

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

Schwarz for Congress

ADDRESS (number and street)

P.O. Box 2063

Check if different than previously reported. (ACC)

Battle Creek

MI

49016

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00395822

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MI

07

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

11

07

2006

in the State of

MI

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

07

01

2006

through

07

19

2006

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

Jennifer Bertram

Signature of Treasurer

Electronically Filed by Jennifer Bertram

Date

10

15

2006

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

Office Use Only

**FEC FORM 3**  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Schwarz for Congress

Report Covering the Period:

From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	7

D	D
1	9

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	98348.00	1352728.34
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	98348.00	1347728.34
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	266176.97	1323136.95
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4176.45
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	266176.97	1318960.50
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	224251.08	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
Schwarz for Congress

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	7

D	D
1	9

Y	Y	Y	Y
2	0	0	6

**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).....

62075.00

506747.93

(ii) Unitemized.....

6227.00

68268.00

(iii) TOTAL of contributions

68302.00

575015.93

from individuals..... ▶

0.00

196.00

(b) Political Party Committees.....

30046.00

777516.41

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

98348.00

1352728.34

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

4176.45

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

0.00

850.00

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

98348.00

1357754.79

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	266176.97	1323136.95
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5000.00
21. OTHER DISBURSEMENTS.....	0.00	13812.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	266176.97	1341948.95

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	392080.05
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	98348.00
25. SUBTOTAL (add Line 23 and Line 24).....	490428.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	266176.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	224251.08

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) George Adam Mailing Address 22 Santalina Trail City State Zip Code Battle Creek MI 49014 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006 <b>Transaction ID:</b> 60727.C4700 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer: Kidney Health Clinic Occupation: Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) George Adam Mailing Address 22 Santalina Trail City State Zip Code Battle Creek MI 49014 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006 <b>Transaction ID:</b> 60727.C4699 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer: Kidney Health Clinic Occupation: Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Patricia Allen Mailing Address 227 East Emmet Street City State Zip Code Battle Creek MI 49017 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2006 <b>Transaction ID:</b> 60727.C4703 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer: RETIRED Occupation: Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
G. Mark Alyea

Mailing Address 6901 Lansing Ave

City State Zip Code  
Jackson MI 49201-8233

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

Name of Employer Occupation  
Alro Steel Corporation President and COO

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2006

Transaction ID: 60712.C4482

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Carl Angelo

Mailing Address 326 Cornell Dr

City State Zip Code  
Battle Creek MI 49017-4612

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

Name of Employer Occupation  
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 575.00

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2006

Transaction ID: 60727.C4706

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Ned Apigian

Mailing Address 5959 Rosetta St.

City State Zip Code  
Dearborn Heights MI 48127

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

Name of Employer Occupation  
Self Architect

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4690

Amount of Each Receipt this Period  
200.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Eugene Applebaum

Mailing Address 39400 Woodward Avenue  
Suite 100

City Bloomfield Hills State MI Zip Code 48304

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

Name of Employer Arbor Investments Group Occupation President & CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2006

Transaction ID: 60727.C4697

Amount of Each Receipt this Period  
400.00

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

**B.** Full Name (Last, First, Middle Initial)  
Eugene Applebaum

Mailing Address 39400 Woodward Avenue  
Suite 100

City Bloomfield Hills State MI Zip Code 48304

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

Name of Employer Arbor Investments Group Occupation President & CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2006

Transaction ID: 60727.C4696

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
John Axe

Mailing Address 21 Kersheval Avenue  
Suite 360

City Grosse Pointe Farm State MI Zip Code 48236

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

Name of Employer Axe And Ecklund, Pc Occupation Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 950.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 12 / 2006

Transaction ID: 60727.C4579

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Irene Bagby

Mailing Address 7821 Carlson Road

City State Zip Code  
Lansing MI 48917

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

Name of Employer Occupation  
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2006

Transaction ID: 60727.C4563

Amount of Each Receipt this Period  
50.00

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

**B.** Full Name (Last, First, Middle Initial)  
Shakeh Basmagian

Mailing Address 4420 Cherry Hill Dr.

