

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 BETTER FUTURE MI FUND

ADDRESS (number and street) C/O BULLDOG COMPLIANCE 138 CONANT STREET 2ND FLOOR BEVERLY MA 01915 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00725317 CITY STATE ZIP CODE 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07/01/2020 through 09/30/2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. GANTT, CHARLES, , , Type or Print Name of Treasurer

Signature of Treasurer GANTT, CHARLES, , , [Electronically Filed] Date 10/15/2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**BETTER FUTURE MI FUND**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		797888.33
(b) Cash on Hand at Beginning of Reporting Period.....	538656.70	
(c) Total Receipts (from Line 19) .....	5710150.00	7079551.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6248806.70	7877439.33
7. Total Disbursements (from Line 31).....	4516621.50	6145254.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1732185.20	1732185.20
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**BETTER FUTURE MI FUND**

Report Covering the Period: From:  /  /  To:  /  /

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).....	5510150.00	6879550.00
(ii) Unitemized .....	0.00	1.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5510150.00	6879551.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	200000.00	200000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5710150.00	7079551.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	5710150.00	7079551.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5710150.00	7079551.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	331051.50	424595.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	331051.50	424595.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	4185570.00	5720659.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4516621.50	6145254.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4516621.50	6145254.13

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5710150.00	7079551.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5710150.00	7079551.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	331051.50	424595.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	331051.50	424595.13

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
**BETTER FUTURE MI FUND**

**A. BECKWITH, G. NICHOLAS, , , IV**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1311 RIVERFRONT DRIVE  
 City PITTSBURGH State PA Zip Code 15238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 09 / 25 / 2020  
**Transaction ID : SA11AI-2147483548**  
 Amount of Each Receipt this Period 35000.00  
 Memo Item

**B. BEEBE, SALLY, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 237 KINGMAN  
 City MASON State MI Zip Code 48854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INGHAM COUNTY ANIMAL SHELTER Occupation (for Individual) VOLUNTEER BOARD MEMBER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 29 / 2020  
**Transaction ID : SA11AI-2147483541**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

**C. BLISS, TIMOTH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 50440  
 City SANTA BARBARA State CA Zip Code 93150  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INVESTOR/RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 10 / 2020  
**Transaction ID : SA11AI-2147483567**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. BOURELL, TODD, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 439 GAY ST  
 City WESTWOOD State MA Zip Code 02090  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WLJ CAPITAL Occupation (for Individual) INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 01 / 2020  
**Transaction ID : SA11AI-2147483574**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**B. BOYCE, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 437 WHISKEY HILL RD  
 City WOODSIDE State CA Zip Code 94062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 01 / 2020  
**Transaction ID : SA11AI-2147483576**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**C. CAMERON, RONALD, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 21440  
 City LITTLE ROCK State AR Zip Code 72211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOUNTAIRE CORP Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : SA11AI-2147483594**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. CASALE, CARL, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1446 DELAWARE AVE  
 City SAINT PAUL State MN Zip Code 55118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OSPRAIE MANAGEMENT Occupation (for Individual) INVESTMENT PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2020  
**Transaction ID : SA11AI-2147483563**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. COLEMAN, NEIL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 11377  
 City CHICAGO State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 09 / 2020  
**Transaction ID : SA11AI-2147483570**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**C. COMMERCIAL ALLIANCE OF REALTORS**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 678 FRONT AVE NW STE 257  
 City GRAND RAPIDS State MI Zip Code 49504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 28 / 2020  
**Transaction ID : SA11AI-2147483544**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	16000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. DESOUZA, CAL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5736 E CACTUS WREN RD  
 City PARADISE VALLEY State AZ Zip Code 85253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 33300.00

Date of Receipt 07 / 16 / 2020  
**Transaction ID : SA11AI-2147483606**  
 Amount of Each Receipt this Period 11100.00  
 Memo Item

**B. DESOUZA, TRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5736 E CACTUS WREN RD  
 City PARADISE VALLEY State AZ Zip Code 85253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 33300.00

Date of Receipt 07 / 16 / 2020  
**Transaction ID : SA11AI-2147483605**  
 Amount of Each Receipt this Period 11100.00  
 Memo Item

**C. DEVOS, DANIEL, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 126 OTTAWA AVE NW STE 500  
 City GRAND RAPIDS State MI Zip Code 49503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RDV CORPORATION Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 15 / 2020  
**Transaction ID : SA11AI-2147483558**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	72200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. ELLIOTT, CHARLES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2773 GROESBECK

