

**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

Friends of John Conyers

ADDRESS (number and street)

12138 Central Ave, Ste 194

Check if different than previously reported. (ACC)

Mitchellville

MD

20721

2. **FEC IDENTIFICATION NUMBER**

C00008201

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT **NEW (N)** OR **x AMENDED (A)**

M 14

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

X July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

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 04 01 2004 through 06 30 2004

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 Mickey Williams

Signature of Treasurer Electronically Filed by Mickey Williams Date 02 03 2006

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

Office Use Only

FEC FORM 3
(Revised 02/2005)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of John Conyers

Report Covering the Period: From: ^M 0 ^M 4 ^D 0 ^D 1 ^Y 2 ^Y 0 ^Y 0 ^Y 4 To: ^V 0 ^M 6 ^D 3 ^D 0 ^Y 2 ^Y 0 ^Y 0 ^Y 4

	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(a)).....	58286.73	417315.48
(b) Total Contribution Refunds (from Line 20(d)).....	164.04	164.04
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	58122.69	417151.44
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	57375.57	402663.34
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3407.22
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	57375.57	399256.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	74719.93	
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 02/2005)

Page 3

Write or Type Committee Name
Friends of John Conyers

Report Covering the Period: From: ^{M M} D 4 ^{Y Y} 0 1 ^{Y Y} 2 0 0 4 To: ^{Y M} 0 8 ^{Y Y} 3 0 ^{Y Y} 2 0 0 4

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).....	34350.00	142461.30
(ii) Unitemized.....	1862.73	14672.18
(iii) TOTAL of contributions from Individuals..... ▶	36212.73	157133.48
(b) Political Party Committees.....	0.00	271.00
(c) Other Political Committees (such as PACS).....	22074.00	259911.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	58286.73	417315.48
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 (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	3407.22
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	58286.73	420722.70

DETAILED SUMMARY PAGE
of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	57375.57	402663.34
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).....	164.04	164.04
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	164.04	164.04
21. OTHER DISBURSEMENTS.....	17450.00	25030.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	74989.61	427857.38

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	91422.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	58286.73
25. SUBTOTAL (add Line 23 and Line 24).....	149709.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	74989.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	74719.93

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 52

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. DEL R BRYANT		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 320 West 57th Street		Transaction ID: C305
City New York	State NY	Zip Code 10019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Broadcast Music, Inc.	Occupation President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. ERNST CANNON		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 320 WEST 57TH ST		Transaction ID: C309
City NEW YORK	State NY	Zip Code 10019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation LEGAL ADVISOR	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. RON CARTER		Date of Receipt M / D / Y 06 / 01 / 2004
Mailing Address 300 WEST END AVE		Transaction ID: C329
City NEW YORK	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation BUSINESS PROPRIETOR	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 52

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. Citizens For Beavers		Date of Receipt M / D / Y 06 / 15 / 2004
Mailing Address 2552 E. 79TH ST		Transaction ID: C937
City CHICAGO	State IL	Zip Code 60649
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. RICHARD CONLIN		Date of Receipt M / D / Y 06 / 02 / 2004
Mailing Address 159 GODFREY		Transaction ID: C928
City E WESTON	State CT	Zip Code 06883
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation BUSINESS OWNER	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. ALFRED DAMIGA		Date of Receipt M / D / Y 06 / 21 / 2004
Mailing Address 4179 ST ANDREWS		Transaction ID: C292
City HOWELL	State MI	Zip Code 48849
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation ATTRYN	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 52
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. BERTHA DON		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address PD BOX 289		Transaction ID: C296
City RIDGEFIELD	State NJ	Zip Code 07657
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation BUSINESS OWNER	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. DON ELLIOT		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address PD BOX 289		Transaction ID: C307
City RIDGEFIELD	State NJ	Zip Code 07657
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation BUSINESS OWNER	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. CHARLES FELDMAN		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 1 WALBROOK		Transaction ID: C300
City SCARSDALE	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 52

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. IRA GLASSER		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 290 9TH ST AVE 1D1		Transaction ID: C913
City NEW YORK	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Danny Goldberg		Date of Receipt M / D / Y 05 / 02 / 2004
Mailing Address 130 Fifth Avenue, 7th Floor		Transaction ID: C541
City New York	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Artemis Records	Occupation President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. PHILLIP GRAHAM		Date of Receipt M / D / Y 08 / 04 / 2004
Mailing Address 320 WEST 57TH ST		Transaction ID: C324
City NEW YORK	State NY	Zip Code 10019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation MARKETING REP	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
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 9 / 52

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. STANLEY GROSSMAN		Date of Receipt M / D / Y 06 / 05 / 2004
Mailing Address 100 PARK AVE		Transaction ID: C931
City NEW YORK	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Cheryl Heywood		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 642 SECOND ST		Transaction ID: C902
City BROOKLAND	State NY	Zip Code 11215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Cheryl Heywood		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 642 SECOND ST		Transaction ID: C901
City BROOKLAND	State NY	Zip Code 11215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 52