City State Zip Code  
West Bloomfield MI 48323

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

Name of Employer Occupation  
HOMEMAKER Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4681

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mark Behnke

Mailing Address 474 Country Club Dr

City State Zip Code  
Battle Creek MI 49015-3624

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

Name of Employer Occupation  
Behnke, Inc. Operations Manager

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 850.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2006

Transaction ID: 60727.C4705

Amount of Each Receipt this Period  
600.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **900.00**

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



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Harvey Berman

Mailing Address 110 Miller, Ste. 300

City State Zip Code  
Ann Arbor MI 48104

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

Name of Employer Self Occupation  
Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 15 / 2006

Transaction ID: 60727.C4648

Amount of Each Receipt this Period  
200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ronald Bogdasarian

Mailing Address 2625 Newport Rd

City State Zip Code  
Ann Arbor MI 48103

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

Name of Employer Self Occupation  
Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 14 / 2006

Transaction ID: 60727.C4701

Amount of Each Receipt this Period  
50.00

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

**C.** Full Name (Last, First, Middle Initial)  
Michael Boulus

Mailing Address 4855 Buttercup Lane

City State Zip Code  
Okemos MI 48864

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

Name of Employer State Universities Of Michigan Occupation  
Executive Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 06 / 2006

Transaction ID: 60712.C4473

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **450.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Gregory Boyajian

Mailing Address 4384 Geisler Ct.

City Bloomfield State MI Zip Code 48301

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

Name of Employer Sun Medical Occupation Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4682

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Lisa Brown

Mailing Address 431 E. Hamilton Lane

City Battle Creek State MI Zip Code 49015

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2006

Transaction ID: 60727.C4568

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jo Buckenberger

Mailing Address 44 Bayshore Drive

City Battle Creek State MI Zip Code 49015

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4619

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Cheryl Buhr

Mailing Address 3105 Override

City Ann Arbor State MI Zip Code 48104

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

Name of Employer  
HOMEMAKER Occupation Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2006

Transaction ID: 60712.C4477

Amount of Each Receipt this Period  
100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Cheryl Buhr

Mailing Address 3105 Override

City Ann Arbor State MI Zip Code 48104

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

Name of Employer  
HOMEMAKER Occupation Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2006

Transaction ID: 60712.C4476

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Wayne Case

Mailing Address 612 S Fall River Dr

City Coldwater State MI Zip Code 49036-9134

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

Name of Employer  
Case Welding & Fabrication Occupation Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2006

Transaction ID: 60727.C4598

Amount of Each Receipt this Period  
50.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Howard Cash

Mailing Address 3975 Holden Drive

City State Zip Code  
Ann Arbor MI 48103

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

Name of Employer Gene Codes Corporation Occupation Ceo

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 05 / 2006

Transaction ID: 60712.C4444

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
John M. Chadwick

Mailing Address 5813 Bauman Rd

City State Zip Code  
Battle Creek MI 49017

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

Name of Employer Self Occupation Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 05 / 2006

Transaction ID: 60712.C4474

Amount of Each Receipt this Period  
400.00

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

**C.** Full Name (Last, First, Middle Initial)  
Charles Cherney

Mailing Address 25 West Michigan Avenue, #315

City State Zip Code  
Battle Creek MI 49017

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

Name of Employer Cherney & Associates Occupation Appraiser

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 11 / 2006

Transaction ID: 60727.C4614

Amount of Each Receipt this Period  
200.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Chris Christ

Mailing Address 247 Brewer Drive

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer  
SELF EMPLOYED

Occupation  
Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2150.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4630

Amount of Each Receipt this Period  
400.00

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

**B.** Full Name (Last, First, Middle Initial)  
John Collins

Mailing Address 116 Elsinore Ln

City State Zip Code  
Battle Creek MI 49015-7922

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

Name of Employer  
Lakeview Family Practice, P.c.

