

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

FRIENDS OF DR BOB

ADDRESS (number and street)

P.O. BOX 936

Check if different
than previously
reported. (ACC)

MARQUETTE

MI

49855

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00787101

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

MI

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 18 / 2024

through

M M / D D / Y Y Y Y
09 / 30 / 2024

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

LORINSER, ROBERT JAMES, , ,

Signature of Treasurer

LORINSER, ROBERT JAMES, , ,

Date

M M / D D / Y Y Y Y
10 / 15 / 2024

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name
FRIENDS OF DR BOB

Report Covering the Period: From: MM / DD / YYYY 07 / 18 / 2024 To: MM / DD / YYYY 09 / 30 / 2024

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	28553.84	373959.01
(b) Total Contribution Refunds (from Line 20(d))	0.00	1647.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	28553.84	372312.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	38562.53	406969.34
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	857.15
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	38562.53	406112.19
8. Cash on Hand at Close of Reporting Period (from Line 27)	2276.82	
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)	27000.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

FRIENDS OF DR BOB

Report Covering the Period:

From:

MM / DD / YYYY
07 / 18 / 2024

To:

MM / DD / YYYY
09 / 30 / 2024**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

11355.24

100586.74

(ii) Unitemized

17198.60

267622.67

(iii) TOTAL of contributions
from individuals ▶

28553.84

368209.41

(b) Political Party Committees.....

0.00

500.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

5249.60

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

28553.84

373959.01

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

857.15

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

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

28553.84

374816.16

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

38562.53

406969.34

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

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

6500.00

6500.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

6500.00

6500.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

1647.00

(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 20(a), (b), and (c)).....

0.00

1647.00

21. OTHER DISBURSEMENTS

0.00

2500.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

45062.53

417616.34

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

18785.51

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

28553.84

25. SUBTOTAL (add Line 23 and Line 24).....

47339.35

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

45062.53

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

2276.82

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Abernathy, Charlene, , ,

A.

Mailing Address 4312 westridge

City

Williamsburg

State

MI

Zip Code

49690

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8814

Amount of Each Receipt this Period

250.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

226421.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8814.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

C.

Full Name (Last, First, Middle Initial)

Aroian, Lois, , ,

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	2	4

Transaction ID : SA11AI.9109

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

300.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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PAGE 6 OF 41

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF DR BOBFull Name (Last, First, Middle Initial)
ACTBLUE**A.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

243659.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	2	4

Transaction ID : SA11AI.9109.0

Amount of Each Receipt this Period

50.00

☒ Memo ItemFull Name (Last, First, Middle Initial)
Baase, Catherine, , ,**B.** Mailing Address 724 Spring Lake TrailCity
SaginawState
MIZip Code
48603FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.8943

Amount of Each Receipt this Period

25.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
ACTBLUE**C.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

233813.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.8943.0

Amount of Each Receipt this Period

25.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 41

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF DR BOB

A. Full Name (Last, First, Middle Initial) Ball, Robert, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 11 / 2024	
Mailing Address PO Box 426			Transaction ID : SA11AI.9104	
City Leland	State MI	Zip Code 49654	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item ☐		
Name of Employer Ridhwan Foundation		Occupation Minister		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 2400.00		

B. Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y Y 08 / 11 / 2024	
Mailing Address PO BOX 441146			Transaction ID : SA11AI.9104.0	
City SOMERVILLE	State MA	Zip Code 02144	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C C00401224		Memo Item ☒		
Name of Employer		Occupation		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 243474.64		

C. Full Name (Last, First, Middle Initial) Baluha, Mark, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2024	
Mailing Address			Transaction ID : SA11AI.8921	
City	State	Zip Code	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Memo Item ☐		
Name of Employer		Occupation		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 225.00		

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

125.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Bassett, Steven, , ,

A.

Mailing Address 44800 Clare Blvd

City
PlymouthState
MIZip Code
48170FEC ID number of contributing
federal political committee.

C

Name of Employer
Not EmployedOccupation
Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9012

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

233788.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9012.0

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Brown, Cynthia, , ,

C.

Mailing Address 127 W 96th Street

City
New YorkState
NYZip Code
10025FEC ID number of contributing
federal political committee.

C

Name of Employer
Not EmployedOccupation
Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1280.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9000

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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PAGE 9 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

234218.52

Date of Receipt

M M / D D / Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.9000.0

Amount of Each Receipt this Period

25.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

darst, Judith, , ,

Mailing Address PO Box 237

City

Cedar

State

MI

Zip Code

49621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.9079

Amount of Each Receipt this Period

100.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

238274.96

Date of Receipt

M M / D D / Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.9079.0

Amount of Each Receipt this Period

100.00



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

100.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

PAGE 10 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)
darst, Judith, , ,

Mailing Address PO Box 237

City
CedarState
MIZip Code
49621FEC ID number of contributing
federal political committee.

