

2011 JUL 12 AM 11:54

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.

C00494815

Marty Knollenberg For Congress

ADDRESS (number and street)

198 E Big Beaver

Check if different than previously reported. (ACC)

Troy

MI

48083-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

3. IS THIS REPORT

NEW (N) OR

AMENDED (A)

MI

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

X

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

X

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

04 01 2011

through

06 30 2011

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

Debra Lee Joslin Kling

Signature of Treasurer

Debra Lee Joslin Kling

Date

07 06 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3
(Revised 02/2003)

11030622972

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Marty Knollenberg for Congress

Report Covering the Period: From:

04 01 2011

To:

06 30 2011

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	7,573.91	7,573.91
(b) Total Contribution Refunds (from Line 20(d))	7,500.00	7,500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	739.1	739.1
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	739.1	739.1
(b) Total Offsets to Operating Expenditures (from Line 14)	0.	0.
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	739.1	739.1
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.	

For further information contact:

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

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

11030622973

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name

Marty Knollenberg for Congress

Report Covering the Period: From: ^M0^M4' ^D0^D1' ^Y20^Y1^Y1 To: ^M0^M6' ^D3^D0' ^Y20^Y1^Y1

I. RECEIPTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)..... , 7,500.00 , 7,500.00

(ii) Unitemized..... , , 0. , , 0.

(iii) TOTAL of contributions from individuals..... ▶ , 7,500.00 , 7,500.00

(b) Political Party Committees..... , , 0. , , 0.

(c) Other Political Committees (such as PACs)..... , , 0. , , 0.

(d) The Candidate..... , , 739.1 , , 739.1

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. , 7,573.91 , 7,573.91

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

, , 0. , , 0.

13. LOANS:

(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.

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

, , 0. , , 0.

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

, , 0. , , 0.

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

, 7,573.91 , 7,573.91

11030622974

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	7391	7391
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.	0.
(b) Of All Other Loans	0.	0.
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.	0.
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	7,500.00	7,50000
(b) Political Party Committees.....	0.	0.
(c) Other Political Committees (such as PACs).....	0.	0.
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	7,50000	7,50000
21. OTHER DISBURSEMENTS	0.	0.
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	7,57391	7,57391

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7,57391
25. SUBTOTAL (add Line 23 and Line 24).....	7,57391
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7,57391
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.

11030622975

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		OF				
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Marty Knollenberg for Congress

A. **Jung, JM**
Mailing Address
P.O. Box 7060
City **Novi** State **MI** Zip Code **48376-7060**

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

Name of Employer **Michigan Caterpillar** Occupation **President**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1,500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2011

Amount of Each Receipt this Period
1,500.00

B. **Grand, Stephen**
Mailing Address
2000 Washington Street # 7
City **San Francisco** State **CA** Zip Code **94109**

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

Name of Employer **Grand Sakwa Properties** Occupation **President**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2,500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2011

Amount of Each Receipt this Period
2,500.00

C. **Frankel, Stanley**
Mailing Address
2301 W. Big Beaver Rd # 900
City **Troy** State **MI** Zip Code **48084**

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

Name of Employer **Frankel + Assoc.** Occupation **President**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2,500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2011

Amount of Each Receipt this Period
2,500.00

SUBTOTAL of Receipts This Page (optional) **6,500.00**

TOTAL This Period (last page this line number only)

11030622976

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

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NAME OF COMMITTEE (In Full)
Marty Knollenberg For Congress

Full Name (Last, First, Middle Initial) Provost David		Date of Receipt M M / D D / Y Y Y Y 05 02 2011
Mailing Address 952 Brookwood Street		Amount of Each Receipt this Period , 1,000.00
City Birmingham	State Zip Code MI 48009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , 1,000.00
Name of Employer 1st Michigan Bank	Occupation President	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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

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

SUBTOTAL of Receipts This Page (optional).....	, 1,000.00
TOTAL This Period (last page this line number only).....	, 7,500.00

11030622977

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

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NAME OF COMMITTEE (In Full)
Marty Knollenberg For Congress

Full Name (Last, First, Middle Initial) A. Knollenberg Marty		Date of Receipt M M ' D D ' Y Y Y Y 06 29 ' 2011
Mailing Address 198 E. Big Beaver Road		Amount of Each Receipt this Period , , 73.91
City Troy	State MI	
FEC ID number of contributing federal political committee. C		, , .
Name of Employer	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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

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

SUBTOTAL of Receipts This Page (optional).....	, , 73.91
TOTAL This Period (last page this line number only).....	, , 73.91

11030622978

**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 OF

<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)

Marty Knollenberg for Congress

Full Name (Last, First, Middle Initial)

A. Staples		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2011
Mailing Address 1072 S. Latson		Amount of Each Disbursement this Period 19.07
City Howell	State MI	
Zip Code 48843		
Purpose of Disbursement cards + envelopes		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

B. Carousel Checks.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2011
Mailing Address 8906 S. Harlem Avenue		Amount of Each Disbursement this Period 54.84
City Bridgeview	State IL	
Zip Code 60455		
Purpose of Disbursement checks		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		
Purpose of Disbursement		
Candidate Name		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:	

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

7391

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

7391

11030622979

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

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NAME OF COMMITTEE (in Full)
Marty Knollenberg for Congress

A. Jung JM

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. Box**

City: **Novi** State: **MI** Zip Code: **48376-7060**

Purpose of Disbursement: **Refund**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement: **06 ' 29 ' 2011**

Amount of Each Disbursement this Period: **, 1,500.00**

B. Grand, Stephen

Full Name (Last, First, Middle Initial)

Mailing Address: **2000 Washington Street #7**

City: **San Francisco** State: **CA** Zip Code: **94109**

Purpose of Disbursement: **Refund**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement: **06 ' 29 ' 2011**

Amount of Each Disbursement this Period: **, 2,500.00**

C. Frankel, Stanley

Full Name (Last, First, Middle Initial)

Mailing Address: **2301 W. Big Beaver Rd #900**

City: **Troy** State: **MI** Zip Code: **48084**

Purpose of Disbursement: **Refund**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement: **06 ' 29 ' 2011**

Amount of Each Disbursement this Period: **, 2,500.00**

SUBTOTAL of Disbursements This Page (optional) **, 6,500.00**

TOTAL This Period (last page this line number only)

11030622980

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

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

FOR LINE NUMBER:
(check only one)

PAGE OF

<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)

Marty Knollenberg for Congress

Full Name (Last, First, Middle Initial)

A. Provost, David

Mailing Address
952 Brookwood street

City State Zip Code
Birmingham MI 48009

Purpose of Disbursement
refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

06 / 29 / 2011

Amount of Each Disbursement this Period

, 1,000.00

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

, , ,

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y /

Amount of Each Disbursement this Period

, , ,

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

, 1,000.00

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

, 7,500.00

11030622981

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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
7/7/11

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

 7/12/11
 PREPARER DATE PREPARED
 (3/2005)

11030622982