

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

Benishek for Congress, Inc.

ADDRESS (number and street) ▼

PO Box 108

Check if different than previously reported. (ACC)

Gladstone

MI

49837-0108

2. **FEC IDENTIFICATION NUMBER** ▼

C C00476325

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

MI

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

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

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /  through  /  /

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 Chris Marston

Signature of Treasurer Chris Marston

[Electronically Filed]

Date

/  /

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									
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Benishek for Congress, Inc.**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 07 / 16 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	30240.75	1465115.3
(b) Total Contribution Refunds (from Line 20(d)) .....	0	9241.86
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	30240.75	1455873.44
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	141732.69	845612.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	8005.63
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	141732.69	837606.75
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	830702.51	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	74500	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Benishek for Congress, Inc.**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 07 / 16 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12150	205878.97
(ii) Unitemized.....	3590.75	474131.88
(iii) TOTAL of contributions from individuals ▶	15740.75	680010.85
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	14500	785104.45
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	30240.75	1465115.3
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	60500.83
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	8005.63
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0	11315.87
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	30240.75	1544937.63

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	141732.69	845612.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	18500
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	18500
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	6241.86
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	3000
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	9241.86
21. OTHER DISBURSEMENTS .....	0	0
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	141732.69	873354.24

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	942194.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	30240.75
25. SUBTOTAL (add Line 23 and Line 24).....	972435.2
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	141732.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	830702.51

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Russell Real Estate Holdings, LLC**

Mailing Address 3101 Page Avenue

City Jackson State MI Zip Code 49203-2254

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : A-CF21594**

Amount of Each Receipt this Period  
 2500

LLC Attribution Requested

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Cameron Brunet-Koch**

Mailing Address 3470 Traverse Heights Drive

City Petoskey State MI Zip Code 49770-8637

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

Name of Employer Occupation  
 North Central Michigan Colle College President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : A-CF21469**

Amount of Each Receipt this Period  
 100

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Mary Jo Daggitt**

Mailing Address PO Box 126

City De Tour Village State MI Zip Code 49725-0126

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

Name of Employer Occupation  
 West Michigan Shores Realty Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : A-CF21571**

Amount of Each Receipt this Period  
 100

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence F. Draper**

Mailing Address 6343 E Harbor Drive

City Elk Rapids State MI Zip Code 49629-9541

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

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

**Transaction ID : A-CF21476**

Amount of Each Receipt this Period  
 100

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

Mailing Address 300 New Jersey Avenue NW Suite 800

City Washington State DC Zip Code 20001-2292

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

Name of Employer State of Michigan Occupation Former Governor of MI

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2014

**Transaction ID : A-CF21484**

Amount of Each Receipt this Period  
 1500

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

Mailing Address 2145 Crystal Drive

City Frankfort State MI Zip Code 49635-9212

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : A-CF21567**

Amount of Each Receipt this Period  
 100

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

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

Mailing Address 245 Guenther Ridge

City State Zip Code  
Gaylord MI 49735-7518

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

Name of Employer Occupation  
RLH Industries Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : A-CF21590**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Maria L. Kovaleski**

Mailing Address 1333 N Higley Road  
Unit 17

City State Zip Code  
Mesa AZ 85205-4261

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

Name of Employer Occupation  
Walter Kovaleski, D.D.S. Dental Hygentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**325**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : A-CF21577**

Amount of Each Receipt this Period  
**125**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Brian Larche**

Mailing Address 1800 S 21.5 Drive

City State Zip Code  
Escanaba MI 49829-2045

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

Name of Employer Occupation  
EMP CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3150**

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

**Transaction ID : A-IF21674**

Amount of Each Receipt this Period  
**650**

Inkind: Food & Beverages

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

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

**1775.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James A. Manthei**

Mailing Address 4835 Manthei Road

City Petoskey State MI Zip Code 49770-8501

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

Name of Employer Rosetta Hardscapes Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2160**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 14 / 2014**

**Transaction ID : A-CF21575**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Manthei**

Mailing Address 5563 Manthei Road

City Petoskey State MI Zip Code 49770-9744

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

Name of Employer Manthei Inc. Occupation President/owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4600**