Occupation  
Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4702

Amount of Each Receipt this Period  
150.00

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

**C.** Full Name (Last, First, Middle Initial)  
Barbara Comai

Mailing Address 110 Shadywood Lane

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer  
Battle Creek Orthopedics

Occupation  
Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2006

Transaction ID: 60727.C4615

Amount of Each Receipt this Period  
200.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Paul Cook</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2006
Mailing Address 5840 North Chipman Road		Transaction ID: 60712.C4472
City State Zip Code Owosso MI 48867	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Wolverine Sign Works	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>B. Susan Cullman</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006
Mailing Address 812 Park Avenue		Transaction ID: 60727.C4653
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer HOMEMAKER	Occupation Homemaker	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Stephane Delaunay</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2006
Mailing Address 3 Heritage Oak Lane		Transaction ID: 60727.C4639
City State Zip Code Battle Creek MI 49016	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Radiology Consultants	Occupation Physician	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Anthony Derezinski

Mailing Address 1345 Glendaloch Circle

City State Zip Code  
Ann Arbor MI 48104

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

Name of Employer Occupation  
MASB Attorney

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

Transaction ID: 60727.C4642

Amount of Each Receipt this Period  
100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Paul Dimond

Mailing Address 1286 Stags Leap

City State Zip Code  
Ann Arbor MI 48103

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

Name of Employer Occupation  
Miller Canfield Attorney

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

Transaction ID: 60727.C4625

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Joseph Drolett

Mailing Address 5736 Whitehaven

City State Zip Code  
Lansing MI 48917

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

Name of Employer Occupation  
Delta Township Township Supervisor

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 12 / 2006

Transaction ID: 60727.C4569

Amount of Each Receipt this Period  
100.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 79
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Gregory Dunn

Mailing Address 225 Deer Path Lane

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer Occupation  
Atlas Sales, Inc. President

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2006

Transaction ID: 60727.C4591

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
George Eyster

Mailing Address 1475 Eply Road

City State Zip Code  
Williamston MI 48895

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

Name of Employer Occupation  
Msu Veterinarian

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1250.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4622

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Brennan Farrell

Mailing Address Post Office Box 860

City State Zip Code  
Pentwater MI 49449

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

Name of Employer Occupation  
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

300.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4588

Amount of Each Receipt this Period  
300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1800.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Ann Feeney		Date of Receipt MM / DD / YYYY 07 / 06 / 2006
Mailing Address 666 Washington St.		Transaction ID: 60712.C4471
City Chelsea	State MI	Zip Code 48118
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Chelsea Rhone, LLC	Occupation Manager	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Marsha Franke		Date of Receipt MM / DD / YYYY 07 / 14 / 2006
Mailing Address 410 N. Eagle Street		Transaction ID: 60727.C4633
City Marshall	State MI	Zip Code 49068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer HOMEMAKER	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Louis Giannunzio		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 414 N. Liberty		Transaction ID: 60712.C4478
City Marshall	State MI	Zip Code 49068-1230
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Southwestern Hospital	Occupation President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Donald Gilmer</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006	
Mailing Address 7021 North 46th Street		Transaction ID: 60727.C4634	
City State Zip Code Augusta MI 49012	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Kalamazoo County	Occupation Administrator		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1350.00		

Full Name (Last, First, Middle Initial) <b>B. Alvin Glick</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006	
Mailing Address 3100 E. High Street P.O. Box 927		Transaction ID: 60727.C4607	
City State Zip Code Jackson MI 49204	Amount of Each Receipt this Period 900.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Alro Steel Corporation	Occupation Ceo		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1900.00		

Full Name (Last, First, Middle Initial) <b>C. Alvin Glick</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006	
Mailing Address 3100 E. High Street P.O. Box 927		Transaction ID: 60727.C4606	
City State Zip Code Jackson MI 49204	Amount of Each Receipt this Period 1100.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Alro Steel Corporation	Occupation Ceo		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

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

Mailing Address 00856 First Street

City State Zip Code  
Charlevoix MI 49720

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 06 / 2006

Transaction ID: 60727.C4652

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
John Godfrey

Mailing Address 12 West Michigan Avenue

City State Zip Code  
Battle Creek MI 49017

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

Name of Employer GODFREY JEWELERS Occupation Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 12 / 2006

