

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
John D. Dingell for Congress

ADDRESS (number and street) 607 14th Street, NW, Suite 800
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00002600
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
M 15

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] [] [] in the State of []
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 01 01 2009 through 03 31 2009

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 Guy R. Martin

Signature of Treasurer Electronically Filed by Guy R. Martin Date 04 15 2009

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

John D. Dingell for Congress

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	161687.40	165447.40
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	161687.40	162947.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	190634.62	291401.61
(b) Total Offsets to Operating Expenditures (from Line 14).....	1.14	1.14
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	190633.48	291400.47
8. Cash on Hand at Close of Reporting Period (from Line 27).....	834847.35	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
John D. Dingell for Congress

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

33250.00

34750.00

(ii) Unitemized.....

137.40

147.40

(iii) TOTAL of contributions

33387.40

34897.40

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

128300.00

130550.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

161687.40

165447.40

(add Lines 11(a)(iii), (b), (c), and (d))

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

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

1.14

1.14

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

1578.12

3216.39

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

163266.66

168664.93

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	190634.62	291401.61
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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2500.00
21. OTHER DISBURSEMENTS.....	1295.00	67395.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	191929.62	361296.61

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	863510.31
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	163266.66
25. SUBTOTAL (add Line 23 and Line 24).....	1026776.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	191929.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	834847.35

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Eric S. Kessler

Mailing Address 1620 Belvedere Blvd.

City State Zip Code
Silver Spring MD 20902-3902

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Dow Lohnes Government Strategies President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 1 6 / 2 0 0 9

Transaction ID: C2769970

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Alexander Beckles

Mailing Address 4659-A S. 28th Road

City State Zip Code
Arlington VA 22206

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-Employed Consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: C2772040

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Gary M. Hall

Mailing Address 4113 Scotland Road

City State Zip Code
Alexandria VA 22309

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
The Potomac Advocates Partner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: C2772080

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 111

(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Lawrence R. Sidman

Mailing Address 6712 Landon Lane

City State Zip Code
Bethesda MD 20817-5638

FEC ID number of contributing federal political committee. C

Name of Employer Association of Public Television Stations
Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
03 / 24 / 2009

Transaction ID: C2772071

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Daniel J. Mattoon

Mailing Address 6344 Cavalier Corridor

City State Zip Code
Falls Church VA 22044

FEC ID number of contributing federal political committee. C

Name of Employer Podesta/Mattoon
Occupation Co-Chairman

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C2772022

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
James E. Hall

Mailing Address 12 Highdown Court

City State Zip Code
Signal Mtn TN 37377-2323

FEC ID number of contributing federal political committee. C

Name of Employer Hall & Associates, LLC
Occupation Attorney/Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
03 / 24 / 2009

Transaction ID: C2772072

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Stuart M. Pape

Mailing Address 2950 Chain Bridge Road, NW

City Washington State DC Zip Code 20016-3408

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

Name of Employer Patton Boggs, LLP Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2009

Transaction ID: C2772082

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Keith G. Morrison

Mailing Address 5805 32nd Street, NW

City Washington State DC Zip Code 20015

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

Name of Employer Van Scoyoc Associates, Inc. Occupation Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2009

Transaction ID: C2772093

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Andrew Athy, Jr.

Mailing Address 1310 Nineteenth Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer O'Neill, Athy & Casey Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 24 / 2009

Transaction ID: C2772113

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Buffy Cafritz
Mailing Address 5334 Goldsboro Road
City Bethesda State MD Zip Code 20817
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Homemaker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 04 / 2009
Transaction ID: C2764464
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
John E. Shelk
Mailing Address 4845 Yorktown Boulevard
City Arlington State VA Zip Code 22207
FEC ID number of contributing federal political committee. **C**
Name of Employer Electric Power Company Occupation President & CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 18 / 2009
Transaction ID: C2769974
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Bill K. Brewster
Mailing Address PO Box 459
City Batesville State TX Zip Code 78829
FEC ID number of contributing federal political committee. **C**
Name of Employer The Capitol Hill Group Occupation Chairman
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 23 / 2009
Transaction ID: C2772004
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 9 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Jamie S. Gorelick

Mailing Address 1875 Pennsylvania Avenue, NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Wilmer Hale Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: C2772024

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard N. Dubin

Mailing Address 4800 Montgomery Lane
Suite 900

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-Employed Developer

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 1 2 / 2 0 0 9

Transaction ID: C2767404

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Marda J. Robillard

Mailing Address 16053 Laconia Cir

City State Zip Code
Woodbridge VA 22191-4341

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Van Scoyoc Associates Vice President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: C2772075

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Allan B. Swift

Mailing Address 6301 Stevenson Avenue
Apt. 1517

City State Zip Code
Alexandria VA 22304

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

Name of Employer Colling, Swift and Hynes Occupation Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	9

Transaction ID: C2772105

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard N. Dubin

Mailing Address 4800 Montgomery Lane
Suite 900

City State Zip Code
Bethesda MD 20814

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

Name of Employer Self-Employed Occupation Developer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	9

Transaction ID: C2767405

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Reid P. Stuntz

Mailing Address 3708 Fort Worth Ave

City State Zip Code
Alexandria VA 22304-1738

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

Name of Employer Hogan & Hartson, LLP Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	0	9

Transaction ID: C2763566

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4400.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 111

(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Janet M. Grissom

Mailing Address 4515 Cathedral Avenue, N.W.

City State Zip Code
Washington DC 20016-3564

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

Name of Employer
Johnson, Madigan, Peck,
Boland & Stewa

Occupation
Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: C2772036

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
R. Daniel Beattie

Mailing Address 704 Mt. Vernon Avenue

City State Zip Code
Alexandria VA 22301

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

Name of Employer
Clark Hill PLC

Occupation
Director of Government Affairs

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: C2772086

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Thomas M. Ryan

Mailing Address 4323 Westover Place, NW

City State Zip Code
Washington DC 20016

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

Name of Employer
Ryan, MacKinnon, Vasapoli
& Berzok, LL

Occupation
Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: C2772126

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Alan J. Roth

Mailing Address 1845 Vernon Street, NW

City Washington State DC Zip Code 20009-1279

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

Name of Employer US Telecom Occupation Senior Executive Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2009

Transaction ID: C2772136

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
David B. Finnegan

Mailing Address 4805 King Richard Drive

City Annandale State VA Zip Code 22003-4253

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

Name of Employer Mayer Brown Rowe & Maw, LLP Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2009

Transaction ID: C2774257

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Edward O. Fritts

Mailing Address 1919 Valleywood Road

City Mc Lean State VA Zip Code 22101

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

Name of Employer The Fritts Group Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2009

Transaction ID: C2772137

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Fuad El-Hibri

Mailing Address 13340 Signal Tree Lane

City State Zip Code
Potomac MD 20854

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

Name of Employer
Emergent BioSolutions, In-
c. Occupation
CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: C2767407

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Anthony F. Earley, Jr.

Mailing Address 5000 Brookdale Road

City State Zip Code
Bloomfield Hills MI 48304-3610

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

Name of Employer
DTE Energy Company Occupation
Chairman & CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: C2764458

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Mary J. Kripowicz

Mailing Address 23246 Country Club Lane

City State Zip Code
Grosse Ile MI 48138

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

Name of Employer
MJ Capitol Consulting, LLC Occupation
Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C2772028

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 14 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
David C. Leach

Mailing Address 3601 North Glebe Road

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
David Leach LLC Consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: C2772068

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Kimberly C. Parker

Mailing Address 8046 Ashford Boulevard

City State Zip Code
Laurel MD 20707

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

Name of Employer Occupation
Hart Health Strategies Consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: C2772128

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Ryan Guthrie

Mailing Address 1530 Key Boulevard
Apt. 327

City State Zip Code
Arlington VA 22209

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

Name of Employer Occupation
Bockorny Group Government Affairs

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: C2772138

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 111
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Mark J. Raabe

Mailing Address 3300 Circle Hill Road

City State Zip Code
Alexandria VA 22305-1708

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

Name of Employer Occupation
Self-Employed Consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: C2767408

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lynn R. Coleman

Mailing Address 1440 New York Avenue, N.W.