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

**Transaction ID : A-CF21480**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Richard Meade**

Mailing Address 702 Berry Street

City Falls Church State VA Zip Code 22042-2402

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

Name of Employer Managing Director Occupation Prime Policy Group

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

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

**Transaction ID : A-CF21482**

Amount of Each Receipt this Period  
**500**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John D. Milne**

Mailing Address 409 G Street SE

City Washington State DC Zip Code 20003-4257

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

Name of Employer mCapital Occupation VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : A-CF21592**

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**James G. Reynolds**

Mailing Address 3125 S Lee Point Road

City Suttons Bay State MI Zip Code 49682-9526

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

Name of Employer The Cherry Idea Co. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

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

**Transaction ID : A-CF21467**

Amount of Each Receipt this Period  
 250

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

Mailing Address 740 Randall Drive

City Troy State MI Zip Code 48085-4853

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100**

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

**Transaction ID : A-CF21464**

Amount of Each Receipt this Period  
 200

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Paul W. Stark**

Mailing Address **PO Box 21**

City **Baraga** State **MI** Zip Code **49908-0021**

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

Name of Employer **Baraga Telephone Co.** Occupation **Engineer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100**

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

**Transaction ID : A-CF21404**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Donald F. Theodore**

Mailing Address **210 North Third Ave.**

City **Big Rapids** State **MI** Zip Code **49307**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **525**

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

**Transaction ID : A-CF21459**

Amount of Each Receipt this Period  
**125**

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

Mailing Address **13685 S West Bay Shore Drive  
Suite 200**

City **Traverse City** State **MI** Zip Code **49684-6290**

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

Name of Employer **West Bay Exploration** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **6200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 16 / 2014**

**Transaction ID : A-CF21588**

Amount of Each Receipt this Period  
**1200**

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

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

**1525.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Norma VanKuiken**

Mailing Address 6802 Fox Meadow Lane SE

City State Zip Code  
Ada MI 49301-7559

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

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

**Transaction ID : A-CF21458**

Amount of Each Receipt this Period  
**500**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**500.00**

**12150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 49
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**American College of Cardiology Political Action Committee**

Mailing Address 2400 N Street NW

City Washington State DC Zip Code 20037-1153

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7500

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

**Transaction ID : A-CF21481**

Amount of Each Receipt this Period  
2500

**B.** Full Name (Last, First, Middle Initial)  
**American College of Radiology Association PAC**

Mailing Address 1891 Preston White Drive

City Reston State VA Zip Code 20191-4326

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 15 / 2014

**Transaction ID : A-CF21585**

Amount of Each Receipt this Period  
2000

**C.** Full Name (Last, First, Middle Initial)  
**Boston Scientific Political Action Committee**

Mailing Address 1 Boston Scientific Place

City Natick State MA Zip Code 01760-1536

FEC ID number of contributing federal political committee. **C** C00476325

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

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

**Transaction ID : A-CF21483**

Amount of Each Receipt this Period  
1000

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Cohnreznick LLP PAC**

Mailing Address 1212 Avenue Of The Americas

City State Zip Code  
New York NY 10036-1602

FEC ID number of contributing federal political committee. **C C00547216**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : A-CF21593**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Independent Community Bankers PAC**

Mailing Address 1615 L Street NW  
Suite 900

City State Zip Code  
Washington DC 20036-5623

FEC ID number of contributing federal political committee. **C C00032698**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : A-CF21582**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**INTEGRYS ENERGY GROUP PAC**

Mailing Address 130 E Randolph Street

City State Zip Code  
Chicago IL 60601-6207

FEC ID number of contributing federal political committee. **C C00442707**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : A-CF21578**

Amount of Each Receipt this Period  
1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**National Cable & Telecommunications Association PAC (NCTA PAC)**

Mailing Address 25 Massachusetts Avenue NW  
Suite 100

City Washington State DC Zip Code 20001-1434

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : A-CF21591**

Amount of Each Receipt this Period  
5000

**B.** Full Name (Last, First, Middle Initial)  
**Resolute Forest Products PAC**

Mailing Address 3502 Regents Park Court

City Arlington State TX Zip Code 76017-4695

FEC ID number of contributing federal political committee. **C** C00350884

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : A-CF21586**

Amount of Each Receipt this Period  
1000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

