

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than 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
Chrysler Service Contracts Inc. Political Support Cmte

ADDRESS (number and street) 1000 Chrysler Drive
CIMS #485-10-95
 Check if different than previously reported. (ACC)
Auburn Hills MI 48326

2. **FEC IDENTIFICATION NUMBER** C00043687
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 08 01 2009 through 08 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Douglas Brown

Signature of Treasurer Electronically Filed by Douglas Brown Date 09 15 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Chrysler Service Contracts Inc. Political Support Cmte

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		463952.61
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	626886.61									
(c) Total Receipts (from Line 19)	2000.00	179567.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	628886.61	643519.61								
7. Total Disbursements (from Line 31)	507879.00	522512.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	121007.61	121007.61								
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									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Chrysler Service Contracts Inc. Political Support Cmte

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	44450.00
(ii) Unitemized	0.00	132117.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	176567.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	176567.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	2000.00	3000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	2000.00	179567.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2000.00	179567.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	5848.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	5848.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-3000.00	7500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	27579.00	27914.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	27579.00	27914.00
29. Other Disbursements.....	483300.00	481250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	507879.00	522512.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	507879.00	522512.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	0.00	176567.00
34. Total Contribution Refunds (from Line 28(d))	27579.00	27914.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-27579.00	148653.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	5848.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	5848.00

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

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

FOR LINE NUMBER: PAGE 7 / 106

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.

Full Name (Last, First, Middle Initial)
Earl Pomeroy for Congress

Mailing Address Post Office Box 9336

City State Zip Code
Fargo ND 58106

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 7 / 2 0 0 9

Transaction ID: F2EACEFFB559484EAAF

Amount of Each Receipt this Period

1000.00

Refund 2/13/2009 contribu-
tion

B.

Full Name (Last, First, Middle Initial)
Principles Exalt a Nation Political Action Committee

Mailing Address PO Box 1131

City State Zip Code
Anderson IN 46015

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 7 / 2 0 0 9

Transaction ID: B5C6B8AA2795D0C6115

Amount of Each Receipt this Period

1000.00

Refund 2/12/2009 contribu-
tion

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

<p>A. Full Name (Last, First, Middle Initial) Crowley for Congress</p> <p>Mailing Address 84-56 Grand Avenue</p> <p>City Elmhurst State NY Zip Code 11373</p> <p>Purpose of Disbursement Void 3/28/08 contribution to G08</p> <p>Candidate Name Joseph Crowley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 3010E4C871FA4BC35B5</p> <p>Date of Disbursement MM / DD / YYYY 08 / 10 / 2009</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>Category/Type 011</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Sherrod Brown</p> <p>Mailing Address PO Box 76187 Suite 800</p> <p>City Washington State DC Zip Code 20013</p> <p>Purpose of Disbursement Void - 2/13/2009 contribution</p> <p>Candidate Name Sherrod Brown</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 8314DEF67BF1A4C2F1A</p> <p>Date of Disbursement MM / DD / YYYY 08 / 19 / 2009</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>Category/Type 011</p>
<p>C. Full Name (Last, First, Middle Initial) Voinovich for Senate Committee</p> <p>Mailing Address 865 Macon Alley</p> <p>City Columbus State OH Zip Code 43206</p> <p>Purpose of Disbursement Void - 1/12/2009 Contribution</p> <p>Candidate Name George V. Voinovich</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 516B73C8EBFB0CE68C1</p> <p>Date of Disbursement MM / DD / YYYY 08 / 19 / 2009</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>Category/Type 011</p>

SUBTOTAL of Disbursements This Page (optional) ►

-3000.00

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

-3000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Paul Alcala Mailing Address 4633 Goodison Place Dr City Rochester State MI Zip Code 48306-1648 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-11 Date of Disbursement 08 / 31 / 2009	Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) Alan J. Amici Mailing Address 6225 North Rochester Road City Rochester Hills State MI Zip Code 48306-3454 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-16 Date of Disbursement 08 / 31 / 2009	Amount of Each Disbursement this Period 50.00
C.	Full Name (Last, First, Middle Initial) Richard Anderson Mailing Address 401 Kingsbury Ave City Dearborn State MI Zip Code 48128-1581 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-19 Date of Disbursement 08 / 31 / 2009	Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional) ▶	134.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Margaret J. Andresen	Transaction ID: 20090728-21 Date of Disbursement																			
	Mailing Address 1352 Timber Ridge Court	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
	City Milford State MI Zip Code 48380-3664	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	<table border="1"><tr><td>34.00</td></tr></table>	34.00																		
34.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	010 Category/ Type																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

B.	Full Name (Last, First, Middle Initial) David A. Andreski	Transaction ID: 20090728-22 Date of Disbursement																			
	Mailing Address 9346 Denton Hill	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
	City Fenton State MI Zip Code 48430-8404	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	<table border="1"><tr><td>34.00</td></tr></table>	34.00																		
34.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	010 Category/ Type																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

C.	Full Name (Last, First, Middle Initial) Timothy W. Anness	Transaction ID: 20090728-24 Date of Disbursement																			
	Mailing Address 2769 Braeburn	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
	City Rochester Hills State MI Zip Code 48309-1937	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	<table border="1"><tr><td>84.00</td></tr></table>	84.00																		
84.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	010 Category/ Type																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>152.00</td></tr></table>	152.00
152.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Daniela Antovski Mailing Address 57279 Breckenridge City Washington Twp. State MI Zip Code 48094-3593 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-27 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00
B.	Full Name (Last, First, Middle Initial) Mark R. Arcori Mailing Address 1351 Arbor Creek Drive City Rochester Hills State MI Zip Code 48306-3701 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-30 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 42.00
C.	Full Name (Last, First, Middle Initial) Craig Arnold Mailing Address 1055 Puritan Ave City Birmingham State MI Zip Code 48009-4638 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-31 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 35.00

SUBTOTAL of Disbursements This Page (optional)	111.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Rakuya W. Artis <hr/> Mailing Address 912 Philadelphia Dr. <hr/> City Kokomo State IN Zip Code 46902 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	Transaction ID: 20090728-32 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 34.00		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 010	
		Full Name (Last, First, Middle Initial) Sharon Atkinson Osmond <hr/> Mailing Address 5671 N. Licernois <hr/> City Rochester State MI Zip Code 48307-4 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	
B. Full Name (Last, First, Middle Initial) Sharon Atkinson Osmond <hr/> Mailing Address 5671 N. Licernois <hr/> City Rochester State MI Zip Code 48307-4 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	Transaction ID: 20090728-34 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 50.00		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 010	
		Full Name (Last, First, Middle Initial) Milja Bakmaz Mitkoski <hr/> Mailing Address 2578 Ormsby Drive <hr/> City Sterling Heights State MI Zip Code 48310-6971 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	
C. Full Name (Last, First, Middle Initial) Milja Bakmaz Mitkoski <hr/> Mailing Address 2578 Ormsby Drive <hr/> City Sterling Heights State MI Zip Code 48310-6971 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	Transaction ID: 20090728-42 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 42.00		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 010	

SUBTOTAL of Disbursements This Page (optional)	▶	126.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Freda Bane-Prastitis <hr/> Mailing Address 6153 Lake Waldon Dr <hr/> City Clarkston State MI Zip Code 48346-2293 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-45 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Sean A. Bannon <hr/> Mailing Address 4003 Charing Cross <hr/> City Bloomfield Hills State MI Zip Code 48304-3103 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-46 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Noel R. Baril <hr/> Mailing Address 43 Oakdale Boulevard <hr/> City Pleasant Ridge State MI Zip Code 48069-1033 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-48 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