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Skadden Arps Slate Meagher & Flom Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C2757788

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
E. Bruce Harrison

Mailing Address 3201 North Vermont Street

City State Zip Code
Arlington VA 22207-4480

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

Name of Employer Occupation
Navistar, Inc. Washington Representative

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: C2772029

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 16 / 111	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial) Wiley Rein LLP		Date of Receipt
Mailing Address 1776 K Street, NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 7 / 2 0 0 9
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.		Transaction ID: C2763568
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 500.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> <input type="text"/> 500.00	PARTNERSHIP--partners below if itemized
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 500.00
TOTAL This Period (last page this line number only)	<input type="text"/> 33250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Ford Motor Company Civic Action Fund

Mailing Address PO Box 75000
MCS 2250

City State Zip Code
Detroit MI 48275

FEC ID number of contributing federal political committee. **C** C00046474

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C2774260

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
UAW-V-CAP

Mailing Address 8000 East Jefferson Avenue

City State Zip Code
Detroit MI 48214

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: C2772110

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
CH2M Hill Companies Ltd. PAC

Mailing Address 9191 South Jamaica Street

City State Zip Code
Englewood CO 80112

FEC ID number of contributing federal political committee. **C** C00143305

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID: C2772010

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

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

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FOR LINE NUMBER: PAGE 18 / 111
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Duke Energy Corporation PAC
Mailing Address 400 South Tyron Street
City Charlotte State NC Zip Code 28285
FEC ID number of contributing federal political committee. **C** C00083535
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 26 / 2009
Transaction ID: C2772020
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Great Lakes Sugar Beet Growers PAC
Mailing Address 2600 South Euclid Avenue #300 Plaza N.
City Bay City State MI Zip Code 48706
FEC ID number of contributing federal political committee. **C** C00384354
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 20 / 2009
Transaction ID: C2772030
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Association for Justice PAC
Mailing Address 777 6th Street, NW Suite 200
City Washington State DC Zip Code 20007
FEC ID number of contributing federal political committee. **C** C00024521
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 24 / 2009
Transaction ID: C2772130
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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FOR LINE NUMBER: PAGE 19 / 111
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
K & L Gates LLP PAC

Mailing Address 1601 K Street NW
Suite 500

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 24 / 2009
Transaction ID: C2772140
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
PPL People for Good Government

Mailing Address Two North Ninth Street

City Allentown State PA Zip Code 18101

FEC ID number of contributing federal political committee. **C** C00228106

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 03 / 09 / 2009
Transaction ID: C2767400
 Amount of Each Receipt this Period 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Gas Association PAC

Mailing Address 400 North Capitol Street, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 02 / 24 / 2009
Transaction ID: C2763311
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 20 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Sprint Nextel Corporation PAC

Mailing Address 6450 Sprint Parkway

City Overland Park State KS Zip Code 66251

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: C2763501
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
SmithKline Beecham Corporation PAC

Mailing Address Five Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: C2774261
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Comcast Corporation PAC

Mailing Address 1701 JFK Boulevard
49th Floor

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 02 / 27 / 2009
Transaction ID: C2763561
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Power PAC of Energy Future Holdings Corp.
Mailing Address 1601 Bryan Street

City State Zip Code
Dallas TX 75201

FEC ID number of contributing federal political committee. **C** C0025950

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2009

Transaction ID: C2764461

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Wine and Spirits Wholesalers of America PAC
Mailing Address 805 15th Street, N.W.
Suite 430

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 19 / 2009

Transaction ID: C2769971

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Association of Convenience Stores PAC
Mailing Address 1600 Duke Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 21 / 2009

Transaction ID: C2760491

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 22 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
TECO Energy, Inc. Employees' PAC

Mailing Address 702 North Franklin Street

City Tampa State FL Zip Code 33602

FEC ID number of contributing federal political committee. **C** C00161422

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: C2772011
Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Nurses Association PAC

Mailing Address 8515 Georgia Avenue Suite 400

City Silver Spring State MD Zip Code 20910

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: C2772031
Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1891 Preston White Drive

City Reston State VA Zip Code 20191

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: C2772121
Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 23 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Power PAC of Energy Future Holdings Corp.
Mailing Address 1601 Bryan Street

City State Zip Code
Dallas TX 75201

FEC ID number of contributing federal political committee. **C** C0025950

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 4 / 2 0 0 9

Transaction ID: C2772141

Amount of Each Receipt this Period
4000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Xcel Energy Employee PAC
Mailing Address 1225 17th Street
Suite 1200

City State Zip Code
Denver CO 80202

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 1 2 / 2 0 0 9

Transaction ID: C2767401

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
L-3 Communications Corporation PAC
Mailing Address 400 Virginia Avenue, SW
Suite C-150

City State Zip Code
Washington DC 20024

FEC ID number of contributing federal political committee. **C** C00344085

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 5 / 2 0 0 9

Transaction ID: C2763312

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Association for Advancement of Psychology PLAN

Mailing Address P.O. Box 38129

City State Zip Code
Colorado Springs CO 80937

FEC ID number of contributing federal political committee. **C** C00002956

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 02 / 2009

Transaction ID: C2763502

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Hogan & Hartson PAC

Mailing Address 555 13th Street, NW
8th Floor

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00261339

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 02 / 2009

Transaction ID: C2763562

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Comcast Corporation PAC

Mailing Address 1701 JFK Boulevard
49th Floor

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 03 / 2009

Transaction ID: C2761532

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
AGL Resources Inc. PAC

Mailing Address Ten Peachtree Place, NE
Loc 1461

City Atlanta State GA Zip Code 30309

FEC ID number of contributing federal political committee. **C** C00145037

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 0 3 / 2 0 0 9

Transaction ID: C2764452

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Exelon Corporation PAC

Mailing Address 10 South Dearborn Street

City Chicago State IL Zip Code 60603

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 0 4 / 2 0 0 9

Transaction ID: C2764462

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Electric Power Comm. For Responsible Govt

Mailing Address 1 Riverside Plaza, 26th Floor
P.O. Box 16036

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C** C00096842

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 1 9 / 2 0 0 9

Transaction ID: C2769972

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
National Multi Housing Council PAC

Mailing Address 1850 M Street, NW
Suite 540

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2009
Transaction ID: C2772132
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Boston Scientific Corporation PAC

Mailing Address One Boston Scientific Place

City Natick State MA Zip Code 01760

FEC ID number of contributing federal political committee. **C** C00357863

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 27 / 2009
Transaction ID: C2772012
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Hospital Association PAC

Mailing Address 325 Seventh Street, N.W.
Suite 700

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 23 / 2009
Transaction ID: C2772032
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Blue Cross and Blue Shield of Michigan PAC

Mailing Address 602 West Ionia

City State Zip Code
Lansing MI 48933

FEC ID number of contributing federal political committee. **C** C00084061

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 4 / 2 0 0 9

Transaction ID: C2772142

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dow Lohnes PAC

Mailing Address 1200 New Hampshire Avenue NW
Suite 800

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00346189

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 1 2 / 2 0 0 9

Transaction ID: C2758973

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Alliant Energy Corporation Employees PAC

Mailing Address 801 Pennsylvania Avenue, NW
Suite 640

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00132092

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 0 3 / 2 0 0 9

Transaction ID: C2764453

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Pinnacle West Capital Corporation PAC

Mailing Address 801 Pennsylvania Avenue, NW
Suite 214

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00015933

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
03 / 03 / 2009

Transaction ID: C2764463

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Nuclear Energy Institute Federal PAC

Mailing Address 1776 Eye Street, N.W.
4th Floor

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00239848

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: MM / DD / YYYY
03 / 19 / 2009

Transaction ID: C2769973

Amount of Each Receipt this Period: 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Tyson Foods Inc. PAC

Mailing Address PO Box 2020

City Springdale State AR Zip Code 72765

FEC ID number of contributing federal political committee. **C** C00169821

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
03 / 24 / 2009

Transaction ID: C2772103

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 29 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
National Propane Gas Association PAC

Mailing Address 1150 17th Street NW
Suite 310

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00079681

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: C2772013

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Procter & Gamble Company Good Govt. Comm.

Mailing Address One Procter & Gamble Plaza

City Cincinnati State OH Zip Code 45202

FEC ID number of contributing federal political committee. **C** C00257329

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: C2772033

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Dickstein Shapiro LLP PAC

Mailing Address 1825 Eye Street, N.W.

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00110197

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: C2772133

Amount of Each Receipt this Period: 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 30 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
American Association of Nurse Anesthetists PAC

Mailing Address 222 South Prospect Avenue

City State Zip Code
Park Ridge IL 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2009

Transaction ID: C2767403

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Northeast Utilities Employees PAC

Mailing Address 901 F Street, NW
Suite 620

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00102160

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: C2774254

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
ITC Holdings Corp. PAC

Mailing Address 201 Townsend Street
Suite 900

City State Zip Code
Lansing MI 48933

FEC ID number of contributing federal political committee. **C** C00388462

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 02 / 2009

Transaction ID: C2763564

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 31 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
First Energy PAC

Mailing Address 76 South Main Street

City Akron State OH Zip Code 44308

FEC ID number of contributing federal political committee. **C** C00140855

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt MM / DD / YYYY
01 / 14 / 2009

Transaction ID: C2758974

Amount of Each Receipt this Period 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ameren Federal PAC

Mailing Address 1331 Pennsylvania Avenue, NW
Suite 550 S

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00206136

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
03 / 03 / 2009

Transaction ID: C2764454

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Roetzel & Anderson Co. LPA PAC

Mailing Address 222 S. Main Street

City Akron State OH Zip Code 44308

FEC ID number of contributing federal political committee. **C** C00228379

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
03 / 20 / 2009

Transaction ID: C2772034

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 32 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
PAC of the American Assn. of Orthopaedic Surgeons

Mailing Address 317 Massachusetts Avenue, NE
1st Floor

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY
03 / 24 / 2009

Transaction ID: C2772134

Amount of Each Receipt this Period 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Gas Association PAC

Mailing Address 400 North Capitol Street, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY
03 / 30 / 2009

Transaction ID: C2774255

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
International B'hood of Boilermakers Campaign Fund

