

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE

10 OCT 15 PM 12:25

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

Friends of Senator Carl Levin

ADDRESS (number and street)

10 G Street, N.E., Suite 570

Check if different than previously reported. (ACC)

Washington

DC

20002

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00088484

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

M

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

X

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

07

01

2010

through

09

30

2010

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

Tina Stoll

Signature of Treasurer

Electronically Filed by Tina Stoll

Tina Stoll

Date

10

15

2010

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)

FE5AN018

10020704116

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Friends of Senator Carl Levin

Report Covering the Period:

From:

MM  
07

DD  
01

YYYYYY  
2010

To:

MM  
09

DD  
30

YYYYYY  
2010

	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)).....	0.00	6601.10
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	13225.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	-6623.90
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	14288.24	430692.94
(b) Total Offsets to Operating Expenditures (from Line 14).....	125.93	179816.38
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	14162.31	250876.56
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>		
	914769.20	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

10020704117

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Friends of Senator Carl Levin

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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).....	0.00	885.00
(ii) Unitemized.....	0.00	1956.10
(iii) TOTAL of contributions from individuals..... ▶	0.00	2841.10
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	3760.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	6601.10
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	125.93	179816.38
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	3866.96	51689.86
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	3992.89	238107.34

10020704118

DETAILED SUMMARY PAGE  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14288.24	430692.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	5225.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	8000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	13225.00
21. OTHER DISBURSEMENTS.....	322000.00	725750.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	336288.24	1169667.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1247064.55
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	3992.89
25. SUBTOTAL (add Line 23 and Line 24).....	1251057.44
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	336288.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	914769.20

10020704119

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

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

FOR LINE NUMBER: PAGE 5 / 23  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

A.

Full Name (Last, First, Middle Initial) Bank of America		Date of Receipt MM / DD / YYYY 07 / 10 / 2010	
Mailing Address PO Box 15710		Transaction ID: C4919863	
City Wilmington	State DE	Zip Code 19886-5710	Amount of Each Receipt this Period 125.93
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1954.20		Refund

SUBTOTAL of Receipts This Page (optional) .....	▶	125.93
TOTAL This Period (last page this line number only) .....	▶	125.93

10020704120

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

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

FOR LINE NUMBER: PAGE 6 / 23

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

<p><b>A.</b> Full Name (Last, First, Middle Initial) A.B. Data LTD</p>	<p>Date of Receipt</p>
<p>Mailing Address 8050 N Port Washington Rd</p>	<p><input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 21 / 2010</p>
<p>City State Zip Code Milwaukee WI 53217-2645</p>	<p>Transaction ID: C4919854</p>
<p>FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/></p>	<p>Amount of Each Receipt this Period <input type="text"/> 1646.44</p>
<p>Name of Employer Occupation</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Election Cycle-to-Date ▼ <input type="text"/> 12073.41</p>
	<p>Royalties Received from List Rental</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Merrill Lynch</p>	<p>Date of Receipt</p>
<p>Mailing Address 39577 Woodward Ave</p>	<p><input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 30 / 2010</p>
<p>City State Zip Code Bloomfield Hills MI 48304</p>	<p>Transaction ID: C4819009</p>
<p>FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/></p>	<p>Amount of Each Receipt this Period <input type="text"/> 28.02</p>
<p>Name of Employer Occupation</p>	
<p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Election Cycle-to-Date ▼ <input type="text"/> 50043.42</p>
	<p>* Interest</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Merrill Lynch</p>	<p>Date of Receipt</p>
<p>Mailing Address 39577 Woodward Ave</p>	<p><input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 31 / 2010</p>
<p>City State Zip Code Bloomfield Hills MI 48304</p>	<p>Transaction ID: C4819010</p>
<p>FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/></p>	<p>Amount of Each Receipt this Period <input type="text"/> 29.79</p>
<p>Name of Employer Occupation</p>	
<p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Election Cycle-to-Date ▼ <input type="text"/> 50043.42</p>
	<p>* Interest</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p><input type="text"/> 1704.25</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

10020704121

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

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

FOR LINE NUMBER: PAGE 7 / 23

(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

A.

