

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

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

FOR LINE NUMBER: PAGE 11 OF 83

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Michigan Republican Party**

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

**A. Lyons, Mitchell, W., Mr.,**

Mailing Address 8344 Woodcrest Dr NE

City  
Rockford

State  
MI

Zip Code  
49341-8507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Woodbury Financial

Occupation (for Individual)  
Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2017

**Transaction ID : AE579D6B164C74737B5D**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**B. Barnes, Robert, , Mr.,**

Mailing Address 1769 Hillwood Dr

City  
Bloomfield Hills

State  
MI

Zip Code  
48304-2416

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Belle Tire

Occupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2017

**Transaction ID : AC07F4D04EDEF43DB83B**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

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

**c. Flogaus-Dailey, Frances, K, Mrs.,**

Mailing Address 6520 Lakeshore St

City  
West Bloomfield

State  
MI

Zip Code  
48323-1429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2017

**Transaction ID : AFAB2E329BB8445348EC**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

10750.00