Mailing Address 753 State Avenue
Suite 565

City Kansas City State KS Zip Code 66101

FEC ID number of contributing federal political committee. **C** C00005157

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
02 / 27 / 2009

Transaction ID: C2763565

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 33 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
CMS Energy Employees for Better Government

Mailing Address One Energy Plaza
EP8-267

City State Zip Code
Jackson MI 49201

FEC ID number of contributing federal political committee. **C** C00075473

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 0 3 / 2 0 0 9

Transaction ID: C2764455

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Rifle Association Political Victory Fund

Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 1 8 / 2 0 0 9

Transaction ID: C2769975

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
CH2M Hill Companies Ltd. PAC

Mailing Address 9191 South Jamaica Street

City State Zip Code
Englewood CO 80112

FEC ID number of contributing federal political committee. **C** C00143305

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 9

Transaction ID: C2772005

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Parsons Corporation PAC

Mailing Address 100 West Walnut Street
T-1110

City Pasadena State CA Zip Code 91124

FEC ID number of contributing federal political committee. **C** C00103549

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: C2772025
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AFLAC Inc. PAC

Mailing Address 1932 Wynnton Road

City Columbus State GA Zip Code 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: C2772035
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Engineers Political Education Committee

Mailing Address 1125 Seventeenth Street, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: C2772065
 Amount of Each Receipt this Period: 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
United Egg Association PAC

Mailing Address 1720 Windward Concourse
Suite 230

City State Zip Code
Alpharetta GA 30005

FEC ID number of contributing federal political committee. **C** C00172841

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: C2772135

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Cardinal Health, Inc. PAC

Mailing Address 7000 Cardinal Place

City State Zip Code
Dublin OH 43017

FEC ID number of contributing federal political committee. **C** C00332833

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: C2772066

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
United Mine Workers of America COMPAC

Mailing Address 8315 Lee Highway
5th Floor

City State Zip Code
Fairfax VA 22031

FEC ID number of contributing federal political committee. **C** C00013342

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: C2774256

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Constellation Energy Group Inc. Federal PAC

Mailing Address 111 Market Street, 10th Floor

City State Zip Code
Baltimore MD 21202

FEC ID number of contributing federal political committee. **C** C00041376

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2009

Transaction ID: C2764456

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lockheed Martin Corporation Employees PAC

Mailing Address 1550 Crystal Drive Suite 300

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID: C2769976

Amount of Each Receipt this Period
4000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
DTE Energy Company PAC

Mailing Address 2000 Second Avenue

City State Zip Code
Detroit MI 48226

FEC ID number of contributing federal political committee. **C** C00081547

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2009

Transaction ID: C2767406

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **7500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Progress Energy Employees' Federal PAC

Mailing Address P.O. Box 1510

City Raleigh State NC Zip Code 27602

FEC ID number of contributing federal political committee. **C** C00091884

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: C2772016
 Amount of Each Receipt this Period: 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Polsinelli Shalton Flanigan Suelthaus PC PAC

Mailing Address 1152 15th Street, NW Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00445981

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: C2772026
 Amount of Each Receipt this Period: 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Golden State PAC

Mailing Address 11355 W. Olympic Blvd. 2nd Floor

City Los Angeles State CA Zip Code 90064

FEC ID number of contributing federal political committee. **C** C00145342

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: C2772106
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5800.00

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

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

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Power PAC of the Edison Electric Institute
Mailing Address 701 Pennsylvania Avenue, N.W.
City Washington State DC Zip Code 20004
FEC ID number of contributing federal political committee. **C** C00095869
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt 03 / 13 / 2009
Transaction ID: C2767396
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dominion Political Action Committee
Mailing Address One James River Plaza, 20th Floor
PO Box 26666
City Richmond State VA Zip Code 23261
FEC ID number of contributing federal political committee. **C** C00108209
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt 03 / 03 / 2009
Transaction ID: C2764457
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Council of Farmer Cooperatives PAC
Mailing Address 50 F Street, NW, Suite 900
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C** C00002238
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 24 / 2009
Transaction ID: C2772117
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 6000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Ven-PAC

Mailing Address PO Box 83142

City Gaithersburg State MD Zip Code 20883

FEC ID number of contributing federal political committee. **C** C00369660

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: C2772007

Amount of Each Receipt this Period: 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
SUN PAC

Mailing Address 1735 Market Street Suite LL

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00025346

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: C2772067

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
First Energy PAC

Mailing Address 76 South Main Street

City Akron State OH Zip Code 44308

FEC ID number of contributing federal political committee. **C** C00140855

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: C2767397

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Chubb Corporation PAC
Mailing Address 15 Mountain View Road
City Warren State NJ Zip Code 07059
FEC ID number of contributing federal political committee. **C** C00229203
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt 03 / 30 / 2009
Transaction ID: C2774258
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Boeing PAC
Mailing Address 1200 Wilson Blvd.
City Arlington State VA Zip Code 22209
FEC ID number of contributing federal political committee. **C** C00142711
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 30 / 2009
Transaction ID: C2772018
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
DIRECTV Group, Inc. Fund
Mailing Address 901 F Street, NW Suite 600
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C** C00331991
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 25 / 2009
Transaction ID: C2772038
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Action Committee for Rural Electrification
Mailing Address 4301 Wilson Boulevard

City State Zip Code
Arlington VA 22203-1860

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 3 0 / 2 0 0 9

Transaction ID: C2774259

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
ITC Holdings Corp. PAC
Mailing Address 201 Townsend Street
Suite 900

City State Zip Code
Lansing MI 48933

FEC ID number of contributing federal political committee. **C** C00388462

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 1 6 / 2 0 0 9

Transaction ID: C2769969

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
DTE Energy Company PAC
Mailing Address 2000 Second Avenue

City State Zip Code
Detroit MI 48226

FEC ID number of contributing federal political committee. **C** C00081547

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 0 9 / 2 0 0 9

Transaction ID: C2767399

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 42 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
K & L Gates LLP PAC

Mailing Address 1601 K Street NW
Suite 500

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 4 / 2 0 0 9

Transaction ID: C2772139

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Grid USA PAC

Mailing Address 201 Jones Road
5th Floor, Mail Stop 504

City State Zip Code
Waltham MA 02451

FEC ID number of contributing federal political committee. **C** C00048702

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 5 / 2 0 0 9

Transaction ID: C2772009

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Arch Coal Inc. PAC

Mailing Address City Place One Suite 300

City State Zip Code
St. Louis MO 63141

FEC ID number of contributing federal political committee. **C** C00167668

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 3 1 / 2 0 0 9

Transaction ID: C2772019

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 43 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
National Association of Realtors PAC

Mailing Address 430 North Michigan Avenue

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: C2772039

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
NRG Energy Inc. PAC

Mailing Address 211 Carnegie Center

City State Zip Code
Princeton NJ 08540

FEC ID number of contributing federal political committee. **C** C00366559

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: C2772099

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Chiropractic Association PAC

Mailing Address 1701 Clarendon Boulevard

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00102764

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: C2772129

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

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

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Detailed Summary Page

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Sheet Metal Workers Political Action League

Mailing Address 1750 New York Avenue, N.W.

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 1 3 / 2 0 0 9

Transaction ID: C2767409

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
International Brotherhood of Electrical Wkrs COPE

Mailing Address 900 Seventh Street, NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 0 5 / 2 0 0 9

Transaction ID: C2757789

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 7000.00

TOTAL This Period (last page this line number only) ► 128300.00

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Community Central Bank

Mailing Address 100 North Main Street

City State Zip Code
Mount Clemens MI 48046

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
857.95

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 9

Transaction ID: C2778720

Amount of Each Receipt this Period

63.88

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

B.

Full Name (Last, First, Middle Initial)
Citibank F.S.B.

Mailing Address PO Box 19748

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1105.98

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C2778701

Amount of Each Receipt this Period

48.84

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

C.

Full Name (Last, First, Middle Initial)
Community Central Bank

Mailing Address 100 North Main Street

City State Zip Code
Mount Clemens MI 48046

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
857.95

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 0 9

Transaction ID: C2778721

Amount of Each Receipt this Period

63.92

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

SUBTOTAL of Receipts This Page (optional)

176.64

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Citibank F.S.B.

Mailing Address PO Box 19748

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1105.98

Date of Receipt 01 / 30 / 2009

Transaction ID: C2778702

Amount of Each Receipt this Period 159.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

B.

Full Name (Last, First, Middle Initial)
Community Central Bank

Mailing Address 100 North Main Street

City Mount Clemens State MI Zip Code 48046

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 857.95

Date of Receipt 03 / 12 / 2009

Transaction ID: C2778722

Amount of Each Receipt this Period 63.97

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

C.

Full Name (Last, First, Middle Initial)
Community Central Bank

Mailing Address 100 North Main Street

City Mount Clemens State MI Zip Code 48046

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 857.95

Date of Receipt 03 / 26 / 2009

Transaction ID: C2778723

Amount of Each Receipt this Period 64.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **286.97**

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

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

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

FOR LINE NUMBER: PAGE 47 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Citibank F.S.B.

Mailing Address PO Box 19748

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1105.98

Date of Receipt 02 / 27 / 2009

Transaction ID: C2778703

Amount of Each Receipt this Period 29.41

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

B.

Full Name (Last, First, Middle Initial)
Citibank F.S.B.

