Zip Code 48313 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Debra Pinarde | Transaction ID: SB21B.7033 |
| | Mailing Address 524 Marshall | Date of Disbursement MM / DD / YYYY 02 / 09 / 2008 |
| | City Coldwater State MI Zip Code 48036 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1202.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Jason Polly | Transaction ID: SB21B.7406 |
| | Mailing Address 33067 Fraser Ave | Date of Disbursement MM / DD / YYYY 03 / 15 / 2008 |
| | City Fraser State MI Zip Code 48026 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Mary Rank | Transaction ID: SB21B.7340 |
| | Mailing Address 15390 Cartier Dr. | Date of Disbursement MM / DD / YYYY 03 / 01 / 2008 |
| | City Clinton Twp State MI Zip Code 48038 | Amount of Each Disbursement this Period 100.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Wanda Reager | Transaction ID: SB21B.7310 |
| | Mailing Address 41880 Ryan | Date of Disbursement MM / DD / YYYY 03 / 01 / 2008 |
| | City Sterling Heights State MI Zip Code 48314 | Amount of Each Disbursement this Period 100.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 350.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) Tiaawnte Roberts</p> <p>Mailing Address 20150 Weybridge, #202</p> <p>City Clinton Township State MI Zip Code 48036</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p> | <p>Transaction ID: SB21B.7424 Date of Disbursement: 03 / 22 / 2008</p> <p>Amount of Each Disbursement this Period: 110.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) Sheryl Roderick</p> <p>Mailing Address 27438 EICapitan</p> <p>City Warren State MI Zip Code 48092</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p> | <p>Transaction ID: SB21B.7405 Date of Disbursement: 03 / 15 / 2008</p> <p>Amount of Each Disbursement this Period: 1000.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) Frank Sansome</p> <p>Mailing Address 60893 Middle River</p> <p>City Macomb State MI Zip Code 48044</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p> | <p>Transaction ID: SB21B.7378 Date of Disbursement: 03 / 08 / 2008</p> <p>Amount of Each Disbursement this Period: 110.00</p> |

| | |
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| SUBTOTAL of Disbursements This Page (optional) | 1220.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Frank Sansome | Transaction ID: SB21B.7464 Date of Disbursement 03 / 29 / 2008 |
| | Mailing Address 60893 Middle River | Amount of Each Disbursement this Period 1000.00 |
| | City Macomb State MI Zip Code 48044 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Frank Sansone | Transaction ID: SB21B.6969 Date of Disbursement 01 / 26 / 2008 |
| | Mailing Address 17618 E. Kirkwood | Amount of Each Disbursement this Period 100.00 |
| | City Clinton Twp State MI Zip Code 48035 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Sharon Smith | Transaction ID: SB21B.7008 Date of Disbursement 02 / 02 / 2008 |
| | Mailing Address 9477 12 Mile Rd. | Amount of Each Disbursement this Period 150.00 |
| | City Warren State MI Zip Code 48089 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | |
|--|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Gerald Suminski</p> <p>Mailing Address 20825 Bon Heur</p> <p>City St. Clair Shores State MI Zip Code 48081</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB21B.6993</p> <p>Date of Disbursement 02 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 75.00</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Gerald Suminski</p> <p>Mailing Address 20825 Bon Heur</p> <p>City St. Clair Shores State MI Zip Code 48081</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB21B.6999</p> <p>Date of Disbursement 02 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 55.00</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Anne Sunday</p> <p>Mailing Address 5555 Chartier</p> <p>City Marine City State MI Zip Code 48039</p> <p>Purpose of Disbursement Progressive Bingo Prize</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB21B.7597</p> <p>Date of Disbursement 03 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 2857.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