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. GEORGE HAYWOOD		Date of Receipt M / D / Y 06 / 28 / 2004
Mailing Address 842 2ND ST		Transaction ID: C311
City	State	Zip Code
BROOKLAND	NY	11215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. GEORGE HAYWOOD		Date of Receipt M / D / Y 06 / 28 / 2004
Mailing Address 842 2ND ST		Transaction ID: C312
City	State	Zip Code
BROOKLAND	NY	11215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. KATRINA HEUWEL		Date of Receipt M / D / Y 06 / 28 / 2004
Mailing Address 340 RIVERSIDE DR APT 8B		Transaction ID: C319
City	State	Zip Code
NEW YORK	NY	10025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The Nation	Occupation Editor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER: PAGE 11 / 52
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. MOSHE Hirsch		Date of Receipt M / D / Y 06 / 20 / 2004
Mailing Address 1282 EAST 27TH ST		Transaction ID: C923
City BROOKLAND	State NY	Zip Code 11210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. ACHIM HOLMES		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 29 COCKENOE DRIVE		Transaction ID: C290
City WESTPORT	State CT	Zip Code 06880
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation ATTRNY AND BUSINESS OPER	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. CARLTON HOYE		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 18 PALMETTO WAY		Transaction ID: C299
City NORTH BRUNSWICK	State NJ	Zip Code 10025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 12 / 52
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. VERNON JORDAN		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 1333 NEW HAMPSHIRE AVE NW		Transaction ID: C336
City	State	Zip Code
WASHINGTON	DC	20036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer LAZARE INC	Occupation DIRECTOR/ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. SUSIE KRABACHER		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 201 N. MILL ST STE 201		Transaction ID: C335
City	State	Zip Code
ASPEN	CO	81611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer THHC INC	Occupation EXEC DIR	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. SUSIE KRABACHER		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 201 N. MILL ST STE 201		Transaction ID: C334
City	State	Zip Code
ASPEN	CO	81611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer THHC INC	Occupation EXEC DIR	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 52
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. STEPHEN MARKS		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address PD BOX 250		Transaction ID: C333
City LITCHFIELD	State CT	Zip Code 06753
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. DEIDRA McDONALD		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 31 JANE ST APT 15H		Transaction ID: C306
City NEW YORK	State NY	Zip Code 10014
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. L Londell McMillan		Date of Receipt M / D / Y 06 / 20 / 2004
Mailing Address 156 West 56th Street		Transaction ID: C320
City New York	State NY	Zip Code 10019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The McMillan Firm	Occupation Chairman	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 52
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. ALAN MILSTEIN		Date of Receipt M / D / Y 06 / 21 / 2004
Mailing Address 411 B HAIN DRIVE		Transaction ID: C291
City	State	Zip Code
LAFAYETT HILL	PA	19444
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation Attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. RUTH NUSSDORF		Date of Receipt M / D / Y 06 / 25 / 2004
Mailing Address ONE CARRIAGE DR		Transaction ID: C327
City	State	Zip Code
OLD WESTBURY	NY	11568
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer PRO CHOICE BEAUTY CARE INC	Occupation CHAIRMAN	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. STEPHANIE PETERS		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 2804 MOZART PLACE		Transaction ID: C332
City	State	Zip Code
WASHINGTON	DC	20009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer PATTON BOGGS	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 52

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. ANDREW PETKUN		Date of Receipt M / D / Y 05 / 25 / 2004
Mailing Address PDB 23 YORKTOWN HEIGHTS		Transaction ID: C294
City NEW YORK	State NY	Zip Code 10508
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF	Occupation Photographer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. FRANCES PRESTON		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 10 MUSIC SQ		Transaction ID: C310
City NASHVILLE	State TN	Zip Code 37203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. SHARON ROGERS		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 132 E DELAWARE PLACE APT 5905		Transaction ID: C330
City CHICAGO	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation BUSINESS OWNER	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 52
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. EVERETT RAND		Date of Receipt M / D / Y 06 / 02 / 2004
Mailing Address 550B SOUTH STATE ST		Transaction ID: C925
City	State	Zip Code
CHICAGO	IL	60621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Midway Wholesalers	Occupation Sales Manager	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. MICHAEL REMINGTON		Date of Receipt M / D / Y 06 / 07 / 2004
Mailing Address 1031 N. EDGEWOOD ST		Transaction ID: C914
City	State	Zip Code
ARLINGTON	VA	22201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. BETH ROSS		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 5 SPLIT ROCK LANE		Transaction ID: C297
City	State	Zip Code
SYOSSET	NY	11791
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTYNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 52

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. JOHN SARGENT		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 37 GARDEN PL		Transaction ID: C317
City	State	Zip Code
BROOKLAND	NY	11201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation ANALYST	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. ALISON SMITH		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 333 W 22ND AT APT 4D		Transaction ID: C293
City	State	Zip Code
NEW YORK	NY	10011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Broadcast Music Inc.	Occupation Director	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. SAM SOBH		Date of Receipt M / D / Y 04 / 25 / 2004
Mailing Address 1480 PENN AVE		Transaction ID: C326
City	State	Zip Code
WYANDOTTE	MI	48375
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 18 / 52

