

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

THE RIGHT FOCUS

Report Covering the Period: From: ^M0^M1' ^D0^D1' ^Y20^Y1^Y4 To: ^M0^M2' ^D2^D8' ^Y20^Y1^Y4

14031194980

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, ^Y 20 ^Y 1 ^Y 4	, ,	.00
(b) Cash on Hand at Beginning of Reporting Period.....	, , .00	
(c) Total Receipts (from Line 19).....	, , 185.00	, , 185.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	, , 185.00	, , 185.00
7. Total Disbursements (from Line 31).....	, , 38.41	, , 38.41
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	, , 146.59	, , 146.59
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	, , .00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	, , .00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

THE RIGHT FOCUS

Report Covering the Period: From: *01 ' 01 ' 2014* To: *02 ' 28 ' 2014*

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	, 155.00	, 155.00
(ii) Unitemized	, .00	, .00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	, 155.00	, 155.00
(b) Political Party Committees	, .00	, .00
(c) Other Political Committees (such as PACs).....	, .00	, .00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	, 155.00	, 155.00
12. Transfers From Affiliated/Other Party Committees.....	, .00	, .00
13. All Loans Received.....	, 30.00	, 30.00
14. Loan Repayments Received.....	, .00	, .00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	, .00	, .00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	, .00	, .00
17. Other Federal Receipts (Dividends, Interest, etc.).....	, .00	, .00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	, .00	, .00
(b) Levin Funds (from Schedule H5).....	, .00	, .00
(c) Total Transfers (add 18(a) and 18(b))..	, .00	, .00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	, 185.00	, 185.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	, 185.00	, 185.00

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures .....	.00	.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	.00	.00
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	.00	.00
24. Independent Expenditures (use Schedule E) .....	.00	.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	30.00	30.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	.00	.00
29. Other Disbursements	8.41	8.41
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share.....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	38.41	38.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38.41	38.41

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	, 155.00	, 155.00
34. Total Contribution Refunds (from Line 28(d))	, .00	, .00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 155.00	, 155.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	, .00	, .00
37. Offsets to Operating Expenditures (from Line 15, page 3)	, .00	, .00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	, .00	, .00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

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

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)

THE RIGHT FOCUS

A. Full Name (Last, First, Middle Initial) HUNTER, ROBERT, L.		Date of Receipt M M ' D D ' Y Y Y Y 01 ' 02 ' 2014
Mailing Address 12355 SULLIVAN ROAD		Amount of Each Receipt this Period , , 25.00
City EMMETT TWP.	State Zip Code MI 48022	
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , , 25.00	

B. Full Name (Last, First, Middle Initial) HUNTER, ROBERT, L.		Date of Receipt M M ' D D ' Y Y Y Y 01 ' 08 ' 2014
Mailing Address 12355 SULLIVAN ROAD		Amount of Each Receipt this Period , , 10.00
City EMMETT TWP.	State Zip Code MI 48022	
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , , 35.00	

C. Full Name (Last, First, Middle Initial) HERNANDEZ, SHANE		Date of Receipt M M ' D D ' Y Y Y Y 01 ' 08 ' 2014
Mailing Address 1423 18TH STREET		Amount of Each Receipt this Period , , 35.00
City PORT HURON	State Zip Code MI 48060	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation ARCHITECT	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , , 70.00	

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

, , 70.00

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

, ,

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

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

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

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NAME OF COMMITTEE (In Full)

THE RIGHT FOCUS

A. Full Name (Last, First, Middle Initial) **HUNTER, ROBERT, L.**
 Mailing Address **12355 SULLIVAN ROAD**
 City **EMMETT TWP.** State **MI.** Zip Code **48022**
 Date of Receipt **01/08/2014**
 Amount of Each Receipt this Period
 , , .
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **RETIRED** Occupation **N/A**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **, , .**

B. Full Name (Last, First, Middle Initial) **MICKOLATCZAK, MICHAEL**
 Mailing Address **136 SQUAB DRIVE**
 City **CAPAC** State **MI.** Zip Code **48014**
 Date of Receipt **01/13/2014**
 Amount of Each Receipt this Period
 , , **35.00**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **RETIRED** Occupation **N/A**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **, , 105.00**

C. Full Name (Last, First, Middle Initial) **HERMES, HELEN**
 Mailing Address **5645 SYCAMORE LANE**
 City **NORTH STREET,** State **MI** Zip Code **48049**
 Date of Receipt **01/14/2014**
 Amount of Each Receipt this Period
 , , **50.00**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **RETIRED** Occupation **N/A**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **, , 155.00**

SUBTOTAL of Receipts This Page (optional)..... **, , 85.00**
TOTAL This Period (last page this line number only)..... **, , 155.00**

14031194985

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

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

FOR LINE NUMBER:
(check only one)

PAGE / OF /

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

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)

THE RIGHT FOCUS

Full Name (Last, First, Middle Initial)

A. HERMES, HELEN

Mailing Address: 5645 SYCAMORE LANE

City: NORTH STREET State: MI. Zip Code: 48049

Purpose of Disbursement: MAILING EXPENSE-FORMS

Candidate Name: N/A

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) MAILING EXPENSE

State: _____ District: _____

Date of Disbursement

M M ' D D ' Y Y Y Y
01 ' 30 ' 2014

Amount of Each Disbursement this Period

, , 6.11

Full Name (Last, First, Middle Initial)

B. HUNTER, ROBERT L

Mailing Address: 12355 SULLIVAN ROAD

City: EMMETT TWP. State: MI. Zip Code: 48022

Purpose of Disbursement: MAILING EXPENSE-FORMS

Candidate Name: N/A

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) MAILING EXPENSE

State: _____ District: _____

Date of Disbursement

M M ' D D ' Y Y Y Y
01 ' 30 ' 2014

Amount of Each Disbursement this Period

, , 2.30

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City _____ State _____ Zip Code _____

Purpose of Disbursement

Candidate Name

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)..... ▶

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

, , 8.41

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SCHEDULE C (FEC Form 3X)

LOANS

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

PAGE / OF /
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
THE RIGHT FOCUS

LOAN SOURCE Full Name (Last, First, Middle Initial)
HUNTER, ROBERT, L.

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
12355 SULLIVAN ROAD

City **EMMETT TWP** State **MI**, ZIP Code **48022**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
, , 30.00	, , 30.00	, , 00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
^M 01 ^M ' ^D 08 ^D ' ^Y 2014 ^Y	^M 01 ^M ' ^D 30 ^D ' ^Y 2014 ^Y	.00% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional) ▶ , , .

TOTALS This Period (last page in this line only) ▶ , , .00

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

14031194987

14031194988

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599 E. Street, N.W.
Washington, D. C.*

20463

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Federal Election Commission
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14031194989

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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

CR **3/18/14**
 PREPARER DATE PREPARED
 (8/2013)