C

Name of Employer
Not EmployedOccupation
Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 24 2024

Transaction ID : SA11AI.9105

Amount of Each Receipt this Period

100.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
Dickson, Thomas, , ,

Mailing Address 4579 N Hickey Creek Rd

City
RoscommonState
MIZip Code
48653FEC ID number of contributing
federal political committee.

C

Name of Employer
Not EmployedOccupation
Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.9002

Amount of Each Receipt this Period

100.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

233918.52

Date of Receipt

M M / D D / Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.9002.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

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

200.00

SCHEDULE A (FEC Form 3)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Domine, Lawrence, , ,

A.

Mailing Address 361 S Nanagosa Trail

City

Suttons Bay

State

MI

Zip Code

49682

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 21 / 2024

Transaction ID : SA11AI.8930

Amount of Each Receipt this Period

100.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

226171.58

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 21 / 2024

Transaction ID : SA11AI.8930.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

C.

Full Name (Last, First, Middle Initial)

Douglas, Richard, , ,

Mailing Address 1151 Crocker Blvd.

City

Tawas City

State

MI

Zip Code

48763

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 21 / 2024

Transaction ID : SA11AI.8872

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

200.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225916.58

Date of Receipt

M M / D D / Y Y Y Y Y
07 21 2024

Transaction ID : SA11AI.8872.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

B.

Full Name (Last, First, Middle Initial)

Douglas, Richard, , ,

Mailing Address 1151 Crocker Blvd.

City

Tawas City

State

MI

Zip Code

48763

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 29 2024

Transaction ID : SA11AI.9110

Amount of Each Receipt this Period

50.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

243709.64

Date of Receipt

M M / D D / Y Y Y Y Y
08 29 2024

Transaction ID : SA11AI.9110.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

50.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Duke, Nancy, , ,

A.

Mailing Address 600 Cottageview #331

City

Traverse City

State

MI

Zip Code

49684

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1211.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9074

Amount of Each Receipt this Period

75.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237974.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9074.0

Amount of Each Receipt this Period

75.00

☒ Memo Item

C.

Full Name (Last, First, Middle Initial)

Duke, Nancy, , ,

Mailing Address 600 Cottageview #331

City

Traverse City

State

MI

Zip Code

49684

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1611.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	2	4

Transaction ID : SA11AI.9088

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

475.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

238674.96

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 04 / 2024

Transaction ID : SA11AI.9088.0

Amount of Each Receipt this Period

400.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Duke, Nancy, , ,

Mailing Address 600 Cottageview #331

City

Traverse City

State

MI

Zip Code

49684

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1686.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 24 / 2024

Transaction ID : SA11AI.9103

Amount of Each Receipt this Period

75.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

243609.64

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 24 / 2024

Transaction ID : SA11AI.9103.0

Amount of Each Receipt this Period

75.00



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

75.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Forslin, Marjorie, , ,

A.

Mailing Address 36 Southfork

City

Marquette

State

MI

Zip Code

49855

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not employed

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.8947

Amount of Each Receipt this Period

15.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

233743.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.8947.0

Amount of Each Receipt this Period

15.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Gund, Agnes, , ,

Mailing Address 765 Park Ave

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	2	4

Transaction ID : SA11AI.9070

Amount of Each Receipt this Period

3300.00



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

3315.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 41

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF DR BOBFull Name (Last, First, Middle Initial)
ACTBLUE**A.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

232297.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	2	4

Transaction ID : SA11AI.9070.0

Amount of Each Receipt this Period

3300.00

☒ Memo ItemFull Name (Last, First, Middle Initial)
Hamilton, Laura, , ,**B.** Mailing Address 707 Randolph Ave.City
HuntsvilleState
ALZip Code
35801FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

227.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8932

Amount of Each Receipt this Period

5.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
ACTBLUE**C.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225796.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8932.0

Amount of Each Receipt this Period

5.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

5.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Hauge, Soren, , ,

A.

Mailing Address 955 Ransom Street

City
RiponState
WIZip Code
54971FEC ID number of contributing
federal political committee.

C

Name of Employer
Ripon CollegeOccupation
Professor

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 07 2024

Transaction ID : SA11AI.9107

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

243324.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 07 2024

Transaction ID : SA11AI.9107.0

Amount of Each Receipt this Period

300.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Himes, Jon, , ,

C.