Full Name (Last, First, Middle Initial) Merrill Lynch		Date of Receipt	
Mailing Address 39577 Woodward Ave		M M / D D / Y Y Y Y 09 / 30 / 2010	
City	State	Zip Code	Transaction ID: C4819015
Bloomfield Hills	MI	48304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	2162.71
Name of Employer	Occupation		* Interest
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼		
50043.42			

SUBTOTAL of Receipts This Page (optional) .....	2162.71
TOTAL This Period (last page this line number only) .....	3866.96

10020704122

**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 8 / 23

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

<p><b>A.</b> Full Name (Last, First, Middle Initial) Anne Lewis Strategies, LLC</p> <p>Mailing Address 2801 M Street, N.W.</p> <p>City Washington State DC Zip Code 20151</p> <p>Purpose of Disbursement Website Consulting Fee</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: D323000</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Anne Lewis Strategies, LLC</p> <p>Mailing Address 2801 M Street, N.W.</p> <p>City Washington State DC Zip Code 20151</p> <p>Purpose of Disbursement Website Consulting Fee</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: D328999</p> <p>Date of Disbursement 08 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Anne Lewis Strategies, LLC</p> <p>Mailing Address 2801 M Street, N.W.</p> <p>City Washington State DC Zip Code 20151</p> <p>Purpose of Disbursement Website Consulting Fee</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: D329004</p> <p>Date of Disbursement 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) .....	3000.00
TOTAL This Period (last page this line number only) .....	

10020704123



# 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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
 Friends of Senator Carl Levin

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)                  Campaign Finance Consultants</p> <p>Mailing Address    10 G St NE                                                Ste 570</p> <p>City    State                      Zip Code                  Washington    DC    20002-8038</p> <p>Purpose of Disbursement                  Fundraising Expenses &amp; Retainer</p> <p>Candidate Name</p> <p>Office Sought:    <input type="checkbox"/> House                      Disbursement For:    2014                                                <input type="checkbox"/> Senate                                      <input checked="" type="checkbox"/> Primary                      <input type="checkbox"/> General                                                <input type="checkbox"/> President                                      <input type="checkbox"/> Other (specify) ▼</p> <p>State:                      District:</p>	<p><b>Transaction ID:</b> D329013  <b>Date of Disbursement</b>                  M M / D D / Y Y Y Y                  07 / 21 / 2010</p> <p><b>Amount of Each Disbursement this Period</b>                  525.00</p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)                  Campaign Finance Consultants</p> <p>Mailing Address    10 G St NE                                                Ste 570</p> <p>City    State                      Zip Code                  Washington    DC    20002-8038</p> <p>Purpose of Disbursement                  Fundraising Expenses and Retainer</p> <p>Candidate Name</p> <p>Office Sought:    <input type="checkbox"/> House                      Disbursement For:    2014                                                <input type="checkbox"/> Senate                                      <input checked="" type="checkbox"/> Primary                      <input type="checkbox"/> General                                                <input type="checkbox"/> President                                      <input type="checkbox"/> Other (specify) ▼</p> <p>State:                      District:</p>	<p><b>Transaction ID:</b> D328998  <b>Date of Disbursement</b>                  M M / D D / Y Y Y Y                  08 / 17 / 2010</p> <p><b>Amount of Each Disbursement this Period</b>                  530.70</p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)                  Campaign Finance Consultants</p> <p>Mailing Address    10 G St NE                                                Ste 570</p> <p>City    State                      Zip Code                  Washington    DC    20002-8038</p> <p>Purpose of Disbursement                  Fundraising Expenses &amp; Retainer</p> <p>Candidate Name</p> <p>Office Sought:    <input type="checkbox"/> House                      Disbursement For:    2014                                                <input type="checkbox"/> Senate                                      <input checked="" type="checkbox"/> Primary                      <input type="checkbox"/> General                                                <input type="checkbox"/> President                                      <input type="checkbox"/> Other (specify) ▼</p> <p>State:                      District:</p>	<p><b>Transaction ID:</b> D322999  <b>Date of Disbursement</b>                  M M / D D / Y Y Y Y                  09 / 13 / 2010</p> <p><b>Amount of Each Disbursement this Period</b>                  3130.54</p>	
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ►</p>		<p><b>4186.24</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>		<p> </p>