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. THE MICHIGAN TRIBE		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 5 CROW HILL		Transaction ID: C286
City UNACASTILL	State CT	Zip Code 06382
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. LUCAS VISCONTI		Date of Receipt M / D / Y 06 / 20 / 2004
Mailing Address 83 W BROAD ST		Transaction ID: C322
City HOPEWELL	State NJ	Zip Code 08525
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. JOHN WEIDMAN		Date of Receipt M / D / Y 06 / 20 / 2004
Mailing Address 395 RIVERSIDE DRIVE		Transaction ID: C318
City NEW YORK	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation Writer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 52

(check only one)

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

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NAME OF COMMITTEE (In Full)
 Friends of John Conyers

Full Name (Last, First, Middle Initial) A. JESSICA WINTER		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 401 KNICKERBRCKER RD		Transaction ID: C316
City LOSTER	State NJ	Zip Code 07624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ATTRNY	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	34350.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 52
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. AFL-CIO COPE POLITICAL CONTRIBUTIONS COMMITTEE		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 815 18th Street N.W.		Transaction ID: C289
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee. C C00003806		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. AMERICAN INTELLECTUAL PROPERTY LAW ASSOCIATION INTELLECTUAL PROPERTY PAC		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 2001 JEFFERSON DAVIS HIGHWAY		Transaction ID: C268
City	State	Zip Code
ARLINGTON	VA	22202
FEC ID number of contributing federal political committee. C CD0156835		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. AMERICAN MARITIME OFFICERS RETIREES ASSOCIATION VOLUNTARY POLITICAL ACTION FUND		Date of Receipt M / D / Y 06 / 03 / 2004
Mailing Address 650 FOURTH AVENUE		Transaction ID: C533
City	State	Zip Code
BROOKLYN	NY	11232
FEC ID number of contributing federal political committee. C CD0089557		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 52

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 800 MARYLAND AVENUE SW SUITE 100W		Transaction ID: C269
City	State	Zip Code
WASHINGTON	DC	20024
FEC ID number of contributing federal political committee. C C00017525		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) B. AMERICAN SHIPPING ALLIANCE POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 06 / 15 / 2004
Mailing Address PO BOX 34565		Transaction ID: C270
City	State	Zip Code
WASHINGTON	DC	20043
FEC ID number of contributing federal political committee. C CD0366542		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. AT&T GDRP POLITICAL ACTION COMMITTEE (AT&T PAC)		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 295 NORTH MAPLE AVENUE		Transaction ID: C272
City	State	Zip Code
BASKING RIDGE	NJ	07920
FEC ID number of contributing federal political committee. C CD0185124		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 8000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 52

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. BROADCAST MUSIC INC LEGISLATIVE FUND FOR AUTHORS COMPOSERS & PUBLISHERS		Date of Receipt M / D / Y 04 / 10 / 2004
Mailing Address 320 WEST 57TH STREET		Transaction ID: C504
City NEW YORK	State NY	Zip Code 10019
FEC ID number of contributing federal political committee. C C00302850		Amount of Each Receipt this Period 74.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 74.00	
		* In-Kind: Postage

Full Name (Last, First, Middle Initial) B. CLEAR CHANNEL COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 08 / 28 / 2004
Mailing Address 200 E. Basse Road		Transaction ID: C543
City San Antonio	State TX	Zip Code 78209
FEC ID number of contributing federal political committee. C CD0279218		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. DEMOCRACY FOR AMERICA		Date of Receipt M / D / Y 08 / 30 / 2004
Mailing Address PO Box 8313 SUITE 300		Transaction ID: C273
City Burlington	State VT	Zip Code 05402
FEC ID number of contributing federal political committee. C CD0370007		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2074.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. DGA-PAC THE POLITICAL ACTION COMMITTEE OF THE DIRECTORS GUILD OF AMERICA INC.		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 7920 Sunset Boulevard		Transaction ID: C274
City	State	Zip Code
Los Angeles	CA	90046
FEC ID number of contributing federal political committee. C C00311044		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. DRINKER BIDDLE POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 1500 K Street NW Suite 1100		Transaction ID: C275
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. C CD0370759		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. GREAT LAKES SUGARBEET GROWERS POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 06 / 14 / 2004
Mailing Address 4800 FASHION SQUARE BLVD #300 PLAZA N		Transaction ID: C276
City	State	Zip Code
SAGINAW	MI	48604
FEC ID number of contributing federal political committee. C CD0384354		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 52