City ROSEVILLE	State MI	Zip Code 48066
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LAKE COURT MEDICAL	Occupation (for Individual) EXECUTIVE
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2020

**Transaction ID : SA11AI-2147483592**

Amount of Each Receipt this Period  
7750.00

Memo Item

**B. GETMAN, DANA, S, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59750 34TH AVE

City BANGOR	State MI	Zip Code 49013
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GETMAN CORPORATION	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2020

**Transaction ID : SA11AI-2147483598**

Amount of Each Receipt this Period  
25000.00

Memo Item

**C. GRANIERI, ROBERT, A, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 UNION SQ S  
APT 23A

City NEW YORK	State NY	Zip Code 10003
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JANE STREET	Occupation (for Individual) MANAGER
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2020

**Transaction ID : SA11AI-2147483602**

Amount of Each Receipt this Period  
15000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. GRIFFIN, KENNETH, C, ,</b>		Date of Receipt MM / DD / YYYY 07 / 16 / 2020 <b>Transaction ID : SA11AI-2147483604</b>
Mailing Address 131 SOUTH DEARBORN ST		Amount of Each Receipt this Period 1000000.00
City CHICAGO	State IL	Zip Code 60603
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CITADEL ASSET MANAGEMENT	Occupation (for Individual) CHIEF EXECUTIVE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. GRIFFIN, KENNETH, C, ,</b>		Date of Receipt MM / DD / YYYY 09 / 09 / 2020 <b>Transaction ID : SA11AI-2147483569</b>
Mailing Address 131 SOUTH DEARBORN ST		Amount of Each Receipt this Period 2500000.00
City CHICAGO	State IL	Zip Code 60603
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CITADEL ASSET MANAGEMENT	Occupation (for Individual) CHIEF EXECUTIVE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. HAWORTH, RICHARD, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 29 / 2020 <b>Transaction ID : SA11AI.4476</b>
Mailing Address 99 E 8TH ST SUITE 310		Amount of Each Receipt this Period 20000.00
City HOLLAND	State MI	Zip Code 49423-3562
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) HAWORTH INC.	Occupation (for Individual) CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 20000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3520000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. HINMAN, ROY, H, , II**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 ARRICOLA AVE

City ST AUGUSTINE	State FL	Zip Code 32080
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISLAND DOCTORS	Occupation (for Individual) MEDICAL DOCTOR
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2020

**Transaction ID : SA11AI-2147483552**

Amount of Each Receipt this Period  
25000.00

Memo Item

**B. HOLSCHER, KELLY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16360 SHADOW MOUNTAIN DR

City PACIFIC PALISADES	State CA	Zip Code 90272
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2020

**Transaction ID : SA11AI-2147483559**

Amount of Each Receipt this Period  
10000.00

Memo Item

**C. KAZANOWSKI, ADAM, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 441 STATE ST

City PETOSKEY	State MI	Zip Code 49770
------------------	-------------	-------------------

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

Name of Employer (for Individual) HIGH FIVE SPIRITS	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2020

**Transaction ID : SA11AI-2147483584**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**BETTER FUTURE MI FUND**

**A. KENNEDY, JOHN, C, , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4150 EAST PARIS SE  
 City KENTWOOD State MI Zip Code 49512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AUTOCAM CORPORATION Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 28 / 2020  
**Transaction ID : SA11AI-2147483546**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

**B. KRAFT, JONATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 PATRIOT PL  
 City FOXBOROUGH State MA Zip Code 02035-1374  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE KRAFT GROUP Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt 09 / 30 / 2020  
**Transaction ID : SA11AI.4354**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item  
 ATTRIBUTION: RAND-WHITNEY CONTAINERBOARD LP

**C. LOEB, DANIEL, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 HUDSON YARDS, 51ST FLOOR  
 City NEW YORK State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THIRD POINT LLC Occupation (for Individual) CEO/CIO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350000.00

Date of Receipt 09 / 22 / 2020  
**Transaction ID : SA11AI-2147483555**  
 Amount of Each Receipt this Period 350000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. MACEACHERN, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 256 OLIVE ST  
 City COCOA State FL Zip Code 32922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INLAND PLYWOOD Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 24 / 2020**  
**Transaction ID : SA11AI-2147483586**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. MARCUS, BERNARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1266 WEST PACES FERRY ROAD STE 615  
 City ATLANTA State GA Zip Code 30327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400000.00

Date of Receipt **09 / 17 / 2020**  
**Transaction ID : SA11AI-2147483557**  
 Amount of Each Receipt this Period 250000.00  
 Memo Item