Mailing Address PO Box 19748

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1105.98

Date of Receipt 02 / 27 / 2009

Transaction ID: C2778704

Amount of Each Receipt this Period 119.33

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

C.

Full Name (Last, First, Middle Initial)
T & C Federal

Mailing Address 525 N. Telegraph Road Suite 200

City Bloomfield Hills State MI Zip Code 48304

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 822.40

Date of Receipt 01 / 31 / 2009

Transaction ID: C2778714

Amount of Each Receipt this Period 154.22

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **302.96**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Monroe Bank & Trust

Mailing Address 7146 Pelham

City State Zip Code
Taylor MI 48180

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	8	/	2	0	0	9

Transaction ID: C2774285

Amount of Each Receipt this Period
9.13

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

B. Full Name (Last, First, Middle Initial)
Monroe Bank & Trust

Mailing Address 7146 Pelham

City State Zip Code
Taylor MI 48180

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	5	/	2	0	0	9

Transaction ID: C2778695

Amount of Each Receipt this Period
9.14

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

C. Full Name (Last, First, Middle Initial)
Citibank F.S.B.

Mailing Address PO Box 19748

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1105.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: C2778705

Amount of Each Receipt this Period
23.32

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **41.59**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
T & C Federal

Mailing Address 525 N. Telegraph Road
Suite 200

City Bloomfield Hills State MI Zip Code 48304

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 822.40

Date of Receipt 02 / 28 / 2009
Transaction ID: C2778715
 Amount of Each Receipt this Period 139.52

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

B.

Full Name (Last, First, Middle Initial)
Monroe Bank & Trust

Mailing Address 7146 Pelham

City Taylor State MI Zip Code 48180

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 209.60

Date of Receipt 01 / 22 / 2009
Transaction ID: C2774286
 Amount of Each Receipt this Period 9.14

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

C.

Full Name (Last, First, Middle Initial)
Monroe Bank & Trust

Mailing Address 7146 Pelham

City Taylor State MI Zip Code 48180

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 209.60

Date of Receipt 02 / 19 / 2009
Transaction ID: C2778696
 Amount of Each Receipt this Period 9.14

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **157.80**

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

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

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

FOR LINE NUMBER: PAGE 50 / 111
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A. Full Name (Last, First, Middle Initial)
Citibank F.S.B.
Mailing Address PO Box 19748
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1105.98
Date of Receipt 03 / 31 / 2009
Transaction ID: C2778706
Amount of Each Receipt this Period 132.20
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Interest Income

B. Full Name (Last, First, Middle Initial)
T & C Federal
Mailing Address 525 N. Telegraph Road Suite 200
City Bloomfield Hills State MI Zip Code 48304
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 822.40
Date of Receipt 03 / 31 / 2009
Transaction ID: C2778716
Amount of Each Receipt this Period 154.69
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Interest Income

C. Full Name (Last, First, Middle Initial)
Monroe Bank & Trust
Mailing Address 7146 Pelham
City Taylor State MI Zip Code 48180
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 209.60
Date of Receipt 03 / 05 / 2009
Transaction ID: C2778697
Amount of Each Receipt this Period 9.14
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Interest Income

SUBTOTAL of Receipts This Page (optional) ► 296.03
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 111
(check only one)

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

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Community Central Bank

Mailing Address 100 North Main Street

City State Zip Code
Mount Clemens MI 48046

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 857.95

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 1 / 2 0 0 9

Transaction ID: C2778717

Amount of Each Receipt this Period
63.75

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

B.

Full Name (Last, First, Middle Initial)
Monroe Bank & Trust

Mailing Address 7146 Pelham

City State Zip Code
Taylor MI 48180

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 209.60

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 9 / 2 0 0 9

Transaction ID: C2778698

Amount of Each Receipt this Period
9.14

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

C.

Full Name (Last, First, Middle Initial)
Community Central Bank

Mailing Address 100 North Main Street

City State Zip Code
Mount Clemens MI 48046

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 857.95

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C2778718

Amount of Each Receipt this Period
63.79

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Interest Income

SUBTOTAL of Receipts This Page (optional) ► **136.68**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 111	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial) Community Central Bank		Date of Receipt
Mailing Address 100 North Main Street		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/>
City	State	Zip Code
Mount Clemens	MI	48046
FEC ID number of contributing federal political committee.		Transaction ID: C2778719
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="63.83"/>
Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼		
Receipt For: 2010	* Interest Income	
<input checked="" type="checkbox"/> Primary	<input type="text" value="857.95"/>	
<input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="63.83"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1462.50"/>

**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)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Ms. Zinnia Kallabat		Transaction ID: D187640	
	Mailing Address 4743 South Knoll		Date of Disbursement 01 / 09 / 2009	
	City West Bloomfield	State MI	Zip Code 48323	Amount of Each Disbursement this Period 1419.01
	Purpose of Disbursement Payroll		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name			
	Office Sought: <input 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) ▼		
	State: District:			

B.	Full Name (Last, First, Middle Initial) Mr. Michael T. Robbins, II		Transaction ID: D193520	
	Mailing Address 2120 Vermont Ave, NW Apt #218		Date of Disbursement 03 / 20 / 2009	
	City Washington	State DC	Zip Code 20001	Amount of Each Disbursement this Period 16.00
	Purpose of Disbursement Reimbursement - Travel		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name			
	Office Sought: <input 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) ▼		
	State: District:			

C.	Full Name (Last, First, Middle Initial) Auto-Owners Insurance		Transaction ID: D193530	
	Mailing Address P.O. Box 30315		Date of Disbursement 03 / 25 / 2009	
	City Lansing	State MI	Zip Code 48909	Amount of Each Disbursement this Period 169.00
	Purpose of Disbursement Insurance		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name			
	Office Sought: <input 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) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	▶	1604.01
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address P.O. Box 2950</p> <p>City Merrifield State VA Zip Code 22116</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193840 Date of Disbursement 02 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 40.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Michael T. Robbins, II</p> <p>Mailing Address 2120 Vermont Ave, NW Apt #218</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D191220 Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 623.68</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Michigan Inaugural Dinner Dance</p> <p>Mailing Address 1320 Old Chain Bridge Road, Sute 3</p> <p>City Mc Lean State VA Zip Code 22101</p> <p>Purpose of Disbursement Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D188860 Date of Disbursement 01 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 10000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

10663.68

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Public Storage

Mailing Address 9300 Pelham

City State Zip Code
Taylor MI 48180

Purpose of Disbursement
Storage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D188870
Date of Disbursement

01 / 14 / 2009

Amount of Each Disbursement this Period

185.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Andrew LaBarre

Mailing Address 2426 Quarterback Court
Apt. 8

City State Zip Code
Ypsilanti MI 48197

Purpose of Disbursement
Reimbursement - Mileage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D188880
Date of Disbursement

01 / 07 / 2009

Amount of Each Disbursement this Period

79.56

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Ms. Zinnia Kallabat

Mailing Address 4743 South Knoll

City State Zip Code
West Bloomfield MI 48323

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D188900
Date of Disbursement

01 / 23 / 2009

Amount of Each Disbursement this Period

1419.01

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1683.57

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Public Storage

Mailing Address 9300 Pelham

City State Zip Code
Taylor MI 48180

Purpose of Disbursement
Storage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D190530
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	0	9

Amount of Each Disbursement this Period

185.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Hon. John D. Dingell

Mailing Address 5208 Royal Vale Lane

City State Zip Code
Dearborn MI 48126-4300

Purpose of Disbursement
Reimbursement - Tickets

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D190740
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	9

Amount of Each Disbursement this Period

750.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Elizabeth A. Gotham

Mailing Address 4758 Commonwealth

City State Zip Code
Detroit MI 48208

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D190780
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

Amount of Each Disbursement this Period

1039.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1974.98

TOTAL This Period (last page this line number only)

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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)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Washtenaw County Economic Club <hr/> Mailing Address P.O. Box 1408 <hr/> City Ann Arbor State MI Zip Code 48106-1408 <hr/> Purpose of Disbursement Membership Dues Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D191250 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Elizabeth A. Gotham <hr/> Mailing Address 4758 Commonwealth <hr/> City Detroit State MI Zip Code 48208 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D187641 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1045.81 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Ypsilanti Chamber of Commerce <hr/> Mailing Address 301 West Michigan Avenue Suite 101 <hr/> City Ypsilanti State MI Zip Code 48197 <hr/> Purpose of Disbursement Membership Dues Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D193521 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 235.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1880.81
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Citibank F.S.B.	Transaction ID: D193541 Date of Disbursement 01 / 21 / 2009
	Mailing Address PO Box 19748	Amount of Each Disbursement this Period 22.81
	City Washington State DC Zip Code 20036	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Bank Fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D188901 Date of Disbursement 01 / 23 / 2009
	Mailing Address P.O. Box 2950	Amount of Each Disbursement this Period 1337.43
	City Merrifield State VA Zip Code 22116	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Taxes Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Citibank F.S.B.	Transaction ID: D193831 Date of Disbursement 03 / 13 / 2009
	Mailing Address PO Box 19748	Amount of Each Disbursement this Period 3336.00
	City Washington State DC Zip Code 20036	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Federal Income Tax Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4696.24
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Ms. Zinnia Kallabat