2987.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 64 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Carol Szalewicz | Transaction ID: SB21B.7046 Date of Disbursement MM / DD / YYYY 02 / 09 / 2008 |
| | Mailing Address 38763 Windmill Pte. | Amount of Each Disbursement this Period 100.00 |
| | City Clinton Township State MI Zip Code 48038 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Stacey Tjapkis | Transaction ID: SB21B.7360 Date of Disbursement MM / DD / YYYY 03 / 08 / 2008 |
| | Mailing Address 45839 Cass | Amount of Each Disbursement this Period 77.00 |
| | City Utica State MI Zip Code 48317 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Lori Veres | Transaction ID: SB21B.6988 Date of Disbursement MM / DD / YYYY 02 / 02 / 2008 |
| | Mailing Address 13831 Murthum | Amount of Each Disbursement this Period 500.00 |
| | City Warren State MI Zip Code 48088 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 677.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 65 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | |
|--|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Lori Veres</p> <p>Mailing Address 13831 Murthum</p> <p>City Warren State MI Zip Code 48088</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p> | <p>Transaction ID: SB21B.7005</p> <p>Date of Disbursement MM / DD / YYYY 02 / 02 / 2008</p> <p>Amount of Each Disbursement this Period <input type="text" value="150.00"/></p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Lori Veres</p> <p>Mailing Address 13831 Murthum</p> <p>City Warren State MI Zip Code 48088</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p> | <p>Transaction ID: SB21B.7028</p> <p>Date of Disbursement MM / DD / YYYY 02 / 09 / 2008</p> <p>Amount of Each Disbursement this Period <input type="text" value="110.00"/></p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Lori Veres</p> <p>Mailing Address 13831 Murthum</p> <p>City Warren State MI Zip Code 48088</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p> | <p>Transaction ID: SB21B.7115</p> <p>Date of Disbursement MM / DD / YYYY 02 / 23 / 2008</p> <p>Amount of Each Disbursement this Period <input type="text" value="150.00"/></p> |

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 66 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Lori Veres | Transaction ID: SB21B.7311 |
| | Mailing Address 13831 Murthum | Date of Disbursement MM / DD / YYYY 03 / 01 / 2008 |
| | City Warren State MI Zip Code 48088 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Lori Veres | Transaction ID: SB21B.7316 |
| | Mailing Address 13831 Murthum | Date of Disbursement MM / DD / YYYY 03 / 01 / 2008 |
| | City Warren State MI Zip Code 48088 | Amount of Each Disbursement this Period 202.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Lori Veres | Transaction ID: SB21B.7409 |
| | Mailing Address 13831 Murthum | Date of Disbursement MM / DD / YYYY 03 / 22 / 2008 |
| | City Warren State MI Zip Code 48088 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 502.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 67 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

A.

Full Name (Last, First, Middle Initial)
Evelyn White

Transaction ID: SB21B.6887
Date of Disbursement

Mailing Address 13119 Clinton River Road

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

City State Zip Code
Sterling Heights MI 48313

Amount of Each Disbursement this Period

Purpose of Disbursement

| |
|--------|
| 110.00 |
|--------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Evelyn White

Transaction ID: SB21B.6960
Date of Disbursement

Mailing Address 13119 Clinton River Road

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 2 | 6 | | 2 | 0 | 0 | 8 |

City State Zip Code
Sterling Heights MI 48313

Amount of Each Disbursement this Period

Purpose of Disbursement

| |
|--------|
| 166.75 |
|--------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Evelyn White

Transaction ID: SB21B.6996
Date of Disbursement

Mailing Address 13119 Clinton River Road

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | | 0 | 2 | | 2 | 0 | 0 | 8 |

City State Zip Code
Sterling Heights MI 48313

Amount of Each Disbursement this Period

Purpose of Disbursement

| |
|-------|
| 60.00 |
|-------|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