**C. NEILSON, JEFFREY, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3910 TELEGRAPH RD STE 200  
 City BLOOMFIELD HILS State MI Zip Code 48302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LIPSON NEILSON Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt **09 / 30 / 2020**  
**Transaction ID : SA11AI-2147483535**  
 Amount of Each Receipt this Period 2200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	257200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. OBERNDORF, WILLIAM, E, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 615 FRONT ST  
 City SAN FRANCISCO State CA Zip Code 94111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OBERNDORF ENTERPRISES LLC Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : SA11AI-2147483596**  
 Amount of Each Receipt this Period 250000.00  
 Memo Item

**B. OSIRIUS GROUP, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 725 SOUTH ADAMS RD STE 205  
 City BIRMINGHAM State MI Zip Code 48009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 03 / 2020  
**Transaction ID : SA11AI-2147483572**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. PEREZ, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 81 SEAGATE DR  
 City NAPLES State FL Zip Code 34103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 11 / 2020  
**Transaction ID : SA11AI-2147483561**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	265000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. RAND-WHITNEY CONTAINERBOARD LP**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 336  
ROUTE 163

City MONTVILLE State CT Zip Code 06353

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
09 / 30 / 2020  
**Transaction ID : SA11AI-2147483537**

Amount of Each Receipt this Period  
100000.00

Memo Item  
SEE MEMO TEXT [SA11AI.4354]

**B. RIVARD, GREGORY, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10610 GALAXIE AVE

City FERNDALE State MI Zip Code 48220

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

Name of Employer (for Individual) Occupation (for Individual)  
DETROIT NAME PLATE ETCHING PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
08 / 24 / 2020  
**Transaction ID : SA11AI-2147483590**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. ROSE, DOUGLAS, C, ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10550 HUSSEY LN

City CARMEL State IN Zip Code 46032

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

Name of Employer (for Individual) Occupation (for Individual)  
IRWIN R ROSE & CO LLC REAL ESTATE INVESTMENT

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 01 / 2020  
**Transaction ID : SA11AI-2147483578**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. RUST, ROBERT, W, COL, USMCR RET**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1430 S DIXIE HWY  
STE 315

City CORAL GABLES	State FL	Zip Code 33146
----------------------	-------------	-------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 09 / 2020

**Transaction ID : SA11AI-2147483607**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B. SANSONE, THOMAS, A, ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2201 4TH ST  
STE 201

City ST PETERSBURG	State FL	Zip Code 33704
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020

**Transaction ID : SA11AI-2147483609**

Amount of Each Receipt this Period  
10000.00

Memo Item

**C. SINGER, PAUL, , MR,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 BUTLERS COVE RD

City EDGARTOWN	State MA	Zip Code 02539
-------------------	-------------	-------------------

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

Name of Employer (for Individual) EMC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2020

**Transaction ID : SA11AI-2147483543**

Amount of Each Receipt this Period  
250000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	262000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 31
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. SPITZNAGEL, MARK, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 830 VAUGHAN ROAD  
 City BLOOMFIELD HILLS State MI Zip Code 48304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNIVERSA INVESTMENTS Occupation (for Individual) PRESIDENT; CHIEF INVESTMENT OF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 11 / 2020  
**Transaction ID : SA11AI-2147483565**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

**B. WENZEL, TODD, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1505 BALLYBUNION CT SE  
 City GRAND RAPIDS State MI Zip Code 49546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SELF-EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : SA11AI-2147483582**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**C. WHITE, LYNN, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1337 BALLYBUNION CT SE  
 City GRAND RAPIDS State MI Zip Code 49546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : SA11AI-2147483580**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. WILLIAMS, GREGG, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2280 E WEST MAPLE RD  
 City WALLED LAKE State MI Zip Code 48390  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WILLIAMS INTERNATIONAL Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 24 / 2020  
**Transaction ID : SA11AI-2147483550**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

**B. YATES, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15800 LAKE VIEW CT  
 City GROSE POINTE PARK State MI Zip Code 48230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) YATES INDUSTRIES Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : SA11AI-2147483588**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105000.00
<b>TOTAL</b> This Period (last page this line number only).....	5510150.00

**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 20 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. ESAFUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 610 S. BOULEVARD

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00489856

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		30		2020

**Transaction ID : SA11C.4351**

Amount of Each Receipt this Period  

200000.00
-----------

 Memo Item

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period  

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 Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period  

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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	200000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

Full Name (Last, First, Middle Initial)

**A. APEX**

Mailing Address 138 CONANT ST  
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2020

FEC Identification Number

C

Transaction ID : SB21B.-2147  
Amount of Each Disbursement this Period

1110.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. APEX**

Mailing Address 138 CONANT ST  
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2020