Mailing Address 4743 South Knoll

City West Bloomfield State MI Zip Code 48323

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D193841
Date of Disbursement

02 / 20 / 2009

Amount of Each Disbursement this Period

1419.01

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Ms. Zinnia Kallabat

Mailing Address 4743 South Knoll

City West Bloomfield State MI Zip Code 48323

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D190781
Date of Disbursement

03 / 06 / 2009

Amount of Each Disbursement this Period

1540.16

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Woolford Creek Farm

Mailing Address 1066 Taylors Island Road

City Madison State MD Zip Code 21648

Purpose of Disbursement
Catering & Lodging

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D188861
Date of Disbursement

01 / 06 / 2009

Amount of Each Disbursement this Period

1323.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4282.67

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Michael T. Robbins, II	Transaction ID: D188881 Date of Disbursement 01 / 09 / 2009
	Mailing Address 2120 Vermont Ave, NW Apt #218	Amount of Each Disbursement this Period 431.19
	City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D189461 Date of Disbursement 01 / 29 / 2009
	Mailing Address P.O. Box 8100	Amount of Each Disbursement this Period 225.82
	City Aurora State IL Zip Code 60507	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D189471 Date of Disbursement 01 / 29 / 2009
	Mailing Address P.O. Box 6463	Amount of Each Disbursement this Period 82.41
	City Carol Stream State IL Zip Code 60197	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	739.42
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Ari-EI Enterprises, Inc.</p> <p>Mailing Address 29548 Southfield Road Suite 200</p> <p>City Southfield State MI Zip Code 48076</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D189761 Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 628.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Dearborn Chamber of Commerce</p> <p>Mailing Address 15544 Michigan Avenue</p> <p>City Dearborn State MI Zip Code 48124</p> <p>Purpose of Disbursement Ticket</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D190531 Date of Disbursement 02 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Sprint</p> <p>Mailing Address P.O. Box 660092</p> <p>City Dallas State TX Zip Code 75268</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D190741 Date of Disbursement 02 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 195.79</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

853.79

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

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

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D191221 Date of Disbursement 03 / 20 / 2009
	Mailing Address P.O. Box 2950	Amount of Each Disbursement this Period 1401.10
	City Merrifield State VA Zip Code 22116	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Andrew LaBarre	Transaction ID: D191251 Date of Disbursement 03 / 11 / 2009
	Mailing Address 2426 Quarterback Court Apt. 8	Amount of Each Disbursement this Period 191.95
	City Ypsilanti State MI Zip Code 48197	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Mileage Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Public Storage	Transaction ID: D187622 Date of Disbursement 01 / 05 / 2009
	Mailing Address 9300 Pelham	Amount of Each Disbursement this Period 207.00
	City Taylor State MI Zip Code 48180	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Storage Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	1800.05
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Paychex

Transaction ID: D187642
Date of Disbursement

Mailing Address P.O. Box 2950

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	0	9

City Merrifield State VA Zip Code 22116

Amount of Each Disbursement this Period

1213.89

Purpose of Disbursement
Payroll Taxes
Candidate Name

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

B.

Full Name (Last, First, Middle Initial)
Citibank F.S.B.

Transaction ID: D193542
Date of Disbursement

Mailing Address PO Box 19748

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	8		2	0	0	9

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

9.10

Purpose of Disbursement
Bank Fee
Candidate Name

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

C.

Full Name (Last, First, Middle Initial)
Monroe/Lenawee County AFL-CIO

Transaction ID: D188872
Date of Disbursement

Mailing Address 41 W. Front Street

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	0	9

City Monroe State MI Zip Code 48161

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Advertisement
Candidate Name

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

SUBTOTAL of Disbursements This Page (optional) ▶

1472.99

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

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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)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Xerox Corporation	Transaction ID: D189852 Date of Disbursement 02 / 04 / 2009
	Mailing Address P.O. Box 802555	Amount of Each Disbursement this Period 32.78
	City Chicago State IL Zip Code 60680	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Maintenance Fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Elizabeth A. Gotham	Transaction ID: D193832 Date of Disbursement 02 / 20 / 2009
	Mailing Address 4758 Commonwealth	Amount of Each Disbursement this Period 1045.81
	City Detroit State MI Zip Code 48208	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ms. Zinnia Kallabat	Transaction ID: D193842 Date of Disbursement 02 / 05 / 2009
	Mailing Address 4743 South Knoll	Amount of Each Disbursement this Period 1419.01
	City West Bloomfield State MI Zip Code 48323	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2497.60
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Fraioli & Associates	Transaction ID: D193532 Date of Disbursement 03 / 25 / 2009
	Mailing Address 80 F Street, NW Suite 804	Amount of Each Disbursement this Period 124.89
	City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing/Shipping Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D188892 Date of Disbursement 01 / 21 / 2009
	Mailing Address 1225 Eye Street, NW Suite 1225	Amount of Each Disbursement this Period 2400.00
	City Washington State DC Zip Code 20005	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Database Services Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D189462 Date of Disbursement 01 / 29 / 2009
	Mailing Address P.O. Box 1140	Amount of Each Disbursement this Period 289.29
	City Memphis State TN Zip Code 38101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2814.18
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Elizabeth A. Gotham	Transaction ID: D190192 Date of Disbursement 02 / 12 / 2009
	Mailing Address 4758 Commonwealth	Amount of Each Disbursement this Period 661.30
	City Detroit State MI Zip Code 48208	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Mileage Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D190742 Date of Disbursement 02 / 23 / 2009
	Mailing Address P.O. Box 1140	Amount of Each Disbursement this Period 87.23
	City Memphis State TN Zip Code 38101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D190772 Date of Disbursement 02 / 24 / 2009
	Mailing Address P.O. Box 6463	Amount of Each Disbursement this Period 76.85
	City Carol Stream State IL Zip Code 60197	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	825.38
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Joseph Michael	Transaction ID: D191202 Date of Disbursement 03 / 12 / 2009
	Mailing Address 9104 Mapleville Road	Amount of Each Disbursement this Period 6500.00
	City Boonsboro State MD Zip Code 21713	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Event Costs Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ari-El Enterprises, Inc.	Transaction ID: D191222 Date of Disbursement 03 / 17 / 2009
	Mailing Address 29548 Southfield Road Suite 200	Amount of Each Disbursement this Period 628.00
	City Southfield State MI Zip Code 48076	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Taylor Citizens for Progress	Transaction ID: D191252 Date of Disbursement 03 / 11 / 2009
	Mailing Address PO Box 1023	Amount of Each Disbursement this Period 600.00
	City Taylor State MI Zip Code 48180	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Tickets Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7728.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D187623 Date of Disbursement 01 / 05 / 2009
	Mailing Address P.O. Box 2950	Amount of Each Disbursement this Period 201.30
	City Merrifield State VA Zip Code 22116	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Fraioli & Associates	Transaction ID: D193533 Date of Disbursement 03 / 25 / 2009
	Mailing Address 80 F Street, NW Suite 804	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Consulting Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Citibank F.S.B.	Transaction ID: D193543 Date of Disbursement 03 / 18 / 2009
	Mailing Address PO Box 19748	Amount of Each Disbursement this Period 22.67
	City Washington State DC Zip Code 20036	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Bank Fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5223.97
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Southern Wayne County Regional Chamber</p> <p>Mailing Address 20600 Eureka Road Suite 315</p> <p>City Taylor State MI Zip Code 48180</p> <p>Purpose of Disbursement Ticket</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D187643</p> <p>Date of Disbursement 01 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 15.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Elizabeth A. Gotham</p> <p>Mailing Address 4758 Commonwealth</p> <p>City Detroit State MI Zip Code 48208</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193833</p> <p>Date of Disbursement 02 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1045.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Blue Cross & Blue Shield of Michigan</p> <p>Mailing Address P.O Box 79001</p> <p>City Detroit State MI Zip Code 48279</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D188863</p> <p>Date of Disbursement 01 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 318.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1379.80

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Sawicki & Son</p> <p>Mailing Address 1521 West Lafayette</p> <p>City Detroit State MI Zip Code 48216</p> <p>Purpose of Disbursement Yard Signs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D188873</p> <p>Date of Disbursement 01 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 824.15</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Michael T. Robbins, II</p> <p>Mailing Address 2120 Vermont Ave, NW Apt #218</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Reimbursement - Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D188893</p> <p>Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 113.49</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) HSBC Business Solutions</p> <p>Mailing Address PO Box 5219</p> <p>City Carol Stream State IL Zip Code 60197-5219</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D189853</p> <p>Date of Disbursement 02 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 43.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	981.63
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Fraioli & Associates	Transaction ID: D190743 Date of Disbursement 02 / 23 / 2009
	Mailing Address 80 F Street, NW Suite 804	Amount of Each Disbursement this Period 683.70
	City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage/Printing	Category/Type
	Candidate Name	
	Office Sought: <input 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) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D190773 Date of Disbursement 02 / 24 / 2009
	Mailing Address 1225 Eye Street, NW Suite 1225	Amount of Each Disbursement this Period 300.00
	City Washington State DC Zip Code 20005	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Website Services	Category/Type
	Candidate Name	
	Office Sought: <input 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) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Bill Irvine	Transaction ID: D191253 Date of Disbursement 03 / 11 / 2009
	Mailing Address 1335 W. 95th Street	Amount of Each Disbursement this Period 1075.00
	City Cleveland State OH Zip Code 44102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Flowers	Category/Type
	Candidate Name	
	Office Sought: <input 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) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2058.70
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
University of Michigan Museum of Art

Mailing Address 24463 West 10 Mile Road

City Southfield State MI Zip Code 48033

Purpose of Disbursement

Ticket

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D193534

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Mr. Michael T. Robbins, II

Mailing Address 2120 Vermont Ave, NW
Apt #218

City Washington State DC Zip Code 20001

Purpose of Disbursement

Reimbursement - Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D188894

Date of Disbursement

01 / 21 / 2009

Amount of Each Disbursement this Period

40.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Dearborn Press & Guide

Mailing Address 22450 Park St.