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 06 / 14 / 2004
Mailing Address 18011 NE 38th Way Box 97017		Transaction ID: C279
City Redmond	State WA	Zip Code 98073
FEC ID number of contributing federal political committee. C C00227546		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. NATIONAL ASSOCIATION OF BANKRUPTCY TRUSTEES POLITICAL ACTION COMMITTEE (NABT PAC)		Date of Receipt M / D / Y 06 / 30 / 2004
Mailing Address 1 WINDSOR COVE SUITE 305		Transaction ID: C281
City COLUMBIA	State SC	Zip Code 29223
FEC ID number of contributing federal political committee. C CD0348623		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 06 / 04 / 2004
Mailing Address 1050 CONNECTICUT AVE NW STE 1100		Transaction ID: C277
City WASHINGTON	State DC	Zip Code 20038
FEC ID number of contributing federal political committee. C CD0368142		Amount of Each Receipt this Period 4000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 52

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial) A. RECORDING INDUSTRY ASSOCIATION/AMERICA INC POLITICAL ACTION COMMITTEE (FKA RECORDING INDUSTRY ASSOCIATION)		Date of Receipt M / D / Y 06 / 04 / 2004	
Mailing Address 133D CONNECTICUT AVENUE SUITE 300		Transaction ID: C283	
City	State	Zip Code	Amount of Each Receipt this Period
WASHINGTON	DC	20036	1000.00
FEC ID number of contributing federal political committee. C C00009357		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer	Occupation	Election Cycle-to-Date	
Receipt For: 2004		1000.00	
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. SCHROEDER FOR CONGRESS COMMITTEE, INC		Date of Receipt M / D / Y 05 / 25 / 2004	
Mailing Address 200D GAYLORD STREET		Transaction ID: C284	
City	State	Zip Code	Amount of Each Receipt this Period
DENVER	CO	80205	1000.00
FEC ID number of contributing federal political committee. C CD0008235		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer	Occupation	Election Cycle-to-Date	
Receipt For: 2004		2000.00	
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. TEACHING HOSPITAL EDUCATION POLITICAL ACTION COMMITTEE (THEPAC)		Date of Receipt M / D / Y 06 / 24 / 2004	
Mailing Address 805 15TH STREET NW SUITE 500		Transaction ID: C287	
City	State	Zip Code	Amount of Each Receipt this Period
WASHINGTON	DC	20005	500.00
FEC ID number of contributing federal political committee. C CD0360792		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer	Occupation	Election Cycle-to-Date	
Receipt For: 2004		500.00	
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	Other (specify) ▼	

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)
 or each category of the
 Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
 Friends of John Conyers

Full Name (Last, First, Middle Initial) A. TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE		Date of Receipt M / D / Y 06 / 01 / 2004
Mailing Address 80 WEST END AVENUE		Transaction ID: C285
City	State	Zip Code
NEW YORK	NY	10023
FEC ID number of contributing federal political committee. C C00008268		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	22074.00

**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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. Airtran

Mailing Address 1 Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement
Airfare

Candidate Name

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

State: District

Category/
Type

Transaction ID: D447

Date of Disbursement

05 / 17 / 2004

Amount of Each Disbursement this Period

126.69

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

Full Name (Last, First, Middle Initial)

B. Airtran

Mailing Address 1 Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement
Airfare

Candidate Name

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

State: District

Category/
Type

Transaction ID: D448

Date of Disbursement

05 / 17 / 2004

Amount of Each Disbursement this Period

126.69

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

Full Name (Last, First, Middle Initial)

C. Airtran

Mailing Address 1 Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement
Airfare

Candidate Name

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

State: District

Category/
Type

Transaction ID: D449

Date of Disbursement

05 / 17 / 2004

Amount of Each Disbursement this Period

126.69

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

SUBTOTAL of Disbursements This Page (optional) ▶

380.07

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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO Box 582880

City Tulsa State OK Zip Code 74158-2810

Purpose of Disbursement
Airfare

Candidate Name

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

State: District

Category/
Type

Transaction ID: D148

Date of Disbursement

04 / 21 / 2004

Amount of Each Disbursement this Period

528.63

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

Full Name (Last, First, Middle Initial)

B. AMERITECH

Mailing Address N17 W24300 RIVERWOOD

City WAUKESHA State WI Zip Code 53188

Purpose of Disbursement
Telephone Service

Candidate Name

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

State: District

Category/
Type

Transaction ID: D148

Date of Disbursement

04 / 21 / 2004

Amount of Each Disbursement this Period

132.21

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

Full Name (Last, First, Middle Initial)

C. PERRY APELBAUM

Mailing Address 3708 TAYLOR ST

City CHEVY CHASE State MD Zip Code 20815

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

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

State: District

Category/
Type

Transaction ID: D174

Date of Disbursement

05 / 12 / 2004

Amount of Each Disbursement this Period

247.76

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

SUBTOTAL of Disbursements This Page (optional) ▶

908.60

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)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. AT&T Wireless Services

Mailing Address Post Office Box 8220

City Aurora State IL Zip Code 60572

Purpose of Disbursement
Telephone Service

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D151

Date of Disbursement

04 / 21 / 2004

Amount of Each Disbursement this Period

1761.92

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

Full Name (Last, First, Middle Initial)