FEC Identification Number

C

Transaction ID : SB21B.-2147  
Amount of Each Disbursement this Period

400.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BULLDOG COMPLIANCE**

Mailing Address 138 CONANT STREET  
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2020

FEC Identification Number

C

Transaction ID : SB21B.-2147  
Amount of Each Disbursement this Period

2021.61

Memo Item

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

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

3531.61

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. BULLDOG COMPLIANCE**

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET  
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 21 / 2020

FEC Identification Number: C

Transaction ID : SB21B.-2147

Amount of Each Disbursement this Period: 2000.00

Memo Item

**B. CAMPAIGN RESOURCE GROUP LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1948

City HOLLAND State MI Zip Code 49422

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 05 / 2020

FEC Identification Number: C

Transaction ID : SB21B.-2147

Amount of Each Disbursement this Period: 3500.00

Memo Item

**C. CAMPAIGN RESOURCE GROUP LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1948

City HOLLAND State MI Zip Code 49422

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 04 / 2020

FEC Identification Number: C

Transaction ID : SB21B.-2147

Amount of Each Disbursement this Period: 9775.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15275.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

**A. CHAIN BRIDGE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 08 / 2020

FEC Identification Number: C

Transaction ID : SB21B.-2147

Amount of Each Disbursement this Period: 20.00

Memo Item

**B. CHAIN BRIDGE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 09 / 2020

FEC Identification Number: C

Transaction ID : SB21B.-2147

Amount of Each Disbursement this Period: 20.00

Memo Item

**C. CHAIN BRIDGE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 10 / 2020

FEC Identification Number: C

Transaction ID : SB21B.-2147

Amount of Each Disbursement this Period: 20.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 60.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2020
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.-2147</b> Amount of Each Disbursement this Period 20.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2020
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.-2147</b> Amount of Each Disbursement this Period 20.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2020
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.-2147</b> Amount of Each Disbursement this Period 20.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

Purpose of Disbursement  
BANK FEE

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
0	9		2	4		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.-2147**  
Amount of Each Disbursement this Period

[REDACTED] 20.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. DICKINSON WRIGHT PLLC**

Mailing Address 1825 EYE STREET NW  
STE 900

City  
WASHINGTON

State  
DC

Zip Code  
20006

Purpose of Disbursement  
LEGAL CONSULTING

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
0	7		0	2		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.-2147**  
Amount of Each Disbursement this Period

[REDACTED] 1344.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. DICKINSON WRIGHT PLLC**

Mailing Address 1825 EYE STREET NW  
STE 900

City  
WASHINGTON

State  
DC

Zip Code  
20006

Purpose of Disbursement  
LEGAL CONSULTING

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
0	8		2	0		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.-2147**  
Amount of Each Disbursement this Period

[REDACTED] 1184.00

Memo Item

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

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

[REDACTED] 2548.00

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

Full Name (Last, First, Middle Initial) <b>A. DICKINSON WRIGHT PLLC</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020
Mailing Address 1825 EYE STREET NW STE 900		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.-2147</b> Amount of Each Disbursement this Period 160.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DICKINSON WRIGHT PLLC</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2020
Mailing Address 1825 EYE STREET NW STE 900		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.-2147</b> Amount of Each Disbursement this Period 1440.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. FABRIZIO, LEE &amp; ASSOCIATES, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2020
Mailing Address 2624 NE 15TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.-2147</b> Amount of Each Disbursement this Period 30225.00
City FT. LAUDERDALE	State FL	Zip Code 33304
Purpose of Disbursement POLLING EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	31825.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

Full Name (Last, First, Middle Initial)

**A. LOVASCO, LLC**

Mailing Address 6635 W. HAPPY VALLEY ROAD  
STE. A104

City GLENDALE State AZ Zip Code 85310

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.-2147  
Amount of Each Disbursement this Period  
2220.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MACK BROOK CO**

Mailing Address 7110 GREENBROOK LN

City DALLAS State TX Zip Code 75214

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.-2147  
Amount of Each Disbursement this Period  
20627.89

Memo Item

Full Name (Last, First, Middle Initial)

**C. MO STRATEGIES, INC.**

Mailing Address P.O. BOX 4

City WESTFIELD State IN Zip Code 46074

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.-2147  
Amount of Each Disbursement this Period  
142000.00