City Dearborn State MI Zip Code 48120

Purpose of Disbursement

Advertisement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D188864

Date of Disbursement

01 / 14 / 2009

Amount of Each Disbursement this Period

295.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

585.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Staples Credit Plan</p> <p>Mailing Address P.O. Box 689020 Dept. 85-0000074317</p> <p>City Des Moines State IA Zip Code 50638-9027</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D188874</p> <p>Date of Disbursement 01 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 226.96</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Brown Chapel A.M.E. Church</p> <p>Mailing Address 1043 West Michigan Avenue</p> <p>City Ypsilanti State MI Zip Code 48197-5100</p> <p>Purpose of Disbursement Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D190194</p> <p>Date of Disbursement 02 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 550.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Fraioli & Associates</p> <p>Mailing Address 80 F Street, NW Suite 804</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D190744</p> <p>Date of Disbursement 02 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	5776.96
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Occasions Caterers</p> <p>Mailing Address 5458 3rd Street, NE</p> <p>City Washington State DC Zip Code 20011</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D191254</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 11276.53</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Joshua Myers</p> <p>Mailing Address 417 West 5th Street</p> <p>City Monroe State MI Zip Code 48161</p> <p>Purpose of Disbursement Reimbursement - Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D187645</p> <p>Date of Disbursement 01 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 1033.11</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) AT&T Mobility</p> <p>Mailing Address P.O. Box 6463</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193535</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 76.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12386.49

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Michael T. Robbins, II Mailing Address 2120 Vermont Ave, NW Apt #218 City Washington State DC Zip Code 20001 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D193835 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 9 Amount of Each Disbursement this Period 526.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) ARAMARK Mailing Address Cobo Conference & Exhibition Cente One Washington Boulevard City Detroit State MI Zip Code 48226 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D190525 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 9 Amount of Each Disbursement this Period 6031.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Father Solanus Guild Mailing Address 976 Pope John Paul II Avenue City Wyandotte State MI Zip Code 48192 Purpose of Disbursement Gifts for Supporters Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D190745 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 9 Amount of Each Disbursement this Period 475.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	7033.09
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Dearborn Chamber of Commerce	Transaction ID: D188875 Date of Disbursement 01 / 14 / 2009
	Mailing Address 15544 Michigan Avenue	Amount of Each Disbursement this Period 215.00
	City Dearborn State MI Zip Code 48124	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Membership Dues Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sprint PCS	Transaction ID: D188895 Date of Disbursement 01 / 21 / 2009
	Mailing Address 23050 Michigan Avenue	Amount of Each Disbursement this Period 230.60
	City Dearborn State MI Zip Code 48124	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Fraioli & Associates	Transaction ID: D189765 Date of Disbursement 01 / 29 / 2009
	Mailing Address 80 F Street, NW Suite 804	Amount of Each Disbursement this Period 904.76
	City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel/Legal Fees/Shipping Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1350.36
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Ypsilanti Meals on Wheels Mailing Address 1110 Wset Cross Street City Ypsilanti State MI Zip Code 48197 Purpose of Disbursement Tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D191245 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) North Monroe Greenhouses, Inc. Mailing Address 1818 North Monroe Street City Monroe State MI Zip Code 48161 Purpose of Disbursement Flowers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D193536 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9 Amount of Each Disbursement this Period 58.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Mr. Michael T. Robbins, II Mailing Address 2120 Vermont Ave, NW Apt #218 City Washington State DC Zip Code 20001 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D193836 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 9 Amount of Each Disbursement this Period 606.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	1164.25
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
AAA Alarm Computer Center Inc.

Mailing Address 5953 Chase Road

City Dearborn State MI Zip Code 48126

Purpose of Disbursement Security System

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: D188866
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Xerox Corporation

Mailing Address P.O. Box 802555

City Chicago State IL Zip Code 60680

Purpose of Disbursement Maintenance Fee & Overage Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: D188896
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Fraioli & Associates

Mailing Address 80 F Street, NW Suite 804

City Washington State DC Zip Code 20001

Purpose of Disbursement Fundraising Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: D189766
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Paychex

Transaction ID: D189846
Date of Disbursement

Mailing Address P.O. Box 2950

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	0	9

City State Zip Code
Merrifield VA 22116

Amount of Each Disbursement this Period

237.09

Purpose of Disbursement
Payroll Services
Candidate Name

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

B.

Full Name (Last, First, Middle Initial)
Cantrell/Cutter Printing Inc.

Transaction ID: D190526
Date of Disbursement

Mailing Address 1789 Olive Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	0	9

City State Zip Code
Capitol Heights MD 20763

Amount of Each Disbursement this Period

1312.36

Purpose of Disbursement
Printing
Candidate Name

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

C.

Full Name (Last, First, Middle Initial)
ARAMARK

Transaction ID: D190746
Date of Disbursement

Mailing Address Cobo Conference & Exhibition Center
One Washington Boulevard

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	0	9

City State Zip Code
Detroit MI 48226

Amount of Each Disbursement this Period

1178.14

Purpose of Disbursement
Catering
Candidate Name

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

SUBTOTAL of Disbursements This Page (optional)

2727.59

TOTAL This Period (last page this line number only)

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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)

<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)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Edison Electric Institute</p> <p>Mailing Address 701 Pennsylvania Avenue, N.W.</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Room Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D190776</p> <p>Date of Disbursement 03 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Xerox Corporation</p> <p>Mailing Address P.O. Box 802555</p> <p>City Chicago State IL Zip Code 60680</p> <p>Purpose of Disbursement Maintenance Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D191256</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 32.78</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address P.O. Box 2950</p> <p>City Merrifield State VA Zip Code 22116</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193837</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 217.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

499.98

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Sprint	Transaction ID: D193517 Date of Disbursement 03 / 20 / 2009
	Mailing Address P.O. Box 660092	Amount of Each Disbursement this Period 177.47
	City Dallas State TX Zip Code 75268	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name Category/Type	
	Office Sought: <input 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) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Capitol Host	Transaction ID: D188897 Date of Disbursement 01 / 15 / 2009
	Mailing Address Rayburn House Office Bldg Room B-339B	Amount of Each Disbursement this Period 19083.89
	City Washington State DC Zip Code 20515	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Catering & Event Costs Candidate Name Category/Type	
	Office Sought: <input 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) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Blue Cross & Blue Shield of Michigan	Transaction ID: D190197 Date of Disbursement 02 / 12 / 2009
	Mailing Address P.O Box 79001	Amount of Each Disbursement this Period 924.34
	City Detroit State MI Zip Code 48279	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Insurance Candidate Name Category/Type	
	Office Sought: <input 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) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	20185.70
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Federal Express

Transaction ID: D193518
Date of Disbursement

Mailing Address P.O. Box 1140

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	9

City State Zip Code
Memphis TN 38101

Amount of Each Disbursement this Period

534.39

Purpose of Disbursement
Shipping

--

Candidate Name

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
AT&T

Transaction ID: D193528
Date of Disbursement

Mailing Address P.O. Box 8100

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	0	9

City State Zip Code
Aurora IL 60507

Amount of Each Disbursement this Period

245.12

Purpose of Disbursement
Telephone

--

Candidate Name

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Paychex

Transaction ID: D193838
Date of Disbursement

Mailing Address P.O. Box 2950

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0	0	9

City State Zip Code
Merrifield VA 22116

Amount of Each Disbursement this Period

1545.56

Purpose of Disbursement
Payroll Taxes

--

Candidate Name

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

2325.07

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

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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)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
National Democratic Club

Transaction ID: D188868
Date of Disbursement

Mailing Address 30 Ivy Street, SE

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	0	9

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

275.00

Purpose of Disbursement
Membership Dues

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
AT&T

Transaction ID: D188878
Date of Disbursement

Mailing Address P.O. Box 8100

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	0	9

City Aurora State IL Zip Code 60507

Amount of Each Disbursement this Period

243.75

Purpose of Disbursement
Telephone

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Mr. Michael T. Robbins, II

Transaction ID: D188898
Date of Disbursement

Mailing Address 2120 Vermont Ave, NW
Apt #218

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	0	9

City Washington State DC Zip Code 20001

Amount of Each Disbursement this Period

646.25

Purpose of Disbursement
Payroll

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1165.00

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

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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)