336.75

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 68 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Evelyn White | Transaction ID: SB21B.7013 Date of Disbursement 02 / 02 / 2008 |
| | Mailing Address 13119 Clinton River Road | Amount of Each Disbursement this Period 60.00 |
| | City Sterling Heights State MI Zip Code 48313 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Evelyn White | Transaction ID: SB21B.7020 Date of Disbursement 02 / 09 / 2008 |
| | Mailing Address 13119 Clinton River Road | Amount of Each Disbursement this Period 60.00 |
| | City Sterling Heights State MI Zip Code 48313 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Evelyn White | Transaction ID: SB21B.7315 Date of Disbursement 03 / 01 / 2008 |
| | Mailing Address 13119 Clinton River Road | Amount of Each Disbursement this Period 250.00 |
| | City Sterling Heights State MI Zip Code 48313 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 370.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: (check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Evelyn White | Transaction ID: SB21B.7349 |
| | Mailing Address 13119 Clinton River Road | Date of Disbursement 03 / 08 / 2008 |
| | City Sterling Heights State MI Zip Code 48313 | Amount of Each Disbursement this Period 50.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Evelyn White | Transaction ID: SB21B.7359 |
| | Mailing Address 13119 Clinton River Road | Date of Disbursement 03 / 08 / 2008 |
| | City Sterling Heights State MI Zip Code 48313 | Amount of Each Disbursement this Period 100.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Renee White | Transaction ID: SB21B.7438 |
| | Mailing Address 35633 Georgetown | Date of Disbursement 03 / 29 / 2008 |
| | City Sterling Heights State MI Zip Code 48312 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 300.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Frances Witkowski | Transaction ID: SB21B.7010 |
| | Mailing Address 11651 Ebony | Date of Disbursement MM / DD / YYYY 02 / 02 / 2008 |
| | City Sterling Heights State MI Zip Code 48312 | Amount of Each Disbursement this Period 75.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Frances Witkowski | Transaction ID: SB21B.7110 |
| | Mailing Address 11651 Ebony | Date of Disbursement MM / DD / YYYY 02 / 23 / 2008 |
| | City Sterling Heights State MI Zip Code 48312 | Amount of Each Disbursement this Period 77.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Frances Witkowski | Transaction ID: SB21B.7319 |
| | Mailing Address 11651 Ebony | Date of Disbursement MM / DD / YYYY 03 / 01 / 2008 |
| | City Sterling Heights State MI Zip Code 48312 | Amount of Each Disbursement this Period 100.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 252.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Frances Witkowski | Transaction ID: SB21B.7390 |
| | Mailing Address 11651 Ebony | Date of Disbursement MM / DD / YYYY 03 / 15 / 2008 |
| | City Sterling Heights State MI Zip Code 48312 | Amount of Each Disbursement this Period 150.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Frances Witkowski | Transaction ID: SB21B.7416 |
| | Mailing Address 11651 Ebony | Date of Disbursement MM / DD / YYYY 03 / 22 / 2008 |
| | City Sterling Heights State MI Zip Code 48312 | Amount of Each Disbursement this Period 175.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Gary Zakoor | Transaction ID: SB21B.6914 |
| | Mailing Address 13647 Murthum Drive | Date of Disbursement MM / DD / YYYY 01 / 19 / 2008 |
| | City Warren State MI Zip Code 48088 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 825.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 72 / 73

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Philip A. Hart Democratic Club

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Lois Zakoor | Transaction ID: SB21B.6947 |
| | Mailing Address 13647 Murthum | Date of Disbursement MM / DD / YYYY 01 / 26 / 2008 |
| | City Warren State MI Zip Code 48088 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Teresa Zombek | Transaction ID: SB21B.7085 |
| | Mailing Address 39783 Chart | Date of Disbursement MM / DD / YYYY 02 / 16 / 2008 |
| | City Harrison Twp State MI Zip Code 48045 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Teresa Zombek | Transaction ID: SB21B.7100 |
| | Mailing Address 39783 Chart | Date of Disbursement MM / DD / YYYY 02 / 23 / 2008 |
| | City Harrison Twp State MI Zip Code 48045 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|----------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 57132.07 |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Philip A. Hart Democratic Club

A. Full Name (Last, First, Middle Initial)
Deluxe Forms

Mailing Address

City State Zip Code

Purpose of Disbursement:
New Check Printing

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19.50

Date / /

Transaction ID: H4.6807

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 7.02 | | 12.48 | | 19.50 |

B. Full Name (Last, First, Middle Initial)
Practical Political Consulting, Inc.

Mailing Address

PO Box 6249 220 Albert Street

City State Zip Code

Lansing MI 48823

Purpose of Disbursement:
Consulting Agreement

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2519.50

Date / /

Transaction ID: H4.7474

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 900.00 | | 1600.00 | | 2500.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 907.02 | | 1612.48 | | 2519.50 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| 907.02 | | 1612.48 | | 2519.50 |