Mailing Address 201 Shoreline Dr

City
NegauneeState
MIZip Code
49866FEC ID number of contributing
federal political committee.

C

Name of Employer
Not EmployedOccupation
Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.8948

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

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

320.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

233763.52

Date of Receipt

M M / D D / Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.8948.0

Amount of Each Receipt this Period

20.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Martin, Trevor, , ,

Mailing Address 5097 S Spirit Dr.

City

Bellaire

State

MI

Zip Code

49615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.9077

Amount of Each Receipt this Period

100.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

238174.96

Date of Receipt

M M / D D / Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.9077.0

Amount of Each Receipt this Period

100.00



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

100.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 41

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial) Maslow, Catherine, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2024	
Mailing Address 5225 Pooks Hill Rd Apt. 1401 S			Transaction ID : SA11AI.9089	
City Bethesda	State MD	Zip Code 20814	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer Not Employed		Occupation Not Employed		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2024	
Mailing Address PO BOX 441146			Transaction ID : SA11AI.9089.0	
City SOMERVILLE	State MA	Zip Code 02144	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C C00401224		Memo Item		
Name of Employer		Occupation		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 239174.96		

Full Name (Last, First, Middle Initial) McCormick, James, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2024	
Mailing Address 12059 Elk Run			Transaction ID : SA11AI.9046	
City Traverse City	State MI	Zip Code 49684	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer Not Employed		Occupation Not Employed		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 665.00		

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 41

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF DR BOBFull Name (Last, First, Middle Initial)
ACTBLUE**A.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

226021.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.9046.0

Amount of Each Receipt this Period

5.00

☒ Memo ItemFull Name (Last, First, Middle Initial)
McCormick, James, , ,**B.** Mailing Address 12059 Elk RunCity
Traverse CityState
MIZip Code
49684FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

670.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.8965

Amount of Each Receipt this Period

5.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
ACTBLUE**C.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

233818.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.8965.0

Amount of Each Receipt this Period

5.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

5.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

McKendrick, Mary, , ,

A.

Mailing Address P.O. Box 27

City

Mohawk

State

MI

Zip Code

49950

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9075

Amount of Each Receipt this Period

100.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

238074.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9075.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

C.

Full Name (Last, First, Middle Initial)

Multer, Susan, , ,

Mailing Address 15 Penny Lane

City

Ithaca

State

NY

Zip Code

14850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8834

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

200.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 41

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF DR BOBFull Name (Last, First, Middle Initial)
ACTBLUE**A.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

226016.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8834.0

Amount of Each Receipt this Period

100.00

☒ Memo ItemFull Name (Last, First, Middle Initial)
Neu, John, , ,**B.** Mailing Address 1015 Linder AveCity
Oak ParkState
ILZip Code
60302FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	2	4

Transaction ID : SA11AI.9128

Amount of Each Receipt this Period

250.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
Nulf, Dawn, , ,**C.** Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9020

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

300.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 41

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF DR BOBFull Name (Last, First, Middle Initial)
ACTBLUE**A.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

233728.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9020.0

Amount of Each Receipt this Period

50.00

☒ Memo ItemFull Name (Last, First, Middle Initial)
Olson, Allan, , ,**B.** Mailing Address 121 Lakewood LaneCity
MarquetteState
MIZip Code
49855FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
Physician

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	2	4

Transaction ID : SA11AI.9112

Amount of Each Receipt this Period

50.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
ACTBLUE**C.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

243374.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	2	4

Transaction ID : SA11AI.9112.0

Amount of Each Receipt this Period

50.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Pandorf, Susan, , ,

A. Mailing Address PO Box 221

City

Lake Leeland

State

MI

Zip Code

49653

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8924

Amount of Each Receipt this Period

20.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

ACTBLUE

B. Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225816.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8924.0

Amount of Each Receipt this Period

20.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

Peterson, Cathy, , ,

C. Mailing Address 36211 River Road

City

Chassell

State

MI

Zip Code

49916

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8839

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

70.24

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 41

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF DR BOBFull Name (Last, First, Middle Initial)
ACTBLUE**A.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

226071.58

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07		21		2024

Transaction ID : SA11AI.8839.0

Amount of Each Receipt this Period

50.00

☒ Memo ItemFull Name (Last, First, Middle Initial)
Peterson, Eric, , ,**B.** Mailing Address 1522 Bolling AveCity
NorfolkState
VAZip Code
33647FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Management Analysis Technologi

Corporate Vice-President

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		04		2024

Transaction ID : SA11AI.9091

Amount of Each Receipt this Period

100.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
ACTBLUE**C.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

239274.96

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		04		2024

Transaction ID : SA11AI.9091.0

Amount of Each Receipt this Period

100.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Peterson, Eric, , ,

A.