<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)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Auto-Owners Insurance</p> <p>Mailing Address P.O. Box 30315</p> <p>City Lansing State MI Zip Code 48909</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D189468</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 457.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) North Monroe Greenhouses, Inc.</p> <p>Mailing Address 1818 North Monroe Street</p> <p>City Monroe State MI Zip Code 48161</p> <p>Purpose of Disbursement Flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D190528</p> <p>Date of Disbursement 02 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 52.40</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address P.O. Box 8100</p> <p>City Aurora State IL Zip Code 60507</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D190748</p> <p>Date of Disbursement 02 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 266.53</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

775.93

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address P.O. Box 2950</p> <p>City Merrifield State VA Zip Code 22116</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D190778</p> <p>Date of Disbursement 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 1515.01</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Zinnia Kallabat</p> <p>Mailing Address 4743 South Knoll</p> <p>City West Bloomfield State MI Zip Code 48323</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D191218</p> <p>Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 1560.66</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Staples Credit Plan</p> <p>Mailing Address P.O. Box 689020 Dept. 85-0000074317</p> <p>City Des Moines State IA Zip Code 50638-9027</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D191248</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 84.34</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3160.01

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Southern Wayne County Regional Chamber

Transaction ID: D191258

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	9	

Mailing Address 20600 Eureka Road
Suite 315

Amount of Each Disbursement this Period

130.00

City Taylor State MI Zip Code 48180

Purpose of Disbursement
Tickets

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Perkins Coie LLP

Transaction ID: D187639

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	9	

Mailing Address 607 14th Street, NW
Suite 800

Amount of Each Disbursement this Period

20156.76

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal & Accounting Services

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Public Storage

Transaction ID: D193519

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	9	

Mailing Address 9300 Pelham

Amount of Each Disbursement this Period

185.00

City Taylor State MI Zip Code 48180

Purpose of Disbursement
Storage

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

20471.76

TOTAL This Period (last page this line number only)

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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)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D188879 Date of Disbursement 01 / 14 / 2009
	Mailing Address P.O. Box 6463	Amount of Each Disbursement this Period 121.75
	City Carol Stream State IL Zip Code 60197	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name Category/Type	
	Office Sought: <input 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) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Andrew LaBarre	Transaction ID: D190189 Date of Disbursement 02 / 12 / 2009
	Mailing Address 2426 Quarterback Court Apt. 8	Amount of Each Disbursement this Period 122.10
	City Ypsilanti State MI Zip Code 48197	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Mileage Candidate Name Category/Type	
	Office Sought: <input 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) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Peter D. Hart Research Associates	Transaction ID: D193539 Date of Disbursement 03 / 25 / 2009
	Mailing Address 1724 Connecticut Avenue N.W.	Amount of Each Disbursement this Period 25000.00
	City Washingt State DC Zip Code 20009	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Polling Services Candidate Name Category/Type	
	Office Sought: <input 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) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	25243.85
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address P.O. Box 2950</p> <p>City Merrifield State VA Zip Code 22116</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193839</p> <p>Date of Disbursement 02 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1431.09</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Elizabeth A. Gotham</p> <p>Mailing Address 4758 Commonwealth</p> <p>City Detroit State MI Zip Code 48208</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D188899</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1045.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Michael T. Robbins, II</p> <p>Mailing Address 2120 Vermont Ave, NW Apt #218</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D190779</p> <p>Date of Disbursement 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 606.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3083.15

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Michael W. Moreland

Mailing Address 9030 Sharpsburg Pike

City State Zip Code
Fairplay MD 21733

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D190899
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Elizabeth A. Gotham

Mailing Address 4758 Commonwealth

City State Zip Code
Detroit MI 48208

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D191219
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Blue Cross & Blue Shield of Michigan

Mailing Address P.O Box 79001

City State Zip Code
Detroit MI 48279

Purpose of Disbursement
Insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D191249
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Bank Of America	Transaction ID: D189214 Date of Disbursement 01 / 23 / 2009
	Mailing Address PO Box 1758	Amount of Each Disbursement this Period 3623.38
	City Newark State NJ Zip Code 07101-1758	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Payment, See Below	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Blossoms	Transaction ID: D189220 Date of Disbursement 01 / 23 / 2009
	Mailing Address 33866 Woodward Avenue at Adams	Amount of Each Disbursement this Period 109.13
	City Birmingham State MI Zip Code 48009	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Flowers	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Flowers On The Avenue	Transaction ID: D189222 Date of Disbursement 01 / 23 / 2009
	Mailing Address 6834 Park Avenue	Amount of Each Disbursement this Period 656.14
	City Allen Park State MI Zip Code 48101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Flowers & Gifts for Supporters	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	3623.38
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Bank Of America Mailing Address PO Box 1758 City Newark State NJ Zip Code 07101-1758 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D189224 Date of Disbursement 01 / 23 / 2009 Amount of Each Disbursement this Period 164.47 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) United States Postal Service Mailing Address National Capitol Station City Washington State DC Zip Code 20002 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D189215 Date of Disbursement 01 / 23 / 2009 Amount of Each Disbursement this Period 1051.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) The Source Mailing Address 555 Pennsylvania Avenue, NW City Washington State DC Zip Code 20001 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D189225 Date of Disbursement 01 / 23 / 2009 Amount of Each Disbursement this Period 288.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D189216 Date of Disbursement 01 / 23 / 2009
	Mailing Address PO Box 15040	Amount of Each Disbursement this Period 60.07
	City Albany State NY Zip Code 12212	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Telephone Candidate Name Category/Type	
	Office Sought: <input 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) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Cabela's	Transaction ID: D189218 Date of Disbursement 01 / 23 / 2009
	Mailing Address 110 Cabela Drive	Amount of Each Disbursement this Period 768.65
	City Dundee State MI Zip Code 48131	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Gifts for Donors Candidate Name Category/Type	
	Office Sought: <input 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) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Norton's Flowers	Transaction ID: D189219 Date of Disbursement 01 / 23 / 2009
	Mailing Address 2900 Washtenaw Avenue	Amount of Each Disbursement this Period 118.62
	City Ypsilanti State MI Zip Code 48197	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Flowers Candidate Name Category/Type	
	Office Sought: <input 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) ▼	
	State: District:	

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

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

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Bank Of America	Transaction ID: D193512 Date of Disbursement 02 / 19 / 2009
	Mailing Address PO Box 1758	Amount of Each Disbursement this Period 2000.00
	City Newark State NJ Zip Code 07101-1758	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Payment, See Below	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car	Transaction ID: D193931 Date of Disbursement 02 / 19 / 2009
	Mailing Address 12510 Telegraph Road	Amount of Each Disbursement this Period 529.12
	City Taylor State MI Zip Code 48180	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank Of America	Transaction ID: D193905 Date of Disbursement 02 / 19 / 2009
	Mailing Address PO Box 1758	Amount of Each Disbursement this Period 15.98
	City Newark State NJ Zip Code 07101-1758	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Bank Fee	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Joe Shymanski	Transaction ID: D193925 Date of Disbursement 02 / 19 / 2009
	Mailing Address 1616 D Street, SW	Amount of Each Disbursement this Period 203.50
	City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Auction Items Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Lapita Restaurant	Transaction ID: D193906 Date of Disbursement 02 / 19 / 2009
	Mailing Address 22681 Newman	Amount of Each Disbursement this Period 301.11
	City Dearborn State MI Zip Code 48124	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Food for Volunteers Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sprint PCS	Transaction ID: D193908 Date of Disbursement 02 / 19 / 2009
	Mailing Address 23050 Michigan Avenue	Amount of Each Disbursement this Period 267.89
	City Dearborn State MI Zip Code 48124	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Telephone Equipment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D193928 Date of Disbursement																			
	Mailing Address P.O. Box 1140	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	9		2	0	0	9												
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Shipping	<table border="1"><tr><td>62.84</td></tr></table>	62.84																		
62.84																					
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Westborn Flower Market	Transaction ID: D193909 Date of Disbursement																			
	Mailing Address 21770 Michigan Avenue	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	9		2	0	0	9												
	City Dearborn State MI Zip Code 48124	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Flowers	<table border="1"><tr><td>136.58</td></tr></table>	136.58																		
136.58																					
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Bank Of America	Transaction ID: D193513 Date of Disbursement																			
	Mailing Address PO Box 1758	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	9		2	0	0	9												
	City Newark State NJ Zip Code 07101-1758	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Payment, See Below	<table border="1"><tr><td>1995.28</td></tr></table>	1995.28																		
1995.28																					
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Office Sought: <input 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) ▼																				
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1995.28</td></tr></table>	1995.28
1995.28		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Shooting Sportsman	Transaction ID: D193950 Date of Disbursement 02 / 19 / 2009
	Mailing Address P.O. Box 37048	Amount of Each Disbursement this Period 672.00
	City Boone State IA Zip Code 50037-2048	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Gifts for Donors Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: D193941 Date of Disbursement 02 / 19 / 2009
	Mailing Address National Capitol Station	Amount of Each Disbursement this Period 40.00
	City Washington State DC Zip Code 20002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Postage Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) York Flowers	Transaction ID: D193962 Date of Disbursement 02 / 19 / 2009
	Mailing Address 5023 Wisconsin Avenue, NW	Amount of Each Disbursement this Period 329.36
	City Washington State DC Zip Code 20008	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Flowers Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Hyatt Hotels

Mailing Address 71 South Wacker

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D193945
Date of Disbursement