6000.00

14500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. American Waste Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address PO Box 1030		Amount of Each Disbursement this Period 36.69 <b>Transaction ID : B-E-21603</b>
City Kalkaska	State MI	
Zip Code 49646-1030	Purpose of Disbursement Utilities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. American Waste Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address PO Box 1030		Amount of Each Disbursement this Period 36.69 <b>Transaction ID : B-E-21604</b>
City Kalkaska	State MI	
Zip Code 49646-1030	Purpose of Disbursement Utilities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Aristotle International Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 16.75 <b>Transaction ID : B-E-21468</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement CC Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	90.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 205 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 9 9 9 9 . 9 9 2.5 <b>Transaction ID : B-E-21490</b>
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement CC Processing		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. Aristotle International Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 205 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 9 9 9 9 . 9 9 16 <b>Transaction ID : B-E-21563</b>
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement CC Processing		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 208 S Akard Street			Amount of Each Disbursement this Period 9 9 9 9 . 9 9 74.46 <b>Transaction ID : B-E-21505</b>
City Dallas	State TX	Zip Code 75202-4206	
Purpose of Disbursement Cell Service		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	92.96
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Bill.com</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 3200 Ash Street		Amount of Each Disbursement this Period 65.44
City Palo Alto	State CA	
Zip Code 94306-2239	Purpose of Disbursement Accounting Service	Transaction ID : B-E-21511
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BP</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 501 Westlake Park Boulevard		Amount of Each Disbursement this Period 27.04
City Houston	State TX	
Zip Code 77079-2604	Purpose of Disbursement Gas	Transaction ID : B-E-21609
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Brownstein Hyatt Farber Schreck</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 410 17th Street Floor 22		Amount of Each Disbursement this Period 350
City Denver	State CO	
Zip Code 80202-4437	Purpose of Disbursement Facilities Cost Reimbursement	Transaction ID : B-E-21534
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	442.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Carmine's Washington D.C.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 425 7th Street NW		Amount of Each Disbursement this Period 325.75 <b>Transaction ID : B-E-21521</b>
City Washington	State DC	
Zip Code 20004-2229	Purpose of Disbursement Food & Beverages	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. DeLullo &amp; Associates, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 815 King Street Suite 311		Amount of Each Disbursement this Period 1767.37 <b>Transaction ID : B-E-21532</b>
City Alexandria	State VA	
Zip Code 22314-5020	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. DeLullo &amp; Associates, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 815 King Street Suite 311		Amount of Each Disbursement this Period 27421.49 <b>Transaction ID : B-E-21620</b>
City Alexandria	State VA	
Zip Code 22314-5020	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	29514.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A. Direct Response Strategies**

Full Name (Last, First, Middle Initial)  
Mailing Address 228 S Washington Street Suite B30  
City Alexandria State VA Zip Code 22314-5409  
Purpose of Disbursement Direct Mail Services  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)  
State: District:

Date of Disbursement: 07 / 11 / 2014  
Amount of Each Disbursement this Period: 6867.09  
Transaction ID : B-E-21621

**B. DTE Energy**

Full Name (Last, First, Middle Initial)  
Mailing Address Once Energy Plaza  
City Detroit State MI Zip Code 48226  
Purpose of Disbursement Utilities  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)  
State: District:

Date of Disbursement: 07 / 01 / 2014  
Amount of Each Disbursement this Period: 80.58  
Transaction ID : B-E-21523

**C. Exxon Mobil**

Full Name (Last, First, Middle Initial)  
Mailing Address 5959 Las Colinas Boulevard  
City Irving State TX Zip Code 75039-4202  
Purpose of Disbursement Gas  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)  
State: District:

Date of Disbursement: 07 / 08 / 2014  
Amount of Each Disbursement this Period: 29.16  
Transaction ID : B-E-21519

**SUBTOTAL** of Disbursements This Page (optional) ..... 6976.83  
**TOTAL** This Period (last page this line number only) .....