B. AT&T Wireless Services

Mailing Address Post Office Box 8220

City Aurora State IL Zip Code 60572

Purpose of Disbursement
Telephone Service

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D458

Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

1004.86

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

Full Name (Last, First, Middle Initial)

C. AT&T Wireless Services

Mailing Address Post Office Box 8220

City Aurora State IL Zip Code 60572

Purpose of Disbursement
Telephone Service

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D150

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

861.30

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

SUBTOTAL of Disbursements This Page (optional) ▶

3628.08

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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)
A. AVENET WEB SOLUTIONS

Mailing Address 1380 ENERGY LANE

City ST PAUL State MN Zip Code 55084

Purpose of Disbursement
WEB HOSTING

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D152
Date of Disbursement
05 / 12 / 2004

Amount of Each Disbursement this Period
3960.00
Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. BANK OF AMERICA

Mailing Address PO BOX 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D578
Date of Disbursement
06 / 08 / 2004

Amount of Each Disbursement this Period
2.00
Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. BANK OF AMERICA

Mailing Address PO BOX 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D580
Date of Disbursement
06 / 16 / 2004

Amount of Each Disbursement this Period
2.00
Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 3964.00

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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
 Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address PO BOX 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement
 Bank Fee

Candidate Name

Office Sought: House
 Senate
 President

State: District

Disbursement For: Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D581

Date of Disbursement

06 / 17 / 2004

Amount of Each Disbursement this Period

1.50

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

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address PO BOX 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement
 Bank Fee

Candidate Name

Office Sought: House
 Senate
 President

State: District

Disbursement For: Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D582

Date of Disbursement

06 / 18 / 2004

Amount of Each Disbursement this Period

2.00

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

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address PO BOX 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement
 Bank Fee

Candidate Name

Office Sought: House
 Senate
 President

State: District

Disbursement For: Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D583

Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

2.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

5.50

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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
 Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. IVY BARNES

Mailing Address 1600 ANTIETHEM ST
 APT 1715

City DETROIT State MI Zip Code 48207

Purpose of Disbursement
 Postage

Candidate Name

Office Sought: House
 Senate
 President
 State: District

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D817

Date of Disbursement

06 / 08 / 2004

Amount of Each Disbursement this Period

180.00

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

Full Name (Last, First, Middle Initial)

B. IVY BARNES

Mailing Address 1600 ANTIETHEM ST
 APT 1715

City DETROIT State MI Zip Code 48207

Purpose of Disbursement
 Reimb: telephone expenses

Candidate Name

Office Sought: House
 Senate
 President
 State: District

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D481

Date of Disbursement

06 / 28 / 2004

Amount of Each Disbursement this Period

264.04

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

Full Name (Last, First, Middle Initial)

C. IVY BARNES

Mailing Address 1600 ANTIETHEM ST
 APT 1715

City DETROIT State MI Zip Code 48207

Purpose of Disbursement
 Stipend and Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
 State: District

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D182

Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

4802.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

5246.04

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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)
A. MARGARET BETTS

Mailing Address PO BOX 21790

City State Zip Code
DETROIT MI 48221

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D167
Date of Disbursement

06 / 12 / 2004

Amount of Each Disbursement this Period

3900.00

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

Full Name (Last, First, Middle Initial)
B. BRAND AND FULLER

Mailing Address 823 15TH ST NW

City State Zip Code
WASHINGTON DC 20005

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D153
Date of Disbursement

06 / 01 / 2004

Amount of Each Disbursement this Period

2560.00

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

Full Name (Last, First, Middle Initial)
C. BROADCAST MUSIC INC LEGISLATIVE FUND FOR AUTHORS COMPOS-
ERS & PUBLISHERS

Mailing Address 320 WEST 57TH STREET

City State Zip Code
NEW YORK NY 10019

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
X Primary General Other (specify) ▼

Category/
Type

Transaction ID: D359
Date of Disbursement

04 / 19 / 2004

Amount of Each Disbursement this Period

74.00

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

* in-kind received

SUBTOTAL of Disbursements This Page (optional) ▶

6534.00

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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. MARIAN BROWN

Mailing Address 18470 MUIRLAND

City State Zip Code
DETROIT MI 48221

Purpose of Disbursement
TRAVEL REIMB

Candidate Name

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

Category/
Type

Transaction ID: D170

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

600.00

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

Full Name (Last, First, Middle Initial)

B. Carey Limousine of Chicago

Mailing Address 2500 East Devon Avenue

City State Zip Code
Elk Grove Village IL 60007

Purpose of Disbursement
Limousine Service

Candidate Name

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

Category/
Type

Transaction ID: D651

Date of Disbursement

06 / 02 / 2004

Amount of Each Disbursement this Period

87.00

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

Full Name (Last, First, Middle Initial)

C. Carey Limousine of Chicago

Mailing Address 2500 East Devon Avenue

City State Zip Code
Elk Grove Village IL 60007

Purpose of Disbursement
Limousine Service

Candidate Name

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

Category/
Type

Transaction ID: D606

Date of Disbursement

06 / 02 / 2004

Amount of Each Disbursement this Period

121.50

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

SUBTOTAL of Disbursements This Page (optional) ▶

808.50

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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. CATO TRAVEL