02 / 19 / 2009

Amount of Each Disbursement this Period

250.18

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Clementes Restaurant

Mailing Address 2240 Fort Street

City Lincoln Park State MI Zip Code 48146

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D193965
Date of Disbursement

02 / 19 / 2009

Amount of Each Disbursement this Period

51.61

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
AT&T Mobility

Mailing Address P.O. Box 6463

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D193966
Date of Disbursement

02 / 19 / 2009

Amount of Each Disbursement this Period

53.99

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Bank Of America	Transaction ID: D193937 Date of Disbursement 02 / 19 / 2009
	Mailing Address PO Box 1758	Amount of Each Disbursement this Period 24.02
	City Newark State NJ Zip Code 07101-1758	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Bank Fee	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car	Transaction ID: D193957 Date of Disbursement 02 / 19 / 2009
	Mailing Address 12510 Telegraph Road	Amount of Each Disbursement this Period 131.40
	City Taylor State MI Zip Code 48180	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank Of America	Transaction ID: D193514 Date of Disbursement 02 / 20 / 2009
	Mailing Address PO Box 1758	Amount of Each Disbursement this Period 1958.11
	City Newark State NJ Zip Code 07101-1758	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Payment, See Below	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1958.11
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 100 / 111

<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)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Home Depot</p> <p>Mailing Address 25451 Michigan Avenue</p> <p>City Dearborn Heights State MI Zip Code 48125</p> <p>Purpose of Disbursement Supplies for Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193880</p> <p>Date of Disbursement 02 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 31.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Lapita Restaurant</p> <p>Mailing Address 22681 Newman</p> <p>City Dearborn State MI Zip Code 48124</p> <p>Purpose of Disbursement Food for Volunteers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193900</p> <p>Date of Disbursement 02 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 87.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Malek al Kabob</p> <p>Mailing Address 22371 Goddard</p> <p>City Taylor State MI Zip Code 48180</p> <p>Purpose of Disbursement Food for Volunteers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193890</p> <p>Date of Disbursement 02 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 119.97</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

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

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

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

FOR LINE NUMBER: (check only one)

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<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Clementes Restaurant	Transaction ID: D193893 Date of Disbursement 02 / 20 / 2009
	Mailing Address 2240 Fort Street	Amount of Each Disbursement this Period 98.53
	City Lincoln Park State MI Zip Code 48146	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food for Volunteers	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Bank Of America	Transaction ID: D193875 Date of Disbursement 02 / 20 / 2009
	Mailing Address PO Box 1758	Amount of Each Disbursement this Period 10.00
	City Newark State NJ Zip Code 07101-1758	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Bank Fee	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Sprint	Transaction ID: D193876 Date of Disbursement 02 / 20 / 2009
	Mailing Address P.O. Box 660092	Amount of Each Disbursement this Period 71.00
	City Dallas State TX Zip Code 75268	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Equipment	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 102 / 111

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Westborn Flower Market	Transaction ID: D193878 Date of Disbursement 02 / 20 / 2009
	Mailing Address 21770 Michigan Avenue	Amount of Each Disbursement this Period 84.19
	City Dearborn State MI Zip Code 48124	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Flowers	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Meijer	Transaction ID: D193889 Date of Disbursement 02 / 20 / 2009
	Mailing Address 14640 Pardee Road	Amount of Each Disbursement this Period 120.98
	City Taylor State MI Zip Code 48180	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Supplies for Event	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Bank Of America	Transaction ID: D193515 Date of Disbursement 03 / 18 / 2009
	Mailing Address PO Box 1758	Amount of Each Disbursement this Period 6047.98
	City Newark State NJ Zip Code 07101-1758	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Payment, See Below	
	Candidate Name	Category/Type
	Office Sought: <input 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) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	6047.98
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address National Capitol Station

City Washington State DC Zip Code 20002

Purpose of Disbursement Postage

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: D193860
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address PO Box 15040

City Albany State NY Zip Code 12212

Purpose of Disbursement Telephone

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: D193870
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
AT&T Mobility

Mailing Address P.O. Box 6463

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Telephone

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: D193871
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Capitol Host

Mailing Address Rayburn House Office Bldg
Room B-339B

City Washington State DC Zip Code 20515

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D193862
Date of Disbursement

03 / 18 / 2009

Amount of Each Disbursement this Period

647.99

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Cabela's

Mailing Address 110 Cabela Drive

City Dundee State MI Zip Code 48131

Purpose of Disbursement
Gifts for Donors

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D193872
Date of Disbursement

03 / 18 / 2009

Amount of Each Disbursement this Period

544.60

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
York Flowers

Mailing Address 5023 Wisconsin Avenue, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement
Flowers

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D193863
Date of Disbursement

03 / 18 / 2009

Amount of Each Disbursement this Period

98.88

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
John D. Dingell for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address PO Box 1758</p> <p>City Newark State NJ Zip Code 07101-1758</p> <p>Purpose of Disbursement Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193873</p> <p>Date of Disbursement 03 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 103.07</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Staples Credit Plan</p> <p>Mailing Address P.O. Box 689020 Dept. 85-0000074317</p> <p>City Des Moines State IA Zip Code 50638-9027</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193854</p> <p>Date of Disbursement 03 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 50.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Northwest Airlines</p> <p>Mailing Address National Airport</p> <p>City Washington State DC Zip Code 20000</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D193874</p> <p>Date of Disbursement 03 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 453.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

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

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

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

FOR LINE NUMBER: (check only one)

<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Lakes of Taylor Golf Club Mailing Address 25505 Norhtline City Taylor State MI Zip Code 48180 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D193845 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 451.16 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Norton's Flowers Mailing Address 2900 Washtenaw Avenue City Ypsilanti State MI Zip Code 48197 Purpose of Disbursement Flowers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D193855 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 52.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Kingsmill Resort Mailing Address 1010 Kingsmill Road City Williamsburg State VA Zip Code 23185 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D193865 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 2225.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Westborn Flower Market	Transaction ID: D193846
	Mailing Address 21770 Michigan Avenue	Date of Disbursement 03 / 18 / 2009
	City Dearborn State MI Zip Code 48124	Amount of Each Disbursement this Period 147.07
	Purpose of Disbursement Flowers Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) National Democratic Club	Transaction ID: D193866
	Mailing Address 30 Ivy Street, SE	Date of Disbursement 03 / 18 / 2009
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 38.13
	Purpose of Disbursement Meals Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

188088.50

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)

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<input 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.	Full Name (Last, First, Middle Initial) Ann Arbor Democratic Party Mailing Address PO Box 4178 City Ann Arbor State MI Zip Code 48106 Purpose of Disbursement Donation Candidate Name Office Sought: <input 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) ▼ State: District:	Transaction ID: D190190 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 9 Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Gleaner's Community Food Bank Mailing Address 2131 Beaufait City Detroit State MI Zip Code 48207 Purpose of Disbursement Donation Candidate Name Office Sought: <input 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) ▼ State: District:	Transaction ID: D193531 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Ann Arbor Democratic Party Mailing Address PO Box 4178 City Ann Arbor State MI Zip Code 48106 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input 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) ▼ State: District:	Transaction ID: D188882 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9 Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Michigan Democratic Party-Federal Account</p> <p>Mailing Address 606 Townsend Street</p> <p>City Lansing State MI Zip Code 48933</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Michigan Democratic Party-Federal Account</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D189463 Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Chris Dingell for Wayne County Judge</p> <p>Mailing Address 3360 Brookshire</p> <p>City Trenton State MI Zip Code 48183</p> <p>Purpose of Disbursement Void of 6/12/08 Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D190533 Date of Disbursement 02 / 19 / 2009</p> <p>Amount of Each Disbursement this Period -3400.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Monroe County Democratic Committee</p> <p>Mailing Address P.O. Box 2452</p> <p>City Monroe State MI Zip Code 48161</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Monroe County Democratic Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D188884 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-2350.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

<p>A. Full Name (Last, First, Middle Initial) Michigan Democratic Party-Federal Account</p> <p>Mailing Address 606 Townsend Street</p> <p>City Lansing State MI Zip Code 48933</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Michigan Democratic Party-Federal Account</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: D189464 Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 125.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Michigan Democratic Party-Federal Account</p> <p>Mailing Address 606 Townsend Street</p> <p>City Lansing State MI Zip Code 48933</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Michigan Democratic Party-Federal Account</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: D193525 Date of Disbursement 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) University of Michigan College Democrats</p> <p>Mailing Address 530 South State Street 3909 Michigan Union</p> <p>City Ann Arbor State MI Zip Code 48104</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D191246 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

875.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
John D. Dingell for Congress

A.

Full Name (Last, First, Middle Initial)
Monroe County Democratic Committee

Mailing Address P.O. Box 2452

City State Zip Code
Monroe MI 48161

Purpose of Disbursement
2009 Contribution

Candidate Name
Monroe County Democratic Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D193527

Date of Disbursement

/ /

Amount of Each Disbursement this Period

420.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Michigan Environmental Council

Mailing Address 119 Pere Marquette Drive
Suite 2A

City State Zip Code
Lansing MI 48912

Purpose of Disbursement
Donation

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D193538

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

920.00

TOTAL This Period (last page this line number only)

695.00