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

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

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 942 S Shady Grove Road		Amount of Each Disbursement this Period 19.82
City Memphis	State TN	
Zip Code 38120-4117	Purpose of Disbursement Shipping	Transaction ID : B-E-21509
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 942 S Shady Grove Road		Amount of Each Disbursement this Period 134.3
City Memphis	State TN	
Zip Code 38120-4117	Purpose of Disbursement Shipping	Transaction ID : B-E-21514
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Gordon Food Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 3480 US Highway 41 W		Amount of Each Disbursement this Period 299.7
City Marquette	State MI	
Zip Code 49855-9485	Purpose of Disbursement Gas	Transaction ID : B-E-21507
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	453.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Grand Traverse County Republican Party</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address PO Box 5226			Amount of Each Disbursement this Period 75 <b>Transaction ID : B-E-21611</b>
City Traverse City	State MI	Zip Code 49696-5226	
Purpose of Disbursement Event Ticket	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Grand Traverse County Republican Party</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address PO Box 5226			Amount of Each Disbursement this Period 75 <b>Transaction ID : B-E-21615</b>
City Traverse City	State MI	Zip Code 49696-5226	
Purpose of Disbursement Event Ticket	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Krist Oil Company</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 303 Selden Road			Amount of Each Disbursement this Period 26.9 <b>Transaction ID : B-E-21508</b>
City Iron River	State MI	Zip Code 49935-1831	
Purpose of Disbursement Gas	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	176.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A. Maple River Direct mail**

Full Name (Last, First, Middle Initial)  
Mailing Address 1569 Northern Star Drive

City Traverse City State MI Zip Code 49696-9243

Purpose of Disbursement Direct Mail Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 11 / 2014

Amount of Each Disbursement this Period: 420.64

Transaction ID : B-E-21622

**B. MARATHON OIL**

Full Name (Last, First, Middle Initial)  
Mailing Address 502 S OSTEGO AVENUE

City GAYLORD State MI Zip Code 49735

Purpose of Disbursement Gas

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 01 / 2014

Amount of Each Disbursement this Period: 255.83

Transaction ID : B-E-21503

**c. Marketing Resource Group Inc**

Full Name (Last, First, Middle Initial)  
Mailing Address 225 S Washington Square

City Lansing State MI Zip Code 48933-1807

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 10 / 2014

Amount of Each Disbursement this Period: 3500

Transaction ID : B-E-21618

**SUBTOTAL** of Disbursements This Page (optional) ..... 4176.47

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

**A. Moneywise Payroll**

Full Name (Last, First, Middle Initial)

Mailing Address 1928 Arlington Boulevard  
Suite 100

City Charlottesville State VA Zip Code 22903-1561

Purpose of Disbursement Payroll Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 07 / 01 / 2014

Amount of Each Disbursement this Period: 60.25

Transaction ID : B-E-21522

**B. Moneywise Payroll**

Full Name (Last, First, Middle Initial)

Mailing Address 1928 Arlington Boulevard  
Suite 100

City Charlottesville State VA Zip Code 22903-1561

Purpose of Disbursement Employer Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 07 / 01 / 2014

Amount of Each Disbursement this Period: 1065.05

Transaction ID : B-E-21552

**c. Moneywise Payroll**

Full Name (Last, First, Middle Initial)

Mailing Address 1928 Arlington Boulevard  
Suite 100

City Charlottesville State VA Zip Code 22903-1561

Purpose of Disbursement Payroll Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 62.75