252.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Christine L. Barman	Transaction ID: 20090728-50 Date of Disbursement
	Mailing Address 820 Brighton Lake Road	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Brighton State MI Zip Code 48116-1727	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of 6/28/09 Contribution	<input type="text" value="40.00"/>
	Candidate Name	<input type="text" value="010"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Howard S. Baron, Jr.	Transaction ID: 20090728-52 Date of Disbursement
	Mailing Address 1355 Juniper Lane	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Bloomfield State MI Zip Code 48322	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of 6/28/09 Contribution	<input type="text" value="40.00"/>
	Candidate Name	<input type="text" value="010"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) William Barrett	Transaction ID: 20090728-54 Date of Disbursement
	Mailing Address 5742 Templar Crossing	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City West Bloomfield State MI Zip Code 48302	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of 6/28/09 Contribution	<input type="text" value="34.00"/>
	Candidate Name	<input type="text" value="010"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="114.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Stephen J. Bartoli <hr/> Mailing Address 850 Great Oaks Drive <hr/> City Bloomfield Twp. State MI Zip Code 48304-1923 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-57 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 208.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Bruce Baumbach <hr/> Mailing Address 6334 Mission Dr <hr/> City West Bloomfield State MI Zip Code 48324-1394 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-62 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Annette Bayne <hr/> Mailing Address 117 Chamberlain St <hr/> City Lake Orion State MI Zip Code 48362-2327 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-65 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	342.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Travis D. Bechtel <hr/> Mailing Address 10020 Arbor Lane <hr/> City Goodrich State MI Zip Code 48438-9463 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-69 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	State: District:
B. Full Name (Last, First, Middle Initial) David Benedict <hr/> Mailing Address 2132 Wentworth Dr <hr/> City Rochester Hills State MI Zip Code 48307-4278 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-74 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	State: District:
C. Full Name (Last, First, Middle Initial) Cyril Benitah <hr/> Mailing Address 6171 Lantern Ln <hr/> City Bloomfield Hills State MI Zip Code 48301-1628 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-76 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

102.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Larry Benitz <hr/> Mailing Address 8550 Canal Rd <hr/> City Sterling Heights State MI Zip Code 48314-1603 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-77 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) James E. Berger <hr/> Mailing Address 4854 Rolling Ridge <hr/> City West Bloomfield State MI Zip Code 48323-3349 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-83 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 83.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Brian Berlinger <hr/> Mailing Address 13315 Sioux Trl <hr/> City Carmel State IN Zip Code 46033-8865 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-84 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 42.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	159.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Jan Bertsch Mailing Address 8621 Bunton Rd City Willis State MI Zip Code 48191-9740 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-86 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 125.00
B.	Full Name (Last, First, Middle Initial) Aleksy V. Beylin Mailing Address 4307 Stoddard City West Bloomfield State MI Zip Code 48323-3260 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-90 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
C.	Full Name (Last, First, Middle Initial) Richard Bieszki Mailing Address 3280 Barnaby Dr City Shelby Twp State MI Zip Code 48316-4806 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-93 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00

SUBTOTAL of Disbursements This Page (optional)	225.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) D. Scott Bittinger <hr/> Mailing Address 14116 Moffett <hr/> City Fenton State MI Zip Code 48430-3262 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-95 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ronald Bizzocchi <hr/> Mailing Address 2093 Hickory Leaf Dr <hr/> City Rochester Hills State MI Zip Code 48309-3729 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-96 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Michael Boar <hr/> Mailing Address 3702 Sleepy Fox Drive <hr/> City Rochester Hills State MI Zip Code 48309-4517 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-103 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	102.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Richard Bobosky	Transaction ID: 20090728-104	
	Mailing Address 22560 Darcey Court	Date of Disbursement 08 / 31 / 2009	
	City Novi State MI Zip Code 48374	Amount of Each Disbursement this Period 35.00	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B.	Full Name (Last, First, Middle Initial) Kevin G. Bolyard	Transaction ID: D1CBC41B3BBDB998874	
	Mailing Address 11001 88th Street	Date of Disbursement 08 / 31 / 2009	
	City Pleasant Prairie State WI Zip Code 53158-1313	Amount of Each Disbursement this Period 50.00	
	Purpose of Disbursement Refund of 6/28/09 contribution Candidate Name	010 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C.	Full Name (Last, First, Middle Initial) Paul A. Bonkowski	Transaction ID: 20090728-110	
	Mailing Address 2847 Creek Bend Drive	Date of Disbursement 08 / 31 / 2009	
	City Troy State MI Zip Code 48098-2381	Amount of Each Disbursement this Period 42.00	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	127.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Larry E. Bosley Mailing Address 9328 Oakmont Drive City Clarkston State MI Zip Code 48348-3573 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-114 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) George F. Bowman, Jr. Mailing Address 14745 Rosemary City Detroit State MI Zip Code 48213 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-119 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00
C.	Full Name (Last, First, Middle Initial) John T. Bozzella Mailing Address 2103 Virginia Avenue City McLean State VA Zip Code 22101-4942 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-121 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 200.00

SUBTOTAL of Disbursements This Page (optional)	284.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Michael Brown	Transaction ID: 20090728-131 Date of Disbursement 08 / 31 / 2009
	Mailing Address 2820 Oakbrooke Ln	Amount of Each Disbursement this Period 83.00
	City West Bloomfield State MI Zip Code 48323-3554	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paul A. Bryant	Transaction ID: 20090728-139 Date of Disbursement 08 / 31 / 2009
	Mailing Address 48119 Tucks Lane	Amount of Each Disbursement this Period 34.00
	City Macomb Township State MI Zip Code 48044-2046	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Roger K. Buck	Transaction ID: 20090728-143 Date of Disbursement 08 / 31 / 2009
	Mailing Address 31719 Glencoe	Amount of Each Disbursement this Period 42.00
	City Beverly Hills State MI Zip Code 48025-5621	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	159.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Rita A. Burns Mailing Address 34015 Oakland City Farmington State MI Zip Code 48335-3450 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-149 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 50.00 Category/Type 010
B.	Full Name (Last, First, Middle Initial) Larry F. Caltrider Mailing Address 43875 Cadbury City Clinton Twp State MI Zip Code 48038-1442 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-160 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 34.00 Category/Type 010
C.	Full Name (Last, First, Middle Initial) Paul E. Camilleri Mailing Address 29818 Hoy City Livonia State MI Zip Code 48154-3704 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-162 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 34.00 Category/Type 010

SUBTOTAL of Disbursements This Page (optional) ▶	118.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Antonio E. Carino Mailing Address 48394 Rosewood Drive City State Zip Code Shelby Twp MI 48315-4069 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-171 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 100.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Theodora J. Casasanta Mailing Address 2784 Antrim Court City State Zip Code Oakland Township MI 48306-4902 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-177 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 40.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Nestor Cerame Mailing Address 468 Bolinger St City State Zip Code Rochester Hills MI 48307-2815 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-180 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 34.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	174.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Diana A. Cernis Mailing Address 30407 Huntsman Dr. W City Farmington Hills State MI Zip Code 48331-1393 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-181 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 34.00 010 Category/Type
B.	Full Name (Last, First, Middle Initial) Christopher R. Chandler Mailing Address 5350 Keswick Court City Oakland Township State MI Zip Code 48306-4918 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-186 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 50.00 010 Category/Type
C.	Full Name (Last, First, Middle Initial) Joseph L. Chao Mailing Address 4951 Crestone Way City Rochester State MI Zip Code 48306-1682 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-187 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 50.00 010 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	134.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Richard L. Clark Mailing Address 6405 Waldon Woods Drive City Clarkston State MI Zip Code 48346-2484 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-202 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 34.00 010 Category/Type
B.	Full Name (Last, First, Middle Initial) Michael D. Colburn Mailing Address 43089 Pointe Drive City Clinton Township State MI Zip Code 48038-4838 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-207 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 34.00 010 Category/Type
C.	Full Name (Last, First, Middle Initial) Richard E. Collins Mailing Address 3896 Ranya City Commerce State MI Zip Code 48382-4458 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-210 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 84.00 010 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	152.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Amanda L. Conti-Duhaime <hr/> Mailing Address 1022 Bishop <hr/> City State Zip Code Grosse Pte Park MI 48230-1448 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-215 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Douglas F. Cook <hr/> Mailing Address 4150 Colonial Drive <hr/> City State Zip Code Royal Oak MI 48073-6472 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-218 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Joseph R. Cook <hr/> Mailing Address 7113 Hickory Hollow Cl. <hr/> City State Zip Code Clarkston MI 48348-2819 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-217 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 42.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	126.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) William A. Cook <hr/> Mailing Address 1912 Watson Circle <hr/> City Rochester State MI Zip Code 48306 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-216 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) Robert D. Cooper <hr/> Mailing Address 4765 Westlawn Parkway <hr/> City Waterford State MI Zip Code 48328-3477 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-221 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 34.00
C.	Full Name (Last, First, Middle Initial) Brian Daenzer <hr/> Mailing Address 2988 Woodland Dr <hr/> City Metamora State MI Zip Code 48455-9794 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-247 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional) ▶	118.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Edward Daniels, Jr.	Transaction ID: 20090728-250 Date of Disbursement 08 / 31 / 2009
	Mailing Address 25637 Hickory Hill	Amount of Each Disbursement this Period 50.00
	City Southfield State MI Zip Code 48033	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Mike Danna	Transaction ID: 20090728-252 Date of Disbursement 08 / 31 / 2009
	Mailing Address 43873 Leelanau Trl	Amount of Each Disbursement this Period 34.00
	City Clinton Twp State MI Zip Code 48038-4411	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Fred T. Davis	Transaction ID: 20090728-256 Date of Disbursement 08 / 31 / 2009
	Mailing Address 3764 Eaton Gate Lane	Amount of Each Disbursement this Period 34.00
	City Auburn Hills State MI Zip Code 48326-3894	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