Mailing Address 500 INDEPENDENCE AVE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
Senate
President
State: District

Disbursement For:
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D462

Date of Disbursement

04 / 30 / 2004

Amount of Each Disbursement this Period

15.00

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

Full Name (Last, First, Middle Initial)

B. CATO TRAVEL

Mailing Address 500 INDEPENDENCE AVE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
Senate
President
State: District

Disbursement For:
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D481

Date of Disbursement

04 / 30 / 2004

Amount of Each Disbursement this Period

15.00

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

Full Name (Last, First, Middle Initial)

C. CATO TRAVEL

Mailing Address 500 INDEPENDENCE AVE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
Senate
President
State: District

Disbursement For:
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D464

Date of Disbursement

06 / 21 / 2004

Amount of Each Disbursement this Period

15.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

45.00

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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. CATO TRAVEL

Mailing Address 500 INDEPENDENCE AVE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Travel

Candidate Name

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

Category/
Type

Transaction ID: D460
Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

46.50

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

Full Name (Last, First, Middle Initial)

B. City of Detroit Parking Violations Bureau

Mailing Address PO Box 2549

City Detroit State MI Zip Code 48231

Purpose of Disbursement
Fine

Candidate Name

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

Category/
Type

Transaction ID: D486
Date of Disbursement

04 / 05 / 2004

Amount of Each Disbursement this Period

365.00

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

Full Name (Last, First, Middle Initial)

C. DAVID L ANDRUKITIS PRINTING

Mailing Address 50 E. ST

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PRINTING

Candidate Name

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

Category/
Type

Transaction ID: D156
Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

515.53

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

SUBTOTAL of Disbursements This Page (optional) ▶

927.03

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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 (check only one)

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

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NAME OF COMMITTEE (In Full)
 Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. E&H PRINTING

Mailing Address 17395 LIVERNOIS AVE

City State Zip Code
 DETROIT MI 48221

Purpose of Disbursement
 Printing

Candidate Name

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

Category/
 Type

Transaction ID: D160
 Date of Disbursement

04 / 12 / 2004

Amount of Each Disbursement this Period

89.50

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

Full Name (Last, First, Middle Initial)

B. FEDERAL ELECTION COMMISSION

Mailing Address 699 E Street NW

City State Zip Code
 Washington DC 20463

Purpose of Disbursement
 Late Fee

Candidate Name

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

Category/
 Type

Transaction ID: D181
 Date of Disbursement

04 / 22 / 2004

Amount of Each Disbursement this Period

2100.00

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

Full Name (Last, First, Middle Initial)

C. For the Record Photography and Public Affairs

Mailing Address 5 Rosecraft Drive

City State Zip Code
 Fredericksburg VA 22407

Purpose of Disbursement
 FUNDRAISING SERVICES

Candidate Name

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

Category/
 Type

Transaction ID: D159
 Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

11288.75

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

SUBTOTAL of Disbursements This Page (optional) ▶

13479.25

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

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)
A. LILLIAN GERMAN

Mailing Address 110 D. ST

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D622
Date of Disbursement

06 / 01 / 2004

Amount of Each Disbursement this Period

200.00

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

Full Name (Last, First, Middle Initial)
B. LILLIAN GERMAN

Mailing Address 110 D. ST

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D675
Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)
C. LILLIAN GERMAN

Mailing Address 110 D. ST

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D641
Date of Disbursement

06 / 21 / 2004

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) ▶

1700.00

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

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NAME OF COMMITTEE (In Full)
 Friends of John Conyers

Full Name (Last, First, Middle Initial)
A. LILLIAN GERMAN

Mailing Address 110 D. ST

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
 TRAVEL REIMB

Candidate Name

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

Category/
 Type

Transaction ID: D165
 Date of Disbursement
 06 / 25 / 2004

Amount of Each Disbursement this Period
 883.00
 Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Ellsworth Gibson

Mailing Address 3514 10th Street NW

City Washington State DC Zip Code 20010

Purpose of Disbursement
 Entertainment Services

Candidate Name

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

Category/
 Type

Transaction ID: D471
 Date of Disbursement
 06 / 13 / 2004

Amount of Each Disbursement this Period
 300.00
 Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. Hertz Rent-a-car

Mailing Address 801 11th Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
 Car rental

Candidate Name

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

Category/
 Type

Transaction ID: D477
 Date of Disbursement
 06 / 08 / 2004

Amount of Each Disbursement this Period
 54.18
 Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ **1237.18**

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)

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

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NAME OF COMMITTEE (In Full)
 Friends of John Conyers

A. Full Name (Last, First, Middle Initial)
 Anita Johnson

Mailing Address

City State Zip Code

Purpose of Disbursement
 Food & Beverage Expenses

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D867
 Date of Disbursement
 06 / 18 / 2004