Transaction ID : B-E-21644

**SUBTOTAL** of Disbursements This Page (optional) ..... 1188.05

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Moneywise Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1928 Arlington Boulevard Suite 100		Amount of Each Disbursement this Period 1171.23 <b>Transaction ID : B-E-21654</b>
City Charlottesville	State VA Zip Code 22903-1561	
Purpose of Disbursement Employer Payroll Taxes		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 6600 N Military Trail		Amount of Each Disbursement this Period 161.86 <b>Transaction ID : B-E-21602</b>
City Boca Raton	State FL Zip Code 33496-2434	
Purpose of Disbursement Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 6600 N Military Trail		Amount of Each Disbursement this Period 30 <b>Transaction ID : B-E-21612</b>
City Boca Raton	State FL Zip Code 33496-2434	
Purpose of Disbursement Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1363.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 401 W 15th Street Suite 520		Amount of Each Disbursement this Period 36.47
City Austin State TX Zip Code 78701-1671	Purpose of Disbursement CC Processing	
Candidate Name		Transaction ID : B-E-21390
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 401 W 15th Street Suite 520		Amount of Each Disbursement this Period 122.74
City Austin State TX Zip Code 78701-1671	Purpose of Disbursement CC Processing	
Candidate Name		Transaction ID : B-E-21554
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 401 W 15th Street Suite 520		Amount of Each Disbursement this Period 175.32
City Austin State TX Zip Code 78701-1671	Purpose of Disbursement CC Processing	
Candidate Name		Transaction ID : B-E-21555
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	334.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 401 W 15th Street Suite 520		Amount of Each Disbursement this Period 17.33 <b>Transaction ID : B-E-21560</b>
City Austin State TX Zip Code 78701-1671	Purpose of Disbursement CC Processing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 401 W 15th Street Suite 520		Amount of Each Disbursement this Period 13.5 <b>Transaction ID : B-E-21561</b>
City Austin State TX Zip Code 78701-1671	Purpose of Disbursement CC Processing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 401 W 15th Street Suite 520		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : B-E-21562</b>
City Austin State TX Zip Code 78701-1671	Purpose of Disbursement CC Processing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	17.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Scott Howell &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014	
Mailing Address 3900 Willow Street Suite 200			Amount of Each Disbursement this Period 45703	
City Dallas	State TX	Zip Code 75226-1248	Transaction ID : B-E-21606	
Purpose of Disbursement Advertising		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. SHELL OIL</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 910 Louisiana Street			Amount of Each Disbursement this Period 6.14	
City Houston	State TX	Zip Code 77002-4916	Transaction ID : B-E-21524	
Purpose of Disbursement Gas		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. SHELL OIL</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014	
Mailing Address 910 Louisiana Street			Amount of Each Disbursement this Period 32.98	
City Houston	State TX	Zip Code 77002-4916	Transaction ID : B-E-21516	
Purpose of Disbursement Gas		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	45742.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. The Daily News</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 215 E Ludington Street		Amount of Each Disbursement this Period 168.75
City Iron Mountain	State MI Zip Code 49801-2917	
Purpose of Disbursement Advertising	Candidate Name	Transaction ID : B-E-21506
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. THE HOME DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 2522 Crossing Circle		Amount of Each Disbursement this Period 105.42
City Traverse City	State MI Zip Code 49684-7955	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : B-E-21616
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. The Tarrance Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 201 N Union Street Suite 410		Amount of Each Disbursement this Period 14229
City Alexandria	State VA Zip Code 22314-2649	
Purpose of Disbursement Public Opinion Research	Candidate Name	Transaction ID : B-E-21530
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14503.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 49		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>01</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		01		2014
M M	/	D D	/	Y Y Y Y									
07		01		2014									
Mailing Address 350 W Saint Paul Avenue		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Milwaukee</td> <td>WI</td> <td>53203-3018</td> </tr> </table>		City	State	Zip Code	Milwaukee	WI	53203-3018	<table border="1"> <tr> <td>82.88</td> </tr> </table>		82.88			
City	State	Zip Code											
Milwaukee	WI	53203-3018											
82.88													
Purpose of Disbursement Postage		Transaction ID : B-E-21502											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>09</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		09		2014
M M	/	D D	/	Y Y Y Y									
07		09		2014									
Mailing Address 350 W Saint Paul Avenue		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Milwaukee</td> <td>WI</td> <td>53203-3018</td> </tr> </table>		City	State	Zip Code	Milwaukee	WI	53203-3018	<table border="1"> <tr> <td>246.85</td> </tr> </table>		246.85			