118.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Joseph S. Dehner	Transaction ID: 20090728-267 Date of Disbursement 08 / 31 / 2009
	Mailing Address 4836 Bryn Mawr	
	City Bloomfield State MI Zip Code 48301-1002	Amount of Each Disbursement this Period 275.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Carol A. DeSantis	Transaction ID: 20090728-275 Date of Disbursement 08 / 31 / 2009
	Mailing Address 4880 Dow Ridge	
	City Orchard Lake Villa State MI Zip Code 48324-2329	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) MANDEEP DHALI WAL	Transaction ID: 20090728-280 Date of Disbursement 08 / 31 / 2009
	Mailing Address 4089 Blue Heron Dr	
	City Auburn Hills State MI Zip Code 48326-1876	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

375.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 33 / 106

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Douglas J. Doran <hr/> Mailing Address 971 Indian Ridge <hr/> City Lake Orion State MI Zip Code 48362-1574 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-302 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 60.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Lynn Drinan <hr/> Mailing Address 36073 Martin St <hr/> City Livonia State MI Zip Code 48154-5276 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-310 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sonya E. DuMoulin <hr/> Mailing Address 15194 Towering Oaks <hr/> City Shelby Township State MI Zip Code 48315-1634 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-316 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	160.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 34 / 106

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) James R. Dyckman			Transaction ID: 20090728-322	
	Mailing Address 2368 Browning Drive			Date of Disbursement MM / DD / YYYY 08 / 31 / 2009	
	City Lake Orion	State MI	Zip Code 48360-1810	Amount of Each Disbursement this Period 50.00	
	Purpose of Disbursement Refund of 6/28/09 Contribution		Category/ Type 010		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
B.	Full Name (Last, First, Middle Initial) Ronald J. Elder			Transaction ID: 20090728-329	
	Mailing Address 2460 Pebble Beach Drive			Date of Disbursement MM / DD / YYYY 08 / 31 / 2009	
	City Oakland	State MI	Zip Code 48363-2445	Amount of Each Disbursement this Period 83.00	
	Purpose of Disbursement Refund of 6/28/09 Contribution		Category/ Type 010		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
C.	Full Name (Last, First, Middle Initial) Sarah Elliott			Transaction ID: 20090728-331	
	Mailing Address 5621 N Livernois Rd			Date of Disbursement MM / DD / YYYY 08 / 31 / 2009	
	City Rochester	State MI	Zip Code 48306-2535	Amount of Each Disbursement this Period 34.00	
	Purpose of Disbursement Refund of 6/28/09 Contribution		Category/ Type 010		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					

SUBTOTAL of Disbursements This Page (optional)	167.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Dina Ellis Rochkind	Transaction ID: 20090728-332 Date of Disbursement
	Mailing Address 7012 Exeter Road	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Bethesda State MD Zip Code 20814	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of 6/28/09 Contribution	<input type="text" value="50.00"/>
	Candidate Name	<input type="text" value="010"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Eric Emmer	Transaction ID: 20090728-334 Date of Disbursement
	Mailing Address 125 Aspinwall	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Troy State MI Zip Code 48098	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of 6/28/09 Contribution	<input type="text" value="34.00"/>
	Candidate Name	<input type="text" value="010"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mark F. Engelsdorfer	Transaction ID: 20090728-335 Date of Disbursement
	Mailing Address 4468 Timber Ridge Drive	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Bruce Township State MI Zip Code 48065-2213	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of 6/28/09 Contribution	<input type="text" value="84.00"/>
	Candidate Name	<input type="text" value="010"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="168.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Judson B. Estes <hr/> Mailing Address 1000 Chrysler Dr. 950-00-00 <hr/> City Auburn Hills State MI Zip Code 48326 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-340 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	State: District:
B. Full Name (Last, First, Middle Initial) Frederick W. Fabian, III <hr/> Mailing Address 1823 Cedar Hill Drive <hr/> City Royal Oak State MI Zip Code 48067-1004 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-342 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	State: District:
C. Full Name (Last, First, Middle Initial) Frank A. Faga <hr/> Mailing Address 912 Westwood <hr/> City Birmingham State MI Zip Code 48009-1162 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-344 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 100.00
	010 Category/ Type
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	168.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

<p>A. Full Name (Last, First, Middle Initial) Brandon Faurote</p> <p>Mailing Address 5988 Cobb Creek</p> <p>City Rochester State MI Zip Code 48306</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-349 Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>010 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Valeria Fernandes</p> <p>Mailing Address 2332 Ulster Rd</p> <p>City Rochester Hills State MI Zip Code 48309-2039</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-355 Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 42.00</p> <p>010 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Lawrence J. Ferranto</p> <p>Mailing Address 205 Rodman Road</p> <p>City Wilmington State DE Zip Code 19809-2941</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-358 Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 34.00</p> <p>010 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

126.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

<p>A. Full Name (Last, First, Middle Initial) Michael J. Fisher</p> <p>Mailing Address 8349 Woodspur Drive</p> <p>City Commerce Twp. State MI Zip Code 48382-4465</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-367</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="34.00"/></p> <p>Category/Type: <input type="text" value="010"/></p>
<p>B. Full Name (Last, First, Middle Initial) Michael Flattery</p> <p>Mailing Address 724 Brookwood Ln E</p> <p>City Rochester Hills State MI Zip Code 48309-1542</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-368</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="42.00"/></p> <p>Category/Type: <input type="text" value="010"/></p>
<p>C. Full Name (Last, First, Middle Initial) Dante Flores</p> <p>Mailing Address PO Box 734 Apt. # 40</p> <p>City Perrysburg State OH Zip Code 43552</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-369</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="42.00"/></p> <p>Category/Type: <input type="text" value="010"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Robert Florian Mailing Address 30337 Cheviot Hills Dr City Franklin State MI Zip Code 48025-1517 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-370 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) Francis M. Fodale Mailing Address 3682 Deer Springs Drive City Oakland Township State MI Zip Code 48306-4752 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-371 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
C.	Full Name (Last, First, Middle Initial) Edward J. Ford, Jr. Mailing Address 2820 Downderry Court City Bloomfield Hills State MI Zip Code 48304-1904 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-374 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00

SUBTOTAL of Disbursements This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Michael Forker Mailing Address 25725 Lochmoor Ln City Novi State MI Zip Code 48374 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-377 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 34.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Shelia Franklin Mailing Address PO Box 1506 City Fenton State MO Zip Code 63026 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-383 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 50.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Richard W. Friday Mailing Address 4487 Hycliffe Drive City Troy State MI Zip Code 48098-4428 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-386 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 42.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	126.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) James B. Furst Mailing Address 4450 Berkshire Road City Royal Oak State MI Zip Code 48073-6204 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-389 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00
B.	Full Name (Last, First, Middle Initial) Michael G. Gamache Mailing Address 28 Bayview Drive City Swampscott State MA Zip Code 01907-2627 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-393 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00
C.	Full Name (Last, First, Middle Initial) Scott R. Garberding Mailing Address 1016 Bishop City Grosse Pointe Park State MI Zip Code 48230 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-395 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 60.00