Amount of Each Disbursement this Period
 242.00

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

B. Full Name (Last, First, Middle Initial)
 KEENAN KELLER

Mailing Address 1820 MONROE ST

City State Zip Code
 WASHINGTON DC 20003

Purpose of Disbursement
 EXP FOR TRAVEL

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D184
 Date of Disbursement
 06 / 14 / 2004

Amount of Each Disbursement this Period
 597.80

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

C. Full Name (Last, First, Middle Initial)
 MAIL BOX ETC 1744

Mailing Address PO BOX 1744

City State Zip Code
 BOWIE MD 20721

Purpose of Disbursement
 Postage & Delivery

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D484
 Date of Disbursement
 06 / 01 / 2004

Amount of Each Disbursement this Period
 21.50

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

SUBTOTAL of Disbursements This Page (optional) ▶ **861.30**

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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. MWJ & ASSOCIATES

Mailing Address 12138 CENTRAL AVE STE 194

City MITCHELLVILLE State MD Zip Code 20721

Purpose of Disbursement
Accounting Services

Candidate Name

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

Category/
Type

Transaction ID: D169
Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

1500.00

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

Full Name (Last, First, Middle Initial)

B. NATIONAL DEMOCRATIC CLUB

Mailing Address 430 IVY ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Dues & political meals

Candidate Name

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

Category/
Type

Transaction ID: D491
Date of Disbursement

06 / 06 / 2004

Amount of Each Disbursement this Period

225.00

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

Full Name (Last, First, Middle Initial)

C. NATIONAL DEMOCRATIC CLUB

Mailing Address 430 IVY ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CATERING

Candidate Name

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

Category/
Type

Transaction ID: D172
Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

505.20

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

SUBTOTAL of Disbursements This Page (optional) ▶

2230.20

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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)
A. Northwest Airlines

Mailing Address PO Box 1908

City State Zip Code
Minot ND 58701

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D173
Date of Disbursement
06 / 04 / 2004

Amount of Each Disbursement this Period
1160.60
Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. CAROL PATTON

Mailing Address 12138 CENTRAL AVE

City State Zip Code
MITCHELVILLE MD 20721

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D638
Date of Disbursement
06 / 11 / 2004

Amount of Each Disbursement this Period
100.00
Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. CAROL PATTON

Mailing Address 12138 CENTRAL AVE

City State Zip Code
MITCHELVILLE MD 20721

Purpose of Disbursement
TRAVEL REIMB

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D154
Date of Disbursement
05 / 31 / 2004

Amount of Each Disbursement this Period
302.00
Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1562.60

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

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. SAWICKI & SONS

Mailing Address 1521 W. LAFAYETTE ST

City Detroit State MI Zip Code 48216

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D177

Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

3455.00

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

Full Name (Last, First, Middle Initial)

B. JOE SEGAL

Mailing Address 6036 RICHMOND HWY

City ALEXANDRIA State VA Zip Code 22303

Purpose of Disbursement
Travel Expense Reimbursement

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D183

Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

260.00

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

Full Name (Last, First, Middle Initial)

C. RINIA SHELBY

Mailing Address 12138 CENTRAL AVE

City MITCHELLVILLE State MD Zip Code 20721

Purpose of Disbursement
OFFICE EXP AND TRAVEL DISB

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D175

Date of Disbursement

06 / 21 / 2004

Amount of Each Disbursement this Period

2405.67

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

SUBTOTAL of Disbursements This Page (optional) ▶

6120.67

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

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 401 E. Safari Pkwy.

City Grand Prairie State TX Zip Code 75050

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D178

Date of Disbursement

06 / 24 / 2004

Amount of Each Disbursement this Period

530.10

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

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address ROUTE 197 SOUTH BLDG 2

City BOWIE State MD Zip Code 20716

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D179

Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

460.01

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

Full Name (Last, First, Middle Initial)

C. STATE BAR OF MICHIGAN

Mailing Address 308 TOWNSEND ST

City LANSING State MI Zip Code 48933

Purpose of Disbursement
Dues

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D182

Date of Disbursement

06 / 02 / 2004

Amount of Each Disbursement this Period

267.50

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

SUBTOTAL of Disbursements This Page (optional) ▶

1266.61

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

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)
A. THE FAIRLANE CLUB

Mailing Address 5000 FAIRLANE WOODS DRIVE

City DEARBORN State MI Zip Code 48126

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: D181
Date of Disbursement
06 / 28 / 2004

Amount of Each Disbursement this Period
720.88

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

Full Name (Last, First, Middle Initial)
B. THE FOUR POINTS SHERATON

Mailing Address 7353 South Cicero Avenue

City Chicago State IL Zip Code 60628

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: D184
Date of Disbursement
06 / 31 / 2004

Amount of Each Disbursement this Period
273.46

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

Full Name (Last, First, Middle Initial)
C. The Palm Restaurant

Mailing Address 1225 19th Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Meals

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: D493
Date of Disbursement
06 / 04 / 2004