10020704124

**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)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

**A.** Full Name (Last, First, Middle Initial)  
Leonard Brothers Data Management, Inc.

Mailing Address PO Box 867

City Royal Oak State MI Zip Code 48068-0867

Purpose of Disbursement Monthly Storage Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D323014  
Date of Disbursement 09 / 13 / 2010

Amount of Each Disbursement this Period 40.00

Category/Type

**B.** Full Name (Last, First, Middle Initial)  
Leonard Brothers Data Management, Inc.

Mailing Address PO Box 867

City Royal Oak State MI Zip Code 48068-0867

Purpose of Disbursement Monthly Storage Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D323015  
Date of Disbursement 08 / 13 / 2010

Amount of Each Disbursement this Period 40.00

Category/Type

**C.** Full Name (Last, First, Middle Initial)  
Leonard Brothers Data Management, Inc.

Mailing Address PO Box 867

City Royal Oak State MI Zip Code 48068-0867

Purpose of Disbursement Monthly Storage Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D329002  
Date of Disbursement 08 / 17 / 2010

Amount of Each Disbursement this Period 40.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 120.00

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

10020704125

**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 11 / 23

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

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Leonard Brothers Data Management, Inc.</p> <p>Mailing Address PO Box 867</p> <p>City Royal Oak State MI Zip Code 48068-0867</p> <p>Purpose of Disbursement Monthly Storage Fee</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: D329011</p> <p>Date of Disbursement MM / DD / YYYY 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 1225 Eye Street, N.W. Suite 1225</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Quarterly Fee for Online Database</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: D329000</p> <p>Date of Disbursement MM / DD / YYYY 08 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 2250.00</p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 29065 Cabot Drive</p> <p>City Novi State MI Zip Code 48377</p> <p>Purpose of Disbursement Payroll Service Fee</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: D328993</p> <p>Date of Disbursement MM / DD / YYYY 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 75.14</p>	
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>		<p>2365.14</p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		<p></p>

10020704126

**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 12 / 23

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

**A.**

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 29065 Cabot Drive

City Novi State MI Zip Code 48377

Purpose of Disbursement  
Payroll Service Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Transaction ID: D328994  
Date of Disbursement  
07 / 12 / 2010

Amount of Each Disbursement this Period  
75.14

Category/Type

**B.**

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 29065 Cabot Drive

City Novi State MI Zip Code 48377

Purpose of Disbursement  
Payroll Service Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Transaction ID: D328995  
Date of Disbursement  
08 / 12 / 2010

Amount of Each Disbursement this Period  
75.14

Category/Type

**C.**

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 29065 Cabot Drive

City Novi State MI Zip Code 48377

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Transaction ID: D329021  
Date of Disbursement  
08 / 13 / 2010

Amount of Each Disbursement this Period  
223.50

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **373.78**

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

10020704127

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

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

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

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

Mailing Address 29065 Cabot Drive

City Novi State MI Zip Code 48377

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Transaction ID: D329018  
Date of Disbursement  
09 / 15 / 2010

Amount of Each Disbursement this Period  
223.50

Category/Type

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

Mailing Address 29065 Cabot Drive

City Novi State MI Zip Code 48377

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Transaction ID: D329027  
Date of Disbursement  
07 / 15 / 2010

Amount of Each Disbursement this Period  
231.50

Category/Type

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

Mailing Address Attn: Client Accounting  
1201 Third Avenue, 3rd Floor

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Transaction ID: D329007  
Date of Disbursement  
07 / 21 / 2010

Amount of Each Disbursement this Period  
157.50

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 612.50

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

10020704128

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

A.

Full Name (Last, First, Middle Initial) Perkins Coie		Transaction ID: D323016	
Mailing Address Attn: Client Accounting 1201 Third Avenue, 3rd Floor		Date of Disbursement 09 / 13 / 2010	
City Seattle	State WA	Zip Code 98101	Amount of Each Disbursement this Period 173.00
Purpose of Disbursement Legal Services		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.

Full Name (Last, First, Middle Initial) Paychex		Transaction ID: D329019	
Mailing Address 29065 Cabot Drive		Date of Disbursement 09 / 15 / 2010	
City Novi	State MI	Zip Code 48377	Amount of Each Disbursement this Period 880.00
Purpose of Disbursement Payroll		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:			

C.