Mailing Address 1522 Bolling Ave

City

Norfolk

State

VA

Zip Code

33647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Management Analysis TechnologiOccupation
Corporate Vice-President

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

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

Transaction ID : SA11AI.9106

Amount of Each Receipt this Period

100.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247175.23

Date of Receipt

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

Transaction ID : SA11AI.9106.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

C.

Full Name (Last, First, Middle Initial)

Scott, Richard, , ,

Mailing Address 4580 N Lakeshore

City

Hope Springs

State

MI

Zip Code

49740

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not EmployedOccupation
Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2395.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8828

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

200.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225691.34

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 21 2024

Transaction ID : SA11AI.8828.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

B.

Full Name (Last, First, Middle Initial)

Scott, Richard, , ,

Mailing Address 4580 N Lakeshore

City

Hope Springs

State

MI

Zip Code

49740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.9078

Amount of Each Receipt this Period

100.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237899.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.9078.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

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

100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Scott, Richard, , ,

A.

Mailing Address 4580 N Lakeshore

City

Hope Springs

State

MI

Zip Code

49740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2695.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 04 / 2024

04

2024

Transaction ID : SA11AI.9092

Amount of Each Receipt this Period

200.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

239474.96

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 04 / 2024

04

2024

Transaction ID : SA11AI.9092.0

Amount of Each Receipt this Period

200.00

☒ Memo Item

C.

Full Name (Last, First, Middle Initial)

Shearing, Miriam, , ,

Mailing Address 9103 Alta Dr

City

Las Vegas

State

NV

Zip Code

89145

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 24 / 2024

24

2024

Transaction ID : SA11AI.9068

Amount of Each Receipt this Period

3300.00

☐ Memo Item

3500.00

SUBTOTAL of Receipts This Page (optional)..... ▶

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Skaggs, Robert, , ,

Mailing Address 2735 Cherry Road

City

Fennville

State

MI

Zip Code

49108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.8941

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

233678.52

Date of Receipt

M M / D D / Y Y Y Y Y
07 28 2024

Transaction ID : SA11AI.8941.0

Amount of Each Receipt this Period

30.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Skaggs, Robert, , ,

Mailing Address 2735 Cherry Road

City

Fennville

State

MI

Zip Code

49108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 22 2024

Transaction ID : SA11AI.9114

Amount of Each Receipt this Period

30.00

☐ Memo Item

60.00

SUBTOTAL of Receipts This Page (optional)..... ▶

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

243534.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	2	4

Transaction ID : SA11AI.9114.0

Amount of Each Receipt this Period

30.00

☒ Memo Item

B.

Full Name (Last, First, Middle Initial)

Triezenberg, Herm, , ,

Mailing Address 1663 Moonrise Court

City

Traverse City

State

MI

Zip Code

49686

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9005

Amount of Each Receipt this Period

250.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

234168.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.9005.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Walsh, Daniel, , ,

A.

Mailing Address 3646 Woodbine Ave

City

Cincinnati

State

OH

Zip Code

45211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8851

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

226921.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8851.0

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

Walsh, Robert, , ,

C.

Mailing Address 2 Michigan Ave. W. Ste 301

City

Battle Creek

State

MI

Zip Code

49017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1146.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8838

Amount of Each Receipt this Period

100.00



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

600.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 41

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF DR BOBFull Name (Last, First, Middle Initial)
ACTBLUE**A.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225791.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	4

Transaction ID : SA11AI.8838.0

Amount of Each Receipt this Period

100.00

☒ Memo ItemFull Name (Last, First, Middle Initial)
Walsh, Robert, , ,**B.** Mailing Address 2 Michigan Ave. W. Ste 301City
Battle CreekState
MIZip Code
49017FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Self Employed

Attorney

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1171.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.8970

Amount of Each Receipt this Period

25.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
ACTBLUE**C.** Mailing Address PO BOX 441146City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

234193.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	4

Transaction ID : SA11AI.8970.0

Amount of Each Receipt this Period

25.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

Weaver, Sherrill, , ,

A. Mailing Address 7821 Kildare Avenue

City
SkokieState
ILZip Code
60076FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

574.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	4

Transaction ID : SA11AI.9115

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

243024.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	4

Transaction ID : SA11AI.9115.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