Amount of Each Disbursement this Period
400.05

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

SUBTOTAL of Disbursements This Page (optional) ▶ **1394.39**

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)

A. The UPS Store

Mailing Address 1220 L Street, NW, #100

City Washington State DC Zip Code 20005

Purpose of Disbursement
Delivery

Candidate Name

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

Category/
Type

Transaction ID: D509
Date of Disbursement

06 / 14 / 2004

Amount of Each Disbursement this Period

20.14

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

Full Name (Last, First, Middle Initial)

B. TOP VALUE

Mailing Address 21990 West 8 Mile Road

City Southfield State MI Zip Code 48075

Purpose of Disbursement
AUTO EXP FOR LOCAL TRAVEL

Candidate Name

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

Category/
Type

Transaction ID: D186
Date of Disbursement

04 / 29 / 2004

Amount of Each Disbursement this Period

627.70

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

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 2345 Crystal Drive

City Arlington State VA Zip Code 22202

Purpose of Disbursement
AIRFARE

Candidate Name

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

Category/
Type

Transaction ID: D176
Date of Disbursement

06 / 07 / 2004

Amount of Each Disbursement this Period

361.70

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

SUBTOTAL of Disbursements This Page (optional) ▶

1009.63

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)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)
A. US POSTMASTER

Mailing Address 800 K Street NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D180
Date of Disbursement

06 / 21 / 2004

Amount of Each Disbursement this Period

470.67

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

Full Name (Last, First, Middle Initial)
B. MARK WATSON

Mailing Address 110 D ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D610
Date of Disbursement

06 / 11 / 2004

Amount of Each Disbursement this Period

100.00

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

Full Name (Last, First, Middle Initial)
C. MARK WATSON

Mailing Address 110 D ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D171
Date of Disbursement

06 / 21 / 2004

Amount of Each Disbursement this Period

902.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

1472.67

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)

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

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name (Last, First, Middle Initial)
A. MARK WATSON

Mailing Address 110 D ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D636
Date of Disbursement

06 / 17 / 2004

Amount of Each Disbursement this Period

500.00

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

Full Name (Last, First, Middle Initial)
B. Matthew Williams

Mailing Address 14906 Jensford Court

City Bowie State MD Zip Code 20716

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D407
Date of Disbursement

04 / 15 / 2004

Amount of Each Disbursement this Period

500.00

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

Full Name (Last, First, Middle Initial)
C. Matthew Williams

Mailing Address 14906 Jensford Court

City Bowie State MD Zip Code 20716

Purpose of Disbursement
Travel Expense Reimbursement

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D627
Date of Disbursement

06 / 16 / 2004

Amount of Each Disbursement this Period

100.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

1100.00

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

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NAME OF COMMITTEE (In Full)
 Friends of John Conyers

Full Name (Last, First, Middle Initial)
 A. Matthew Williams

Mailing Address 14906 Jensford Court

City State Zip Code
 Bowie MD 20716

Purpose of Disbursement
 Travel Expense Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
 State: District

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D628
 Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

100.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

100.00

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

55981.32

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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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 checked="" type="checkbox"/>	20b	<input checked="" type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
 Friends of John Conyers

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

Mailing Address 591 REDWOOD HWY BUILDING 4000

City State Zip Code
 MILL VALLEY CA 94941

Purpose of Disbursement
 Refund

Candidate Name

Office Sought: House Senate
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

Category/
 Type

Transaction ID: D488
 Date of Disbursement

04 / 19 / 2004

Amount of Each Disbursement this Period

164.04

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

SUBTOTAL of Disbursements This Page (optional) ▶

164.04

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

164.04

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)
Friends of John Conyers

Full Name (Last, First, Middle Initial)
A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution: Excess campaign funds

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type

Transaction ID: D157
Date of Disbursement
06 / 15 / 2004

Amount of Each Disbursement this Period
15000.00

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

Full Name (Last, First, Middle Initial)
B. DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMI

Mailing Address 430 S. CAPITOL STREET S.E.

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type

Transaction ID: D158
Date of Disbursement
06 / 25 / 2004

Amount of Each Disbursement this Period
1000.00

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

Full Name (Last, First, Middle Initial)
C. NAACP DETROIT BRANCH

Mailing Address 2990 East Grand Blvd.

City Detroit State MI Zip Code 48202

Purpose of Disbursement
Donation

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type

Transaction ID: D183
Date of Disbursement
06 / 15 / 2004

Amount of Each Disbursement this Period
1050.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ **17050.00**

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)
 Friends of John Conyers

Full Name (Last, First, Middle Initial)
 A. THE MASTERS COMMISSION SUMMER YOUTH PROGRAM

Mailing Address PO BOX 10193

City LANSING State MI Zip Code 48901

Purpose of Disbursement
 CONTRIBUTION TO YOUTH PROGRAM

Candidate Name

Office Sought: House
 Senate
 President
 State: District

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
 Type

Transaction ID: D185

Date of Disbursement

04 / 22 / 2004

Amount of Each Disbursement this Period

400.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

400.00

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

17450.00