City	State	Zip Code											
Milwaukee	WI	53203-3018											
246.85													
Purpose of Disbursement Postage		Transaction ID : B-E-21520											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		15		2014
M M	/	D D	/	Y Y Y Y									
07		15		2014									
Mailing Address 350 W Saint Paul Avenue		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Milwaukee</td> <td>WI</td> <td>53203-3018</td> </tr> </table>		City	State	Zip Code	Milwaukee	WI	53203-3018	<table border="1"> <tr> <td>49.85</td> </tr> </table>		49.85			
City	State	Zip Code											
Milwaukee	WI	53203-3018											
49.85													
Purpose of Disbursement Postage		Transaction ID : B-E-21613											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	379.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address PO Box 15062		Amount of Each Disbursement this Period 224.48 <b>Transaction ID : B-E-21601</b>
City Albany	State NY Zip Code 12212-5062	
Purpose of Disbursement Cell Service	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 330 N Washington Street		Amount of Each Disbursement this Period 12 <b>Transaction ID : B-E-21500</b>
City Alexandria	State VA Zip Code 22314-2502	
Purpose of Disbursement Returned Item Fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Daniel J. Benishek M.D.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 802 Pentoga Trail		Amount of Each Disbursement this Period 86.4 <b>Transaction ID : B-E-21617</b>
City Crystal Falls	State MI Zip Code 49920-8518	
Purpose of Disbursement Reimbursement (Below Threshold)	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	322.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Daniel Blough</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 8987 White Birch Trail		Amount of Each Disbursement this Period 196.83 <b>Transaction ID : B-E-21531</b>
City Gaylord	State MI	
Zip Code 49735-9005	Purpose of Disbursement Travel Expense Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Michelle Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 6066 Country Club 19.25 Lane		Amount of Each Disbursement this Period 2000 <b>Transaction ID : B-E-21528</b>
City Gladstone	State MI	
Zip Code 49837-2417	Purpose of Disbursement Administrative Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Michelle Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 6066 Country Club 19.25 Lane		Amount of Each Disbursement this Period 120.45 <b>Transaction ID : B-E-21541</b>
City Gladstone	State MI	
Zip Code 49837-2417	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2317.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Timothy Foster</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address N Northport Point Rd		Amount of Each Disbursement this Period 1250 <b>Transaction ID : B-E-21545</b>
City Northport	State MI Zip Code 49670	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Timothy Foster</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address N Northport Point Rd		Amount of Each Disbursement this Period 38.56 <b>Transaction ID : B-E-21538</b>
City Northport	State MI Zip Code 49670	
Purpose of Disbursement Mileage Reimbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Timothy Foster</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address N Northport Point Rd		Amount of Each Disbursement this Period 1358.34 <b>Transaction ID : B-E-21645</b>
City Northport	State MI Zip Code 49670	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2646.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Michael Grunlund</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 741 Pentoga Trail		Amount of Each Disbursement this Period 3000 <b>Transaction ID : B-E-21546</b>
City Crystal Falls	State MI	
Zip Code 49920-8517	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Michael Grunlund</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 741 Pentoga Trail		Amount of Each Disbursement this Period 3000 <b>Transaction ID : B-E-21646</b>
City Crystal Falls	State MI	
Zip Code 49920-8517	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Errin R Kane</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 417 S 1st Avenue		Amount of Each Disbursement this Period 1400 <b>Transaction ID : B-E-21547</b>
City Alpena	State MI	
Zip Code 49707-3811	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Errin R Kane</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 417 S 1st Avenue		Amount of Each Disbursement this Period 115.66 <b>Transaction ID : B-E-21624</b>
City Alpena State MI Zip Code 49707-3811	Purpose of Disbursement Reimbursement (See Below)	
Candidate Name	Category/Type	Original vendors exceeding reporting threshold itemized as memo transactions.
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Errin R Kane</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 417 S 1st Avenue		Amount of Each Disbursement this Period 1400 <b>Transaction ID : B-E-21647</b>
City Alpena State MI Zip Code 49707-3811	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Mr. Brian Larche</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1800 S 21.5 Drive		Amount of Each Disbursement this Period 650 <b>Transaction ID : B-I-21674</b>
City Escanaba State MI Zip Code 49829-2045	Purpose of Disbursement Inkind: Food & Beverages	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2165.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 49		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Luke Londo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1111 Cleveland Avenue		Amount of Each Disbursement this Period 1333.33