SUBTOTAL of Disbursements This Page (optional)	128.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Andrew L. Garibian <hr/> Mailing Address 2129 Nickelby Drive <hr/> City Shelby Twp State MI Zip Code 48316-5585 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-398 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Myrlene Gelibert-Bush <hr/> Mailing Address 2601 Hunter Heights Drive <hr/> City West Bloomfield State MI Zip Code 48324-2130 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-407 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Albert J. George <hr/> Mailing Address 1325 East Lincoln <hr/> City Birmingham State MI Zip Code 48009-7194 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-409 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

218.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) James C. Gholston, Jr. Mailing Address 1746 Delancy Court City Canton State MI Zip Code 48188-8022 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-410 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) Robert T. Gillard Mailing Address 11176 33 Mile Road City Romeo State MI Zip Code 48065-3710 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-414 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00
C.	Full Name (Last, First, Middle Initial) Frederick J. Goedel, Jr. Mailing Address 2048 Hickory Trail City Rochester Hills State MI Zip Code 48309-4506 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-421 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 225.00

SUBTOTAL of Disbursements This Page (optional)	309.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.

Full Name (Last, First, Middle Initial)
Ross G. Good

Transaction ID: 20090728-426
Date of Disbursement

Mailing Address 2117 S Street #204

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	9

City Sacramento State CA Zip Code 95816

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
Refund of 6/28/09 Contribution

010

Category/Type

Candidate Name

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

B.

Full Name (Last, First, Middle Initial)
William A. Grabowski

Transaction ID: 20090728-434
Date of Disbursement

Mailing Address 42389 Crestview Circle

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	9

City Northville State MI Zip Code 48168-3266

Amount of Each Disbursement this Period

84.00

Purpose of Disbursement
Refund of 6/28/09 Contribution

010

Category/Type

Candidate Name

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

C.

Full Name (Last, First, Middle Initial)
Byron M. Green

Transaction ID: 20090728-442
Date of Disbursement

Mailing Address PO Box 214257

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	9

City Auburn Hills State MI Zip Code 48321

Amount of Each Disbursement this Period

208.00

Purpose of Disbursement
Refund of 6/28/09 Contribution

010

Category/Type

Candidate Name

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

SUBTOTAL of Disbursements This Page (optional)

342.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Joseph Guertin <hr/> Mailing Address 24192 Westmont Dr <hr/> City Novi State MI Zip Code 48374-3660 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-450 Date of Disbursement MM / DD / YYYY 08 / 31 / 2009
	Amount of Each Disbursement this Period 84.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) David R. Gurke <hr/> Mailing Address 2360 Canyon Ridge Drive <hr/> City White Lake State MI Zip Code 48383-2157 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-452 Date of Disbursement MM / DD / YYYY 08 / 31 / 2009
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mark D. Hall <hr/> Mailing Address 1527 Biggers Drive <hr/> City Rochester Hills State MI Zip Code 48309-1613 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-458 Date of Disbursement MM / DD / YYYY 08 / 31 / 2009
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

168.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mike Hall</p> <p>Mailing Address 56 Savannah Cr.</p> <p>City Union Grove State AL Zip Code 35175</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-459</p> <p>Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 84.00</p> <p>010 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Sharon D. Harden</p> <p>Mailing Address 36635 Woodward Ave</p> <p>City Birmingham State MI Zip Code 48009</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-472</p> <p>Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 34.00</p> <p>010 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Brian D. Harlow</p> <p>Mailing Address 2689 North 900 W</p> <p>City Tipton State IN Zip Code 46072-8604</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-475</p> <p>Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>010 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

168.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Jeffrey A. Harper <hr/> Mailing Address 868 Boutell <hr/> City Grand Blanc State MI Zip Code 48439 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-477 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Michael J. Heard <hr/> Mailing Address 22169 Arbor Lane <hr/> City Farmington Hills State MI Zip Code 48336-5119 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-485 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 35.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Joann C. Heck <hr/> Mailing Address 62557 Dell Court <hr/> City Washington State MI Zip Code 48094-1013 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-486 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

119.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Darren J. Hegarty <hr/> Mailing Address 9664 Kingston Pointe Drive <hr/> City Clarkston State MI Zip Code 48348-4194 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-490 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	State: District:
B. Full Name (Last, First, Middle Initial) Kathleen M. Hennessey <hr/> Mailing Address 2326 Riviera Drive <hr/> City Vienna State VA Zip Code 22181 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-498 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	010 Category/ Type
	State: District:
C. Full Name (Last, First, Middle Initial) Aringtor Hicks <hr/> Mailing Address 38748 Crescent Court <hr/> City Wayne State MI Zip Code 48184-1080 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-503 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

118.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Glenn H. Hoffrichter <hr/> Mailing Address 30080 Rosemond Drive <hr/> City Franklin State MI Zip Code 48025-2125 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-511 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 35.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Christopher P. Hogan <hr/> Mailing Address 39147 Citation Pl #38202 <hr/> City Farmington Hills State MI Zip Code 48331 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-512 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 83.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Robert J. Hollingsworth <hr/> Mailing Address 54251 Salem Drive <hr/> City Shelby Township State MI Zip Code 48316-1371 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-514 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 41.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

159.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 50 / 106

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Ronald Horne <hr/> Mailing Address 8447 Peaceful Vly <hr/> City Clarkston State MI Zip Code 48348-2671 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">010</div> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-521 Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: inline-block;">08</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">31</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">2009</div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">50.00</div>
B.	Full Name (Last, First, Middle Initial) Christopher E. Humphrey <hr/> Mailing Address 1815 Jason Circle <hr/> City Rochester Hills State MI Zip Code 48306-3639 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">010</div> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-528 Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: inline-block;">08</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">31</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">2009</div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">34.00</div>
C.	Full Name (Last, First, Middle Initial) Robert A. Hurd <hr/> Mailing Address 15730 Brookside <hr/> City Belleville State MI Zip Code 48111-5241 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">010</div> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-533 Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: inline-block;">08</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">31</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">2009</div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">34.00</div>

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 5px; display: inline-block;">118.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> </div>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Shawn Jeffers Mailing Address 21449 Rome Dr City Macomb State MI Zip Code 48044-1312 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-546 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) Al Johnson Mailing Address 14308 Northville Rd City Plymouth State MI Zip Code 48170-2521 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-551 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 42.00
C.	Full Name (Last, First, Middle Initial) Susan Johnstal Mailing Address 30651 Hickey Rd City Chesterfield State MI Zip Code 48051-1749 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-558 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional)	126.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

<p>A. Full Name (Last, First, Middle Initial) Darren Jonas</p> <p>Mailing Address 17523 Harbor Walk Dr</p> <p>City Cornelius State NC Zip Code 28031-5765</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-559</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="34.00"/></p> <p>Category/Type: <input type="text" value="010"/></p>
<p>B. Full Name (Last, First, Middle Initial) Kim H. Jones</p> <p>Mailing Address 4700 Paisley Court</p> <p>City West Bloomfield State MI Zip Code 48322-2230</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-561</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="125.00"/></p> <p>Category/Type: <input type="text" value="010"/></p>
<p>C. Full Name (Last, First, Middle Initial) Kyle Jones</p> <p>Mailing Address 4820 Wentworth</p> <p>City Troy State MI Zip Code 48098</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-560</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>Category/Type: <input type="text" value="010"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="209.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Renee B. Kahn <hr/> Mailing Address 4878 Clarkston Road <hr/> City Clarkston State MI Zip Code 48348-3867 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-570 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 45.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Gerald R. Karasinski, Jr. <hr/> Mailing Address 19488 Bainbridge <hr/> City Livonia State MI Zip Code 48152-1787 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-572 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Brenna C. Kaufman <hr/> Mailing Address 22440 Lange Street <hr/> City St. Clair Shores State MI Zip Code 48080-1350 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-574 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