Full Name (Last, First, Middle Initial) Mrs. Amy Gray		Transaction ID: D329020	
Mailing Address 49392 Limestone Drive		Date of Disbursement 09 / 15 / 2010	
City Macomb	State MI	Zip Code 48044	Amount of Each Disbursement this Period 880.00
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:			

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....	1053.00
TOTAL This Period (last page this line number only) .....	

10020704129

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

**A.**

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 29065 Cabot Drive

City Novi State MI Zip Code 48377

Purpose of Disbursement Payroll  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D329022  
Date of Disbursement 08 / 13 / 2010

Amount of Each Disbursement this Period 880.00

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Amy Gray

Mailing Address 49392 Limestone Drive

City Macomb State MI Zip Code 48044

Purpose of Disbursement Salary  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D329023  
Date of Disbursement 08 / 13 / 2010

Amount of Each Disbursement this Period 880.00

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 29065 Cabot Drive

City Novi State MI Zip Code 48377

Purpose of Disbursement Payroll  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D329028  
Date of Disbursement 07 / 15 / 2010

Amount of Each Disbursement this Period 880.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 1760.00

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

10020704130

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Amy Gray

Mailing Address 49392 Limestone Drive

City Macomb State MI Zip Code 48044

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D329029  
Date of Disbursement 07 / 15 / 2010

Amount of Each Disbursement this Period 880.00

Category/Type

[MEMO ITEM]

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

Mailing Address PO Box 15710

City Wilmington State DE Zip Code 19886-5710

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D329036  
Date of Disbursement 08 / 17 / 2010

Amount of Each Disbursement this Period 88.81

Category/Type

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

Mailing Address PO Box 15710

City Wilmington State DE Zip Code 19886-5710

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D329038  
Date of Disbursement 09 / 13 / 2010

Amount of Each Disbursement this Period 628.77

Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶ 717.58

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

10020704131



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

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

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

**A.**

Full Name (Last, First, Middle Initial) Southwest Airlines		Transaction ID: D329039
Mailing Address PO Box 36647-1CR		Date of Disbursement MM / DD / YYYY 09 / 13 / 2010
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 192.40
Candidate Name		[MEMO ITEM]
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.**

Full Name (Last, First, Middle Initial) Southwest Airlines		Transaction ID: D329040
Mailing Address PO Box 36647-1CR		Date of Disbursement MM / DD / YYYY 09 / 13 / 2010
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 144.70
Candidate Name		[MEMO ITEM]
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:		

SUBTOTAL of Disbursements This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	14188.24

10020704132

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

**A.** Full Name (Last, First, Middle Initial)  
Alexi for Illinois

Mailing Address PO Box 494

City Chicago State IL Zip Code 60690

Purpose of Disbursement  
General Election

Candidate Name  
Mr. Alexander Giannoulis

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: IL District:

Transaction ID: D328911  
Date of Disbursement  
09 / 13 / 2010

Amount of Each Disbursement this Period  
2000.00

Category/Type

**B.** Full Name (Last, First, Middle Initial)  
John D. Dingell for Congress Committee

Mailing Address 607 14th Street NW Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
General Election

Candidate Name  
Mr. John Dingell

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: MI District: 15

Transaction ID: D328904  
Date of Disbursement  
09 / 02 / 2010

Amount of Each Disbursement this Period  
2000.00

Category/Type

**C.** Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Avenue

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Unlimited Transfer to National Party Committee

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D328990  
Date of Disbursement  
07 / 28 / 2010

Amount of Each Disbursement this Period  
100000.00

Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 104000.00

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

10020704133

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee</p> <p>Mailing Address 120 Maryland Avenue</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Unlimited Transfer to National Party Committee</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: D328882</p> <p>Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 100000.00</p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Ellsworth for Indiana</p> <p>Mailing Address PO Box 62</p> <p>City Evansville State IN Zip Code 47701</p> <p>Purpose of Disbursement General Election</p> <p>Candidate Name Mr. Brad Ellsworth</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IN District:</p>	<p>Transaction ID: D328896</p> <p>Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) McDowell for Congress</p> <p>Mailing Address PO Box 913</p> <p>City Sault Sainte Marie State MI Zip Code 49783</p> <p>Purpose of Disbursement Primary Election</p> <p>Candidate Name Mr. Gary McDowell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District: 01</p>	<p>Transaction ID: D329008</p> <p>Date of Disbursement 07 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>	
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>		<p>104000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		