City Marquette	State MI Zip Code 49855-2509	
Purpose of Disbursement Salary	Category/Type	<b>Transaction ID : B-E-21548</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Luke Londo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1111 Cleveland Avenue		Amount of Each Disbursement this Period 25
City Marquette	State MI Zip Code 49855-2509	
Purpose of Disbursement Cell Phone Stipend	Category/Type	<b>Transaction ID : B-E-21553</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Luke Londo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 1111 Cleveland Avenue		Amount of Each Disbursement this Period 314.77
City Marquette	State MI Zip Code 49855-2509	
Purpose of Disbursement Mileage Reimbursement	Category/Type	<b>Transaction ID : B-E-21540</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1673.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Luke Londo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1111 Cleveland Avenue		Amount of Each Disbursement this Period 356.94 <b>Transaction ID : B-E-21625</b>
City Marquette State MI Zip Code 49855-2509	Purpose of Disbursement Mileage Reimbursement	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Luke Londo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1111 Cleveland Avenue		Amount of Each Disbursement this Period 1333.33 <b>Transaction ID : B-E-21648</b>
City Marquette State MI Zip Code 49855-2509	Purpose of Disbursement Salary	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Luke Londo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1111 Cleveland Avenue		Amount of Each Disbursement this Period 25 <b>Transaction ID : B-E-21653</b>
City Marquette State MI Zip Code 49855-2509	Purpose of Disbursement Cell Phone Stipend	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1715.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Preston J Mozingo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 1250 <b>Transaction ID : B-E-21549</b>
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Preston J Mozingo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 610.28 <b>Transaction ID : B-E-21542</b>
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Reimbursement (See Below)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>c. Kiwanis Club of Marquette</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO Box 563		Amount of Each Disbursement this Period 250 <b>Transaction ID : B-S-1229</b>
City Marquette	State MI	
Zip Code 49855-0563	Purpose of Disbursement Parade Registration	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of Preston Mozingo(07/07/14)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1860.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Preston J Mozingo</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 312.32
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Mileage Reimbursement	[MEMO ITEM] Subitemization of Preston Mozingo(07/07/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Preston J Mozingo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 50
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Reimbursement (See Below)	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Preston J Mozingo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 64.17
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Mileage Reimbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	114.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Preston J Mozingo</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 208.9
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Reimbursement (See Below)	<b>Transaction ID : B-E-21619</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Preston J Mozingo</b>		Date of Disbursement MM / DD / YYYY 07 / 04 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 112.77
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Mileage Reimbursement	<b>Transaction ID : B-S-1237</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Preston Mozingo(07/10/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Preston J Mozingo</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 208.09
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Reimbursement (See Below)	<b>Transaction ID : B-E-21623</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	416.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Preston J Mozingo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 175.9
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Mileage Reimbursement	Transaction ID : B-S-1241
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Preston Mozingo(07/11/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Preston J Mozingo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 354.93
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Reimbursement (See Below)	Transaction ID : B-E-21626
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Preston J Mozingo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 239.95
City Burton	State MI	
Zip Code 48509-1933	Purpose of Disbursement Mileage Reimbursement	Transaction ID : B-S-1246
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Preston Mozingo(07/15/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	354.93
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Gordon Food Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3480 US Highway 41 W		Amount of Each Disbursement this Period 23.97
City Marquette State MI Zip Code 49855-9485	Purpose of Disbursement Parade Candy	
Candidate Name	Category/Type	<b>Transaction ID : B-S-1248</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Subitemization of Preston Mozingo(07/15/14)