50.00

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

11355.24

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 41

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2024

City
MenloState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3815.61

Transaction ID : SB17.9025

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Grassroots Analytics

Mailing Address 645 Prospect Hill Rod

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		02		2024

City
RutlandState
VTZip Code
05701

FEC Identification Number

C

Purpose of Disbursement
Fundraising Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

878.63

Transaction ID : SB17.9029

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. LORINSER, ROBERT JAMES, , ,

Mailing Address 1406 WEST AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2024

City
MARQUETTEState
MIZip Code
49855

FEC Identification Number

C H2MI01142

Purpose of Disbursement
Reimbursement expense

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

16375.00

Transaction ID : SB17.9031

☐ Memo Item

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State: MI

District: 01

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

21069.24

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

A. The Political Group

Mailing Address 4835 Medical Drive

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	2	4

City
San AntonioState
TXZip Code
78229

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

7000.00

Transaction ID : SB17.9031.0

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. North Compass Political, LLC

Mailing Address 405 West Greenlawn Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	2	4

City
LansingState
MIZip Code
48910

FEC Identification Number

C

Purpose of Disbursement
Canvassing Fee

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

9375.00

Transaction ID : SB17.9031.1

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. LORINSER, ROBERT JAMES, , ,

Mailing Address 1406 WEST AVENUE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	2	4

City
MARQUETTEState
MIZip Code
49855

FEC Identification Number

C H2MI01142

Purpose of Disbursement
Reimbursement expense

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6235.93

Transaction ID : SB17.9036

☐ Memo Item

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐	General
☐	Other (specify) ▼		

State: MI

District: 01

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

6235.93

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

A. North Compass Political, LLC

Mailing Address 405 West Greenlawn Ave

City
LansingState
MIZip Code
48910Purpose of Disbursement
Canvasser Salaries

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

6235.93

Transaction ID : SB17.9036.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LORINSER, ROBERT JAMES, , ,

Mailing Address 1406 WEST AVENUE

City
MARQUETTEState
MIZip Code
49855Purpose of Disbursement
Reimbursement Expense

Candidate Name

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State: MI

District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	2	4

FEC Identification Number

C H2MI01142

Amount of Each Disbursement this Period

5316.86

Transaction ID : SB17.9034

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. North Compass Political, LLC

Mailing Address 405 West Greenlawn Ave

City
LansingState
MIZip Code
48910Purpose of Disbursement
Canvasser Salaries

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

5316.86

Transaction ID : SB17.9034.0

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5316.86

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 41

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

A. McGrady, Sonya, , ,

Mailing Address PO Box 1293

City
EvansState
GAZip Code
30809Purpose of Disbursement
Compliance Service

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1575.00

Transaction ID : SB17.9026

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VAN

Mailing Address 655 15th St NW #650

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Campaign Database

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2075.04

Transaction ID : SB17.9027

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. North Compass Political, LLC

Mailing Address 405 West Greenlawn Ave

City
LansingState
MIZip Code
48910Purpose of Disbursement
Canvassers

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

984.52

Transaction ID : SB17.9030

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4634.56

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

37256.59

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 41

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF DR BOB

Full Name (Last, First, Middle Initial)

A. LORINSER, ROBERT JAMES, , ,

Mailing Address 1406 WEST AVENUE

City
MARQUETTEState
MIZip Code
49855Purpose of Disbursement
Loan repayment

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		16		2024

FEC Identification Number

C H2MI01142

Amount of Each Disbursement this Period

6500.00

Transaction ID : SB19A.9039

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6500.00

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

6500.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 39 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4110

FRIENDS OF DR BOB

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

LORINSER, ROBERT JAMES, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1406 WEST AVENUE

City

MARQUETTE

State

MI

ZIP Code

49855

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 16 / 2021

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

none

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 40 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4111

FRIENDS OF DR BOB

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

LORINSER, ROBERT JAMES, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1406 WEST AVENUE

City

MARQUETTE

State

MI

ZIP Code

49855

☒ Personal Funds of the Candidate

Original Amount of Loan

15000.00

Cumulative Payment To Date

6500.00

Balance Outstanding at Close of This Period

8500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 30 / 2021

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

none

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

8500.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 41 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4112

FRIENDS OF DR BOB

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

LORINSER, ROBERT JAMES, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1406 WEST AVENUE

City

MARQUETTE

State

MI

ZIP Code

49855

☒ Personal Funds of the Candidate

Original Amount of Loan

13500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

13500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
11 / 22 / 2021M M / D D / Y Y Y Y
/ / noneM M / D D / Y Y Y Y
/ / noneM M / D D / Y Y Y Y
/ / none

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

13500.00

TOTALS This Period (last page in this line only).....▶

27000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.