10020704134

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

**A.** Full Name (Last, First, Middle Initial)  
McDowell for Congress

Mailing Address PO Box 913

City Sault Sainte Marie State MI Zip Code 49783

Purpose of Disbursement General Election  Category/Type

Candidate Name Mr. Gary McDowell

Office Sought:  House  Senate  President Disbursement For: 2010  Primary  General  Other (specify) ▼

State: MI District: 01

Transaction ID: D329009  
Date of Disbursement 07 / 22 / 2010

Amount of Each Disbursement this Period 2000.00

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

Mailing Address 606 Townsend St

City Lansing State MI Zip Code 48933

Purpose of Disbursement Unlimited Transfer to State Party Committee  Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D328887  
Date of Disbursement 09 / 24 / 2010

Amount of Each Disbursement this Period 25000.00

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

Mailing Address 606 Townsend St

City Lansing State MI Zip Code 48933

Purpose of Disbursement Unlimited Transfer to State Party Committee  Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D328888  
Date of Disbursement 09 / 24 / 2010

Amount of Each Disbursement this Period 20000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 47000.00

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

10020704135

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

**A.** Full Name (Last, First, Middle Initial)  
Michigan Democratic Party

Mailing Address 606 Townsend St

City Lansing State MI Zip Code 48933

Purpose of Disbursement  
Unlimited Transfer to State Party Committee

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D328889  
Date of Disbursement  
09 / 24 / 2010

Amount of Each Disbursement this Period  
15000.00

Category/Type

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

Mailing Address 606 Townsend St

City Lansing State MI Zip Code 48933

Purpose of Disbursement  
Unlimited Transfer to State Party Committee

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D328890  
Date of Disbursement  
09 / 24 / 2010

Amount of Each Disbursement this Period  
15000.00

Category/Type

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

Mailing Address 606 Townsend St

City Lansing State MI Zip Code 48933

Purpose of Disbursement  
Unlimited Transfer to State Party Committee

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D328891  
Date of Disbursement  
09 / 24 / 2010

Amount of Each Disbursement this Period  
15000.00

Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 45000.00

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

10020704136

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

**A.** Full Name (Last, First, Middle Initial)  
Murray Victory 2010

Mailing Address 1050 17th Street, N.W.  
Suite 590

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Transfer of Excess Campaign Funds

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D328898  
Date of Disbursement  
09 / 16 / 2010

Amount of Each Disbursement this Period  
10000.00

Category/Type

**B.** Full Name (Last, First, Middle Initial)  
Official 12th District Democratic Party

Mailing Address Mr. Russel Laforte  
PO Box 37

City Roseville State MI Zip Code 48066

Purpose of Disbursement  
Unlimited Transfer to State Party Committee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D328910  
Date of Disbursement  
09 / 13 / 2010

Amount of Each Disbursement this Period  
5000.00

Category/Type

**C.** Full Name (Last, First, Middle Initial)  
Scott McAdams for U.S. Senate

Mailing Address PO Box 200569

City Anchorage State AK Zip Code 99520

Purpose of Disbursement  
General Election

Candidate Name  
Mr. Scott McAdams

Office Sought:  House  Senate  President  
State: AK District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D328914  
Date of Disbursement  
09 / 13 / 2010

Amount of Each Disbursement this Period  
2000.00

Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 17000.00

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

10020704137

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

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

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NAME OF COMMITTEE (In Full)  
Friends of Senator Carl Levin

A.

Full Name (Last, First, Middle Initial)  
Vermont Democratic Party

Transaction ID: D328989  
Date of Disbursement

Mailing Address PO Box 1220

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

City Montpelier State VT Zip Code 05601

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Unlimited Transfer to State Party Committee

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

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

5000.00
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TOTAL This Period (last page this line number only) .....

322000.00
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10020704138

# United States Senate

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OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 10-15-10  
Date of Receipt

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Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE  NO POSTMARK

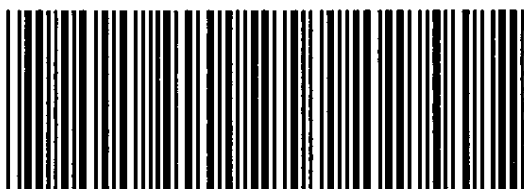
FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 10-15-10

10020704139





10020704140