129.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Raj Kawlra Mailing Address 1812 Lincolnshire Dr City Rochester Hills State MI Zip Code 48309-4530 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-578 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 42.00
B.	Full Name (Last, First, Middle Initial) David Kemp Mailing Address 11031 N Fenton Rd City Fenton State MI Zip Code 48430-9714 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-584 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00
C.	Full Name (Last, First, Middle Initial) Michael Kerbert Mailing Address 5622 Mycroft St City Eldersburg State MD Zip Code 21784 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-586 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional)	110.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

<p>A. Full Name (Last, First, Middle Initial) Brian King</p> <p>Mailing Address 23887 Wesley Dr</p> <p>City Farmington State MI Zip Code 48335-3354</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-592</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="34.00"/></p> <p>Category/Type: <input type="text" value="010"/></p>
<p>B. Full Name (Last, First, Middle Initial) Daniel R. King</p> <p>Mailing Address PO Box 112</p> <p>City Yale State MI Zip Code 48097-0112</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-590</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>Category/Type: <input type="text" value="010"/></p>
<p>C. Full Name (Last, First, Middle Initial) Mary A. Kirsch</p> <p>Mailing Address 5683 Exploration Drive</p> <p>City Commerce State MI Zip Code 48382-5134</p> <p>Purpose of Disbursement Refund of 6/28/09 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 20090728-596</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="42.00"/></p> <p>Category/Type: <input type="text" value="010"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="126.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Daniel C. Knott Mailing Address 5134 Lost Hickory Court City Clarkston State MI Zip Code 48348-2184 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-602 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 208.00
B.	Full Name (Last, First, Middle Initial) Mary P. Knowles Mailing Address 4299 Chicago Road City Warren State MI Zip Code 48092-1473 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-603 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 42.00
C.	Full Name (Last, First, Middle Initial) Lawrence J. Koenig Mailing Address 21 Reese Drive City Newark State DE Zip Code 19711-2351 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-606 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional)			284.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Ronald E. Kolka <hr/> Mailing Address 5757 Lochmoor Court <hr/> City Rochester Hills State MI Zip Code 48306-2351 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-608 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 125.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kelly Kyle <hr/> Mailing Address 8117 Reese Rd <hr/> City Clarkston State MI Zip Code 48348-2764 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-631 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Richard S. Lanski <hr/> Mailing Address 8103 Orchardview <hr/> City Romeo State MI Zip Code 48095-1345 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-640 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

193.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Frank E. Lasota <hr/> Mailing Address 22022 Camelot Court <hr/> City State Zip Code Beverly Hills MI 48025-3600 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-644 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) William Laveque, Jr. <hr/> Mailing Address 2802 Masefield Drive <hr/> City State Zip Code Bloomfield Townshi MI 48304-1947 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-645 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Robert E. Lee <hr/> Mailing Address 6365 Buckhorn Lake Road <hr/> City State Zip Code Highland MI 48357-2321 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-654 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 125.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

209.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Holly Leese <hr/> Mailing Address 1405 S Sashabaw Rd <hr/> City Ortonville State MI Zip Code 48462-9163 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-656 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 40.00
B.	Full Name (Last, First, Middle Initial) Daniel T. Leung <hr/> Mailing Address 1404 Olympia Drive <hr/> City Rochester Hills State MI Zip Code 48306-3740 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-661 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
C.	Full Name (Last, First, Middle Initial) Thomas P. Lindquist <hr/> Mailing Address 25710 Dundee Road <hr/> City Royal Oak State MI Zip Code 48067-3047 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-666 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00

SUBTOTAL of Disbursements This Page (optional)	140.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) William J. Little	Transaction ID: 20090728-667 Date of Disbursement 08 / 31 / 2009
	Mailing Address 11928 Steven	Amount of Each Disbursement this Period 34.00
	City Sterling Heights State MI Zip Code 48312	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) D. Michael Longpre	Transaction ID: 20090728-672 Date of Disbursement 08 / 31 / 2009
	Mailing Address 43965 Cranberry	Amount of Each Disbursement this Period 34.00
	City Canton State MI Zip Code 48187-1941	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Robert J. Longton	Transaction ID: 20090728-673 Date of Disbursement 08 / 31 / 2009
	Mailing Address 1398 Kentfield Drive	Amount of Each Disbursement this Period 42.00
	City Rochester State MI Zip Code 48307-6048	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

110.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.

Full Name (Last, First, Middle Initial)
Tamara N. Lott

Transaction ID: 20090728-674
Date of Disbursement

Mailing Address 4236 Calumet

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	9

City Rochester State MI Zip Code 48306-1463

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund of 6/28/09 Contribution

010
Category/ Type

34.00

Candidate Name

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

B.

Full Name (Last, First, Middle Initial)
Edward A. Luibrand

Transaction ID: 20090728-683
Date of Disbursement

Mailing Address 8831 Autumnglo

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	9

City Clarkston State MI Zip Code 48348-1601

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund of 6/28/09 Contribution

010
Category/ Type

34.00

Candidate Name

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

C.

Full Name (Last, First, Middle Initial)
Kelly Lynch

Transaction ID: 20090728-688
Date of Disbursement

Mailing Address 628 Bucknell Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	9

City Rochester Hills State MI Zip Code 48309-2541

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund of 6/28/09 Contribution

010
Category/ Type

84.00

Candidate Name

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

SUBTOTAL of Disbursements This Page (optional) ►

152.00

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Derek MacNeil Mailing Address 1544 Webster St City Birmingham State MI Zip Code 48009-7091 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-694 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00
B.	Full Name (Last, First, Middle Initial) Douglas S. Maddox Mailing Address 1851 Twin Lakes Blvd City Oxford State MI Zip Code 48371 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-696 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00
C.	Full Name (Last, First, Middle Initial) Arthur S. Marcantonio Mailing Address 2532 Norwood Road City Bloomfield Hills State MI Zip Code 48302-1157 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-703 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 42.00

SUBTOTAL of Disbursements This Page (optional)	110.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Christopher J. Mattingly	Transaction ID: 20090728-715 Date of Disbursement 08 / 31 / 2009
	Mailing Address 2329 Prestwick	Amount of Each Disbursement this Period 50.00
	City Troy State MI Zip Code 48098-5916	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Marcelene May	Transaction ID: 20090728-716 Date of Disbursement 08 / 31 / 2009
	Mailing Address 150 Bird Ave	Amount of Each Disbursement this Period 34.00
	City Birmingham State MI Zip Code 48009-2053	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) David G. Mazur	Transaction ID: 20090728-717 Date of Disbursement 08 / 31 / 2009
	Mailing Address 29986 Sugar Creek Court	Amount of Each Disbursement this Period 34.00
	City Chesterfield Towns State MI Zip Code 48047-5704	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

118.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Todd McCall <hr/> Mailing Address 6478 Marshall St <hr/> City Canton State MI Zip Code 48187-4794 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-723 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) James A. McDermott <hr/> Mailing Address 1242 National Avenue <hr/> City Rockford State IL Zip Code 61103-7140 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-727 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 42.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mark W. McDowell <hr/> Mailing Address 46945 Edgewater <hr/> City Macomb State MI Zip Code 48044-3597 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-730 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	126.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Margie S. McNally <hr/> Mailing Address 8400 Foldenauer Drive <hr/> City Howell State MI Zip Code 48843-7187 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-734 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) George E. Michetti <hr/> Mailing Address 780 Little Creek Drive <hr/> City Perrysburg State OH Zip Code 43551-6021 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-748 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Jordan R. Miller <hr/> Mailing Address 3720 Edinborough Drive <hr/> City Rochester Hills State MI Zip Code 48306-3684 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-757 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	118.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Warren Miller	Transaction ID: 20090728-755
	Mailing Address 9172 Lakebluff Dr	Date of Disbursement MM / DD / YYYY 08 / 31 / 2009
	City Clarkston State MI Zip Code 48348-4147	Amount of Each Disbursement this Period 125.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Eugene Mitchell	Transaction ID: 20090728-761
	Mailing Address 29779 Rutherland	Date of Disbursement MM / DD / YYYY 08 / 31 / 2009
	City Southfield State MI Zip Code 48076-5855	Amount of Each Disbursement this Period 42.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Patricia Mitchell	Transaction ID: 20090728-762
	Mailing Address 38568 Capetown Ct	Date of Disbursement MM / DD / YYYY 08 / 31 / 2009
	City Clinton Township State MI Zip Code 48038-3408	Amount of Each Disbursement this Period 34.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	201.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Reginald R. Modlin Mailing Address 797 Crestwood Lane City Rochester Hills State MI Zip Code 48309-1063 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-766 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) Kenneth Mondro Mailing Address 26727 Bridgewater Way City Brownstown State MI Zip Code 48134-8042 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-769 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00
C.	Full Name (Last, First, Middle Initial) Jessica Montoya Mailing Address 8609 Highgate Rd City Alexandria State VA Zip Code 22308-2322 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-770 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional)			118.00
TOTAL This Period (last page this line number only)			