Transaction ID: 60727.C4575

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Paul Gregory

Mailing Address 124 Whisperwood Lane

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer Ionic Holdings, LLC Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

1650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 12 / 2006

Transaction ID: 60727.C4573

Amount of Each Receipt this Period  
400.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1150.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Paul Gregory

Mailing Address 124 Whisperwood Lane

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer  
Ionic Holdings, LLC

Occupation  
Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2050.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2006

**Transaction ID:** 60727.C4636

Amount of Each Receipt this Period  
400.00

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

**B.** Full Name (Last, First, Middle Initial)  
Edgar Hagopian

Mailing Address 850 South Old Woodward

City State Zip Code  
Birmingham MI 48009

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

Name of Employer  
Hagopian Rugs

Occupation  
Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2006

**Transaction ID:** 60727.C4693

Amount of Each Receipt this Period  
1500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Edward Haring

Mailing Address 308 Carpenter Drive

City State Zip Code  
Battle Creek MI 49017

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

Name of Employer  
KELLOGG COMMUNITY COLLEGE

Occupation  
President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
475.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 07 / 2006

**Transaction ID:** 60712.C4479

Amount of Each Receipt this Period  
200.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Cynthia Helber

Mailing Address 1850 Encore Lane

City State Zip Code  
Ann Arbor MI 48103

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4624

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Christopher Higgins

Mailing Address 3194 Nighthawk Lane

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4698

Amount of Each Receipt this Period  
400.00

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

**C.** Full Name (Last, First, Middle Initial)  
Herman Hintiryan

Mailing Address 3684 Valley View

City State Zip Code  
West Bloomfield MI 48323

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4723

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1650.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Howard Holmes, Jr.

Mailing Address 301 Barton Shore Drive

City State Zip Code  
Ann Arbor MI 48105

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

Name of Employer  
Chelsea Milling Company

Occupation  
Ceo

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
850.00

Date of Receipt  
MM / DD / YYYY  
07 / 09 / 2006

Transaction ID: 60727.C4709

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Fred Homann

Mailing Address 16385 17 1/2 Mile Road

City State Zip Code  
Marshall MI 49068

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4594

Amount of Each Receipt this Period  
2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Sherman W. Horn

Mailing Address 255 Reedy Court

City State Zip Code  
Dimondale MI 48821

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

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4560

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2600.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Anthony Hurst

Mailing Address 1600 Hatch Road

City State Zip Code  
Jackson MI 49201

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

Name of Employer Occupation  
Abecca Corporation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

**Transaction ID:** 60727.C4704

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Gregory Jamian

Mailing Address 1565 Lakewood Road

City State Zip Code  
Bloomfield Hills MI 48302

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

Name of Employer Occupation  
Oakland County Manager

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

**Transaction ID:** 60727.C4683

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
John Jamian

Mailing Address 1862 Chipping Way

City State Zip Code  
Bloomfield Hills MI 48302

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

Name of Employer Occupation  
Detroit Port Authority Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

**Transaction ID:** 60727.C4692

Amount of Each Receipt this Period  
300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Patricia Jensen

Mailing Address 34656 Pembroke

City Livonia State MI Zip Code 48152

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

Name of Employer Self Occupation Interior Designer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4629

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
George Johnson

Mailing Address 535 Griswold Suite 1200

City Detroit State MI Zip Code 48226

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

Name of Employer George Johnson & Company Occupation Managing Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2006

Transaction ID: 60727.C4531

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
John Kchikian

Mailing Address Post Office Box 244

City Boca Grande State FL Zip Code 33921

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4689

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Tricia Keith

Mailing Address 1918 Lloyd Avenue

City State Zip Code  
Royal Oak MI 48073

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

Name of Employer  
Blue Cross & Blue Shield of MI

Occupation  
Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4695

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Kevin Kelly

Mailing Address 825 Audubon

City State Zip Code  
East Lansing MI 48823

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

Name of Employer  
Michigan State Medical Society

Occupation  
Executive Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2006

Transaction ID: 60727.C4557

Amount of Each Receipt this Period  
175.00

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

**C.** Full Name (Last, First, Middle Initial)  
Alvin Kempf

Mailing Address 412 W. Main Street

City State Zip Code  
Grand Ledge MI 48837

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2006

Transaction ID: 60727.C4650

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **775.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ken Kevonian

Mailing Address 6630 Franklin Road

City Bloomfield State MI Zip Code 48301

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4680

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Thomas Krikorian

Mailing Address 2600 W. Long Lake Rd.