Memo Item

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

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

164847.89

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BETTER FUTURE MI FUND**

Full Name (Last, First, Middle Initial) <b>A. MO STRATEGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020	
Mailing Address P.O. BOX 4		FEC Identification Number C [REDACTED]	
City WESTFIELD	State IN	Zip Code 46074	Transaction ID : <b>SB21B.-2147</b>
Purpose of Disbursement FUNDRAISING CONSULTING		Category/Type	Amount of Each Disbursement this Period 81200.00
Candidate Name			<input type="checkbox"/> Memo Item
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>B. REGINA STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2020	
Mailing Address 2753 LINN RD.		FEC Identification Number C [REDACTED]	
City WILLIAMSTON	State MI	Zip Code 48895	Transaction ID : <b>SB21B.-2147</b>
Purpose of Disbursement FUNDRAISING CONSULTING		Category/Type	Amount of Each Disbursement this Period 21644.00
Candidate Name			<input type="checkbox"/> Memo Item
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. REGINA STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2020	
Mailing Address 2753 LINN RD.		FEC Identification Number C [REDACTED]	
City WILLIAMSTON	State MI	Zip Code 48895	Transaction ID : <b>SB21B.-2147</b>
Purpose of Disbursement FUNDRAISING CONSULTING		Category/Type	Amount of Each Disbursement this Period 10000.00
Candidate Name			<input type="checkbox"/> Memo Item
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).....▶	112844.00
<b>TOTAL</b> This Period (last page this line number only).....▶	330991.50

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
BETTER FUTURE MI FUND
FEC IDENTIFICATION NUMBER
C C00725317

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL CIELO MEDIA, LLC
Mailing Address 1427 LESLIE AVENUE SUITE 102
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Name of Federal Candidate: PETERS, GARY, ,
Office Sought: Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 1497175.00
Disbursement For: General 2020

Full Name of Payee DEL CIELO MEDIA, LLC
Mailing Address 1427 LESLIE AVENUE SUITE 102
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Name of Federal Candidate: PETERS, GARY, ,
Office Sought: Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 4070950.00
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 3996060.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, ,

[Electronically Filed]

Date 10 / 15 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
BETTER FUTURE MI FUND
FEC IDENTIFICATION NUMBER
C C00725317

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
RIGEL STRATEGIES
Mailing Address
3948 LEGACY DRIVE
SUITE 106282
City
PLANO State
TX Zip Code
75023
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type
Date of Public Distribution/Dissemination
09 / 09 / 2020
Amount
50000.00
Transaction ID : SE.4214
Date of Disbursement or Obligation
09 / 08 / 2020

Name of Federal Candidate:
PETERS, GARY, , ,
Support Oppose
Office Sought:
House Senate
District:
State: MI
Calendar Year-To-Date
Per Election for Office Sought
1547175.00
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
RIGEL STRATEGIES
Mailing Address
3948 LEGACY DRIVE
SUITE 106282
City
PLANO State
TX Zip Code
75023
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type
Date of Public Distribution/Dissemination
09 / 22 / 2020
Amount
100000.00
Transaction ID : SE.4226
Date of Disbursement or Obligation
09 / 21 / 2020

Name of Federal Candidate:
PETERS, GARY, , ,
Support Oppose
Office Sought:
House Senate
District:
State: MI
Calendar Year-To-Date
Per Election for Office Sought
4185570.00
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 150000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, , ,

[Electronically Filed]

Date

10 / 15 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
BETTER FUTURE MI FUND
FEC IDENTIFICATION NUMBER
C C00725317

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
SOMETHING ELSE STRATEGIES, LLC
Mailing Address
212 GOLDEN WILLOW COURT
City
EASLY State
SC Zip Code
29642
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
09 / 09 / 2020
Amount
24890.00
Transaction ID : SE.4218
Date of Disbursement or Obligation
09 / 09 / 2020

Name of Federal Candidate:
PETERS, GARY, ,
Support Oppose
Office Sought:
House Senate
District:
State: MI
Calendar Year-To-Date
Per Election for Office Sought
1572065.00
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
SOMETHING ELSE STRATEGIES, LLC
Mailing Address
212 GOLDEN WILLOW COURT
City
EASLY State
SC Zip Code
29642
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
09 / 22 / 2020
Amount
14620.00
Transaction ID : SE.4224
Date of Disbursement or Obligation
09 / 21 / 2020

Name of Federal Candidate:
PETERS, GARY, ,
Support Oppose
Office Sought:
House Senate
District:
State: MI
Calendar Year-To-Date
Per Election for Office Sought
4085570.00
Disbursement For:
Primary General
Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 39510.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 4185570.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

GANTT, CHARLES, ,

[Electronically Filed]

Date 10 / 15 / 2020

Signature