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Karl Mortensen Mailing Address 2410 Regency Hills Dr City Shelby Twp State MI Zip Code 48316-2061 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-778 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) Kathryn A. Murrenus Mailing Address 30150 Ardmore City Farmington Hi State MI Zip Code 48334-2118 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-788 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 42.00
C.	Full Name (Last, First, Middle Initial) Anthony K. Nahas, Jr. Mailing Address 6344 Ridge Hollow Lane City Davisburg State MI Zip Code 48350-3649 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-796 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional)	126.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Gerald M. Nanni <hr/> Mailing Address 16235 Thames Ln <hr/> City Macomb State MI Zip Code 48042-6184 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-798 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 42.00
	010 Category/Type
	State: District:
B. Full Name (Last, First, Middle Initial) Robert A. Navaroli <hr/> Mailing Address 39135 Salem Drive <hr/> City Clinton Twp State MI Zip Code 48038-2856 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-800 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/Type
	State: District:
C. Full Name (Last, First, Middle Initial) Kathleen Neal <hr/> Mailing Address 1743 Beechwood Way <hr/> City Bloomfield Hills State MI Zip Code 48302-1281 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-804 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 42.00
	010 Category/Type
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	118.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Paul Neville <hr/> Mailing Address 1436 Westhampton View Lane <hr/> City Wildwood State MO Zip Code 63005 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-807 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 35.00
B.	Full Name (Last, First, Middle Initial) Brian H. Nielander <hr/> Mailing Address 218 South Kenwood <hr/> City Royal Oak State MI Zip Code 48067-3991 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-811 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 34.00
C.	Full Name (Last, First, Middle Initial) Jeffrey Niemi <hr/> Mailing Address 4460 Valley Ridge Ln <hr/> City Milford State MI Zip Code 48380-2785 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-812 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional) ▶	103.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Robert E. Norton Mailing Address 1607 Deer Path Trail City Oxford State MI Zip Code 48371 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-816 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 75.00 Category/Type 010
B.	Full Name (Last, First, Middle Initial) Margaret C. Novacek Mailing Address 11322 Nine Mile Road City South Lyon State MI Zip Code 48178-8816 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-817 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 84.00 Category/Type 010
C.	Full Name (Last, First, Middle Initial) John R. Oetjens Mailing Address 1348 East Fairview Lane City Rochester Hills State MI Zip Code 48306-4128 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-825 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 50.00 Category/Type 010

SUBTOTAL of Disbursements This Page (optional) ▶

209.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Michael Ostrowski Mailing Address 17650 Maple Hill Dr City Northville State MI Zip Code 48168-3223 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-842 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 34.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) John M. Otzen Mailing Address 4462 Parklane Court City Bloomfield State MI Zip Code 48304-3261 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-844 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 83.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Richard Owusu Mailing Address 5144 Creekmonte Drive City Rochester State MI Zip Code 48306-4793 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-846 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 84.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	201.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Joseph J. Ozdowy <hr/> Mailing Address 1000 Chrysler Drive 507-01-50 <hr/> City Auburn Hills State MI Zip Code 48326 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-847 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 83.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Charles F. Padden <hr/> Mailing Address 8855 Oak Valley <hr/> City Holland State OH Zip Code 43528 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-849 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) John G. Papas <hr/> Mailing Address 630 Westchester Road <hr/> City Grosse Pointe Park State MI Zip Code 48230-1824 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-851 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 42.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Amit Parikh Mailing Address 1963 Beaver Creek Dr City Rochester State MI Zip Code 48307-6021 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-856 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 35.00 Category/Type 010
B.	Full Name (Last, First, Middle Initial) James Parker, Jr. Mailing Address 1635 Dexter Lake Drive Apartment 301 City Memphis State TN Zip Code 38016-7181 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-857 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 42.00 Category/Type 010
C.	Full Name (Last, First, Middle Initial) Rhonda J. Patterson Mailing Address 4015 Shady Beach Blvd City Orchard Lake State MI Zip Code 48324 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-863 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 50.00 Category/Type 010

SUBTOTAL of Disbursements This Page (optional)	127.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Mark S. Peper <hr/> Mailing Address 19610 Pierson Drive <hr/> City Northville Twp. State MI Zip Code 48167-2650 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-871 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Joseph M. Per <hr/> Mailing Address 1006 Summer Hill <hr/> City Carmel State IN Zip Code 46032-9424 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-872 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 83.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Stephen Perrott <hr/> Mailing Address 2270 Pine Harbor Ln <hr/> City Lake Orion State MI Zip Code 48360-1878 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-875 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

167.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Barbara J. Pilarski	Transaction ID: 20090728-883 Date of Disbursement 08 / 31 / 2009
	Mailing Address 3290 Daske	
	City Romeo State MI Zip Code 48095-1031	Amount of Each Disbursement this Period 84.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Lori A. Pinter	Transaction ID: 20090728-885 Date of Disbursement 08 / 31 / 2009
	Mailing Address 416 Cross Creek	
	City Rochester Hills State MI Zip Code 48306-4569	Amount of Each Disbursement this Period 34.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) John Pitcher	Transaction ID: 20090728-887 Date of Disbursement 08 / 31 / 2009
	Mailing Address 17506 Rolling Woods Cir	
	City Northville State MI Zip Code 48168-1888	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

168.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) David P. Place <hr/> Mailing Address 4481 Hawthorn Court <hr/> City Auburn Hills State MI Zip Code 48326-1884 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-889 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 42.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Dennis Polehna <hr/> Mailing Address 600 Maxine Drive <hr/> City Davidson State MI Zip Code 48423 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-893 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sara Potter <hr/> Mailing Address 51604 Willow Springs Dr <hr/> City Macomb State MI Zip Code 48042-4284 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-897 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	110.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Tania M. Pratnicki Young <hr/> Mailing Address 25625 Brittany <hr/> City Perrysburg State OH Zip Code 43551-9785 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-900 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 83.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Chad Quick <hr/> Mailing Address 7775 Ormond Rd <hr/> City Davisburg State MI Zip Code 48350-2424 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-911 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Andrew J. Ragalyi <hr/> Mailing Address 22059 Barclay Court <hr/> City Novi State MI Zip Code 48374-3873 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-915 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

167.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Lisa A. Reinhardt-Kosal <hr/> Mailing Address 47170 Stratford Lane <hr/> City State Zip Code Novi MI 48374-3867 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Category/Type: <input type="text" value="010"/> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 20090728-926 Date of Disbursement <input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="50.00"/>
B.	Full Name (Last, First, Middle Initial) Mark A. Renicker <hr/> Mailing Address 6324 Chad Court <hr/> City State Zip Code Brighton MI 48116-1794 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Category/Type: <input type="text" value="010"/> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 20090728-929 Date of Disbursement <input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="50.00"/>
C.	Full Name (Last, First, Middle Initial) Matthew C. Reynolds <hr/> Mailing Address 273 Cross Creek Boulevard <hr/> City State Zip Code Rochester Hills MI 48306-4566 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Category/Type: <input type="text" value="010"/> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 20090728-931 Date of Disbursement <input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="84.00"/>