Full Name (Last, First, Middle Initial) <b>B. Gordon Food Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 3480 US Highway 41 W		Amount of Each Disbursement this Period 76.05
City Marquette State MI Zip Code 49855-9485	Purpose of Disbursement Parade Candy	
Candidate Name	Category/Type	<b>Transaction ID : B-S-1249</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Subitemization of Preston Mozingo(07/15/14)

Full Name (Last, First, Middle Initial) <b>c. Preston J Mozingo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 5131 Raymond Avenue		Amount of Each Disbursement this Period 1250
City Burton State MI Zip Code 48509-1933	Purpose of Disbursement Salary	
Candidate Name	Category/Type	<b>Transaction ID : B-E-21649</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Jesse R. Osmer</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1859 Park Street		Amount of Each Disbursement this Period 2000 <b>Transaction ID : B-E-21550</b>
City Alpena State MI Zip Code 49707-9366	Purpose of Disbursement Salary	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jesse R. Osmer</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 1859 Park Street		Amount of Each Disbursement this Period 190.47 <b>Transaction ID : B-E-21539</b>
City Alpena State MI Zip Code 49707-9366	Purpose of Disbursement Mileage Reimbursement	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Jesse R. Osmer</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1859 Park Street		Amount of Each Disbursement this Period 2000 <b>Transaction ID : B-E-21650</b>
City Alpena State MI Zip Code 49707-9366	Purpose of Disbursement Salary	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4190.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Justin Peters</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address S47W23661 Frontier Pass		Amount of Each Disbursement this Period 5000 <b>Transaction ID : B-E-21529</b>
City Waukesha State WI Zip Code 53189-9794	Purpose of Disbursement Fundraising Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Justin Peters</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address S47W23661 Frontier Pass		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-21535</b>
City Waukesha State WI Zip Code 53189-9794	Purpose of Disbursement Fundraising Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mike Sullivan</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 7209 Maple Drive		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-21551</b>
City Alanson State MI Zip Code 49706-9503	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mike Sullivan</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 7209 Maple Drive		Amount of Each Disbursement this Period 45.68 <b>Transaction ID : B-E-21533</b>
City Alanson State MI Zip Code 49706-9503	Purpose of Disbursement Mileage Reimbursement	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mike Sullivan</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 7209 Maple Drive		Amount of Each Disbursement this Period 72.45 <b>Transaction ID : B-E-21537</b>
City Alanson State MI Zip Code 49706-9503	Purpose of Disbursement Mileage Reimbursement	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mike Sullivan</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2014
Mailing Address 7209 Maple Drive		Amount of Each Disbursement this Period 194.62 <b>Transaction ID : B-E-21627</b>
City Alanson State MI Zip Code 49706-9503	Purpose of Disbursement Reimbursement (See Below)	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Original vendors exceeding reporting threshold itemized as memo transactions.

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	312.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Gordon Food Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address 3480 US Highway 41 W		Amount of Each Disbursement this Period 29.2
City Marquette State MI Zip Code 49855-9485	Purpose of Disbursement Parade Candy	
Candidate Name	Category/Type	<b>Transaction ID : B-S-1253</b> <b>[MEMO ITEM]</b> Subitemization of Mike Sullivan(07/15/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mike Sullivan</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address 7209 Maple Drive		Amount of Each Disbursement this Period 101.41
City Alanson State MI Zip Code 49706-9503	Purpose of Disbursement Mileage Reimbursement	
Candidate Name	Category/Type	<b>Transaction ID : B-S-1250</b> <b>[MEMO ITEM]</b> Subitemization of Mike Sullivan(07/15/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Mike Sullivan</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 7209 Maple Drive		Amount of Each Disbursement this Period 1150
City Alanson State MI Zip Code 49706-9503	Purpose of Disbursement Salary	
Candidate Name	Category/Type	<b>Transaction ID : B-E-21651</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Benishek for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Meagan Van Til</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 15787 Upper Birch Drive		Amount of Each Disbursement this Period 766.08
City Traverse City	State MI	
Zip Code 49686-8338	Purpose of Disbursement Salary	Transaction ID : B-E-21652
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	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>SUBTOTAL</b> of Disbursements This Page (optional).....	766.08
<b>TOTAL</b> This Period (last page this line number only).....	141108.83

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L1

Benishek for Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2010

Daniel J. Benishek M.D.

Primary

General

Other (specify) ▼

Primary 2010

Mailing Address  
802 Pentoga Trail

City State ZIP Code  
Crystal Falls MI 49920-8518

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
100000 31500 68500

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

06

17

2010

None

0.00

% (apr)

Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 68500.00

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

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

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

NAME OF COMMITTEE (In Full) Transaction ID : SC/10-L3  
**Benishek for Congress, Inc.**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Daniel J. Benishek M.D.</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012
Mailing Address 802 Pentoga Trail		
City Crystal Falls	State MI	ZIP Code 49920-8518

Original Amount of Loan 3000	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period 3000
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**TERMS**

Date Incurred M 12 / D 15 / Y 2010	Date Due M M / D D / Y None	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="3000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L4

Benishek for Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2012

Daniel J. Benishek M.D.

Primary

General

Other (specify) ▼

Primary 2012

Mailing Address  
802 Pentoga Trail

City State ZIP Code  
Crystal Falls MI 49920-8518

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
3000 0 3000

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

01

20

2011

None

0.00

% (apr)

Yes

No

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

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

**SUBTOTALS** This Period This Page (optional)..... 3000.00  
**TOTALS** This Period (last page in this line only)..... 74500.00

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