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text" value="184.00"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Louis A. Rhodes	Transaction ID: 20090728-934 Date of Disbursement
	Mailing Address 30674 Knighton	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Farmington Hills State MI Zip Code 48331-5967	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	<input type="text" value="125.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="010"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Leroy D. Richie	Transaction ID: 20090728-938 Date of Disbursement
	Mailing Address 15220 Oakwood Drive	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Oak Park State MI Zip Code 48237-2450	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	<input type="text" value="42.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="010"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Raymond G. Rivard	Transaction ID: 20090728-942 Date of Disbursement
	Mailing Address 22018 Gailes Drive	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Macomb State MI Zip Code 48044-2309	Amount of Each Disbursement this Period
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	<input type="text" value="34.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="010"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="201.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Kathleen Robinson Mailing Address 1665 Lakeview City State Zip Code Sylvan Lake MI 48320 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-945 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 50.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Ellen M. Roe Mailing Address 6201 Wood Pond City State Zip Code West Bloomfield MI 48323-2264 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-947 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 50.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Gary Rogers Mailing Address 459 Harwood Ct City State Zip Code Oxford MI 48371-4429 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-948 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 42.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	142.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Brian Rogos <hr/> Mailing Address 1350 Welland Drive CIMIS: 423-14-21 <hr/> City Rochester State MI Zip Code 48306 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-950 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) Mary E. Romeo Tarte <hr/> Mailing Address 15432 Dominic <hr/> City Clinton Twp. State MI Zip Code 48038-1846 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-952 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00
C.	Full Name (Last, First, Middle Initial) Carol Rusinowski <hr/> Mailing Address 2575 Addison Hills Ct <hr/> City Oxford State MI Zip Code 48370-2444 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-964 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional)	118.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Jason A. Russ Mailing Address 1965 Royal Birkdale City Oxford State MI Zip Code 48371 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-965 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 34.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Lisa Sacino Mailing Address 15724 Howard Dr City Macomb State MI Zip Code 48042-5715 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-969 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 34.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Lawrence J. Sak Mailing Address 310 Torrey Pine Court City Lake Orion State MI Zip Code 48362-3914 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-971 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 60.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	128.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Cristobal Samaniego Mailing Address 1455 Ravenwood Street City Ann Arbor State MI Zip Code 48103-2656 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-974 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 34.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Kimberly C. Scarlett Mailing Address 8392 High Meadows Trail City Clarkston State MI Zip Code 48348-4384 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-984 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 50.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Robert C. Schmitt Mailing Address 4685 Cider Hill Dr. City Oakland Twp. State MI Zip Code 48306 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-991 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 35.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	119.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Karl Schneider Mailing Address 3884 Harmony Hills Dr City Oxford State MI Zip Code 48370-2522 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-992 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) Robert J. Schott Mailing Address 3866 Oakhills Drive City Bloomfield Hills State MI Zip Code 48301-3232 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-996 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 100.00
C.	Full Name (Last, First, Middle Initial) Jerome J. Schultz, II Mailing Address 1803 Farmbrook Drive City Troy State MI Zip Code 48098-2548 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1002 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional)	184.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Vernon J. Scott, Jr. <hr/> Mailing Address 355 Mill Pond Lane <hr/> City Milford State MI Zip Code 48381-1035 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	Transaction ID: 20090728-1009 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 42.00
B. Full Name (Last, First, Middle Initial) Robert M. Seabolt <hr/> Mailing Address 2302 Woodland <hr/> City Royal Oak State MI Zip Code 48073 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	Transaction ID: 20090728-1014 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 42.00
C. Full Name (Last, First, Middle Initial) Kevin Sell <hr/> Mailing Address 2866 Glenarye Dr <hr/> City Lindenhurst State IL Zip Code 60046-7924 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	Transaction ID: 20090728-1018 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 83.00

SUBTOTAL of Disbursements This Page (optional) ▶

167.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) James D. Shipman <hr/> Mailing Address 5122 Southpointe Parkway <hr/> City Monroe State MI Zip Code 48161-9739 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1029 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kurt J. Simko <hr/> Mailing Address 2850 Eagle Drive <hr/> City Rochester Hills State MI Zip Code 48309-2853 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1037 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Gerald J. Simons <hr/> Mailing Address 44773 Kirk Court <hr/> City Canton State MI Zip Code 48187-1717 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1039 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	134.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Jeffrey T. Sims <hr/> Mailing Address 17807 Mulberry <hr/> City Riverview State MI Zip Code 48193 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1040 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kevin Slusarczyk <hr/> Mailing Address 9733 Monroe Boulevard <hr/> City Taylor State MI Zip Code 48180-3618 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1048 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Henry L. Smith <hr/> Mailing Address 1924 Edison <hr/> City Detroit State MI Zip Code 48206-2041 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1053 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 42.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

110.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) John J. Stech	Transaction ID: 20090728-1066 Date of Disbursement 08 / 31 / 2009
	Mailing Address 1000 Chry Drive 900-07-000	Amount of Each Disbursement this Period 50.00
	City Auburn Hills State MI Zip Code 48326	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Lori M. Stevens	Transaction ID: 20090728-1069 Date of Disbursement 08 / 31 / 2009
	Mailing Address 1168 Congress Court	Amount of Each Disbursement this Period 50.00
	City Troy State MI Zip Code 48085-1382	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Tim Suchyta	Transaction ID: 20090728-1077 Date of Disbursement 08 / 31 / 2009
	Mailing Address 16 Cambridge Blvd	Amount of Each Disbursement this Period 50.00
	City Pleasant Ridge State MI Zip Code 48069-1103	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

150.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Gloria J. Suffron <hr/> Mailing Address 5343 Fredelia <hr/> City Toledo State OH Zip Code 43623-1561 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1078 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Richard Sun <hr/> Mailing Address 4641 Bennington Dr <hr/> City Sterling Heights State MI Zip Code 48310-3114 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1082 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Michael Tarter <hr/> Mailing Address 41191 Primrose Dr <hr/> City Sterling Heights State MI Zip Code 48313-3276 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1092 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

118.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Scott Thiele <hr/> Mailing Address 534 Parkland Hills Drive <hr/> City Rochester State MI Zip Code 48306 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1099 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 83.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Richard W. Thornton <hr/> Mailing Address 714 Fox River Drive <hr/> City Bloomfield Twp. State MI Zip Code 48304-1014 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1106 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) James S. Timpano <hr/> Mailing Address 7004 Cloister Road <hr/> City Toledo State OH Zip Code 43617-2208 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1110 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 35.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

168.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Diane E. Tischler Mailing Address 1645 Spotswood Drive City Bloomfield State MI Zip Code 48302-2267 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1112 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 42.00 Category/Type 010
B.	Full Name (Last, First, Middle Initial) Christopher M. Topham Mailing Address 5695 Woodland Pass City Bloomfield State MI Zip Code 48301-1230 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1114 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 42.00 Category/Type 010
C.	Full Name (Last, First, Middle Initial) Gregory Trotman Mailing Address 24652 Naples Dr City Novi State MI Zip Code 48374-2979 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1123 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Amount of Each Disbursement this Period 35.00 Category/Type 010

SUBTOTAL of Disbursements This Page (optional) ▶	119.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Michel Trumbo Mailing Address 5311 Fedora City Troy State MI Zip Code 48085-4008 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1126 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 34.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Pamela Tsiokanos Mailing Address 6506 Deer Ridge Drive City Clarkston State MI Zip Code 48348 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1128 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 34.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Jeanne E. Van Buren Mailing Address 487 Cambridge Way City Bloomfield Hills State MI Zip Code 48304-3815 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1137 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 50.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

118.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Rhonda Van Der Hoeven	Transaction ID: 20090728-1138 Date of Disbursement 08 / 31 / 2009
	Mailing Address 71 Lochmoor Blvd	
	City Grosse Pointe Shor State MI Zip Code 48236-1749	Amount of Each Disbursement this Period 34.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Louann Van Der Wiele	Transaction ID: 20090728-1139 Date of Disbursement 08 / 31 / 2009
	Mailing Address 22 Stratton Place	
	City Grosse Pointe Shor State MI Zip Code 48236-1715	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) David Varnas	Transaction ID: 20090728-1145 Date of Disbursement 08 / 31 / 2009
	Mailing Address 30511 Wentworth St	
	City Livonia State MI Zip Code 48154-6211	Amount of Each Disbursement this Period 34.00
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	118.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Victor Varnau	Transaction ID: 20090728-1146 Date of Disbursement 08 / 31 / 2009
	Mailing Address 9770 Oak Valley Dr	Amount of Each Disbursement this Period 34.00
	City Clarkston State MI Zip Code 48348-4169	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Charles Velez	Transaction ID: 20090728-1149 Date of Disbursement 08 / 31 / 2009
	Mailing Address 8133 N Bridge Way	Amount of Each Disbursement this Period 50.00
	City Maumee State OH Zip Code 43537-9498	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Edward P. Vondell	Transaction ID: 20090728-1161 Date of Disbursement 08 / 31 / 2009
	Mailing Address 1000 Chry Drive 850-00-19	Amount of Each Disbursement this Period 83.00
	City Auburn Hills State MI Zip Code 48326	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

167.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Gary K. Wade <hr/> Mailing Address 1371 Hathaway Risg <hr/> City Rochester State MI Zip Code 48306-3945 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1165 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Patrick J. Walsh <hr/> Mailing Address 829 Ramblewood Drive <hr/> City Rochester State MI Zip Code 48307-6067 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1177 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ronald Wander <hr/> Mailing Address 3433 Mill Creek Dr <hr/> City Lake Orion State MI Zip Code 48360-1566 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1178 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 35.00
	010 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

153.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Cheng Wang <hr/> Mailing Address 1691 Spring Creek Dr <hr/> City Rochester Hills State MI Zip Code 48306-3255 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1179 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 52.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Patrick W. Ward <hr/> Mailing Address 510 Holland Avenue <hr/> City Port Huron State MI Zip Code 48060-1507 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1184 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Nicole M. Waters <hr/> Mailing Address PO Box 81681 <hr/> City Rochester State MI Zip Code 48308 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1189 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 42.00
	Category/Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

128.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Charels Weingart <hr/> Mailing Address 17529 Myron St <hr/> City Livonia State MI Zip Code 48152-3116 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1195 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 42.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Peter Weiss <hr/> Mailing Address 4225 Coastal Pkwy <hr/> City White Lake State MI Zip Code 48386-1101 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1196 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) William E. Whedon <hr/> Mailing Address 3075 Glengrove <hr/> City Rochester Hills State MI Zip Code 48309-2734 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1202 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	210.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Judith K. Wheeler <hr/> Mailing Address 5323 Carlisle Court <hr/> City Oakland Township State MI Zip Code 48306-4919 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1204 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Bryan A. Whitfield <hr/> Mailing Address 255 Lancelot Lane <hr/> City Ortonville State MI Zip Code 48462-8946 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1210 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Lance T. Willeke <hr/> Mailing Address 6816 Kennard Road <hr/> City Medina State OH Zip Code 44256-8560 Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1216 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 40.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	140.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Bruce Williams, Jr.	Transaction ID: 20090728-1221 Date of Disbursement 08 / 31 / 2009
	Mailing Address 419 Thornehill Trail	Amount of Each Disbursement this Period 34.00
	City Oxford State MI Zip Code 48371	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Jack D. Withrow	Transaction ID: 20090728-1233 Date of Disbursement 08 / 31 / 2009
	Mailing Address 2840 Lakewoods Court	Amount of Each Disbursement this Period 84.00
	City Orchard Lake State MI Zip Code 48324-1916	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Paul L. Wolff	Transaction ID: 20090728-1237 Date of Disbursement 08 / 31 / 2009
	Mailing Address 6617 Crabapple	Amount of Each Disbursement this Period 50.00
	City Troy State MI Zip Code 48098-1980	
	Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

168.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) James Worton <hr/> Mailing Address 3180 Fallen Oaks Court Apartment 804 <hr/> City Rochester Hills State MI Zip Code 48309 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1238 Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2009
	Amount of Each Disbursement this Period 34.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Shing K. Wu <hr/> Mailing Address 4540 Old Oak Court <hr/> City Plymouth State MI Zip Code 48170 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1241 Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2009
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Martin G. Yagley <hr/> Mailing Address 36405 Waltham <hr/> City Sterling Heights State MI Zip Code 48310-4510 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1242 Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2009
	Amount of Each Disbursement this Period 50.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	134.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) Linsheng Yang <hr/> Mailing Address 665 Pioneer <hr/> City Rochester Hills State MI Zip Code 48307-2876 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1245 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 34.00
B.	Full Name (Last, First, Middle Initial) Daniel Zerafa <hr/> Mailing Address 61234 Admiral Dr <hr/> City Washington State MI Zip Code 48094-1242 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1248 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 84.00
C.	Full Name (Last, First, Middle Initial) Jeffrey R. Ziegenfelder <hr/> Mailing Address 5994 Pontiac Trail <hr/> City Orchard Lake State MI Zip Code 48323-2225 <hr/> Purpose of Disbursement Refund of 6/28/09 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20090728-1249 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 34.00

SUBTOTAL of Disbursements This Page (optional)	152.00
TOTAL This Period (last page this line number only)	1508.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) Chelsea United Way <hr/> Mailing Address PO Box 176 <hr/> City Chelsea State MI Zip Code 48118 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V93442250198F4769882 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 4550.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) United Way of Boone County <hr/> Mailing Address 220 West Locust Street <hr/> City Belvidere State IL Zip Code 61008 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: VA0166A620BD7149B77A Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 25750.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) United Way of Delaware <hr/> Mailing Address The Linden Building, Third Floor 625 North Orange Street <hr/> City Wilmington State DE Zip Code 19801 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: VA58020BE9A046DAA3D2 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1650.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	31950.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) United Way of Greater St. Louis <hr/> Mailing Address 910 North 11th Street <hr/> City St. Louis State MO Zip Code 63101 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: VB93C688442DD1B27EE7 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 21400.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) United Way of Greater Toledo <hr/> Mailing Address One Stranahan Square <hr/> City Toledo State OH Zip Code 43604-1495 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: VAB0513424970FC2ACDD Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 62550.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) United Way of Howard County <hr/> Mailing Address 210 W Walnut Street <hr/> City Kokomo State IN Zip Code 46901-4539 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V1F5E483CC763F0AC7EE Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 94000.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

177950.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A. Full Name (Last, First, Middle Initial) United Way of Kenosha County <hr/> Mailing Address 3601 30th Avenue Suite 202 <hr/> City Kenosha State WI Zip Code 53144-1642 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V3FFABBAC6393FA76B3A Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 12300.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) United Way of Monroe County <hr/> Mailing Address 216 North Monroe Street <hr/> City Monroe State MI Zip Code 48162 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: VA721F019BA09255A30A Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 4700.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) United Way of Rock River Valley <hr/> Mailing Address 612 North Main Street Suite 300 <hr/> City Rockford State IL Zip Code 61103 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: VB68D0E1A9C87C01AB1D Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 25750.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

42750.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Chrysler Service Contracts Inc. Political Support Cmte

A.	Full Name (Last, First, Middle Initial) United Way of Southeast Michigan <hr/> Mailing Address 660 Woodward Avenue, Suite 300 <hr/> City Detroit State MI Zip Code 10227 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V8F2042ACAB1E3830EF2 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 211100.00
B.	Full Name (Last, First, Middle Initial) United Way of Summit County <hr/> Mailing Address 90 North Prospect Street <hr/> City Akron State OH Zip Code 44304 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: VC0D377B0FF0DF08CD57 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 15000.00
C.	Full Name (Last, First, Middle Initial) Washtenaw United Way <hr/> Mailing Address 2305 Platt Road <hr/> City Ann Arbor State MI Zip Code 48104 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V6471A9681DD4F53A6D7 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 4550.00

SUBTOTAL of Disbursements This Page (optional) ▶

230650.00

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

483300.00