City West Bloomfield State MI Zip Code 48323

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4679

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Paul Kulhanjian

Mailing Address 3260 Bradway Blvd

City Bloomfield Hills State MI Zip Code 48301

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

Name of Employer Information Requested Occupation Information Requested  
RETIRED Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4684

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Raffi Kuredjian

Mailing Address 422 Dubuar Street

City Northville State MI Zip Code 48167

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

Name of Employer AT & T Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4555

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Susan Lackey

Mailing Address 16 Chestnut

City Chelsea State MI Zip Code 48118

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

Name of Employer Washtenaw Land Trust Occupation Executive Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2006

Transaction ID: 60727.C4600

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Patti Lingenberg

Mailing Address 848 Country Club Dr.

City Battle Creek State MI Zip Code 49015-3653

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2006

Transaction ID: 60727.C4616

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Dan Loepp</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2006	
Mailing Address 6069 Skyline Dr		Transaction ID: 60727.C4593	
City State Zip Code East Lansing MI 48823-1603	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Blue Cross/Blue Shield	Occupation Executive		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Joseph Mardelli</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006	
Mailing Address 46 Capercaille Lane		Transaction ID: 60727.C4637	
City State Zip Code Battle Creek MI 49014	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self	Occupation Physician		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>C. Sheldon Markel</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006	
Mailing Address 3975 Waldenwood Dr.		Transaction ID: 60727.C4647	
City State Zip Code Ann Arbor MI 48105	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self	Occupation Physician		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Charles McCann

Mailing Address 10550 Four Mile Road

City State Zip Code  
East Leroy MI 49051

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 07 / 2006

Transaction ID: 60712.C4480

Amount of Each Receipt this Period  
200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Robert McFee

Mailing Address 611 Jennings Lndg

City State Zip Code  
Battle Creek MI 49015-3528

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2006

Transaction ID: 60727.C4635

Amount of Each Receipt this Period  
400.00

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

**C.** Full Name (Last, First, Middle Initial)  
John Melangton

Mailing Address 3 Hiawatha Cove Trl., #8

City State Zip Code  
Battle Creek MI 49015-3591

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2006

Transaction ID: 60727.C4631

Amount of Each Receipt this Period  
400.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Janet Miller

Mailing Address 778 Toulouse

City State Zip Code  
Battle Creek MI 49017-3200

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

Name of Employer Occupation  
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2006

Transaction ID: 60727.C4611

Amount of Each Receipt this Period  
200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Nayiri Misirliyan

Mailing Address 22385 Worcester Dr.

City State Zip Code  
Novi MI 48374

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

Name of Employer Occupation  
HOMEMAKER Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4713

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Martin Mitchell

Mailing Address 551 Maple Knoll Road

City State Zip Code  
Coldwater MI 49036

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

Name of Employer Occupation  
Starr Commonwealth President

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4628

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1450.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Rd Musser		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006	
Mailing Address P.O. Box 286		Transaction ID: 60727.C4589	
City Mackinac Island	State MI	Amount of Each Receipt this Period 100.00	
Zip Code 49757		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Grand Hotel	Occupation Owner		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Rd Musser		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2006	
Mailing Address P.O. Box 286		Transaction ID: 60727.C4590	
City Mackinac Island	State MI	Amount of Each Receipt this Period 250.00	
Zip Code 49757		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Grand Hotel	Occupation Owner		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Gary Najarian		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006	
Mailing Address 44804 Aspen Ridge		Transaction ID: 60727.C4685	
City Northville	State MI	Amount of Each Receipt this Period 250.00	
Zip Code 48167		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation Retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Alphonsus Okwereogu

Mailing Address 4321 Aztec Way

City Okemos State MI Zip Code 48864

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

Name of Employer Self Occupation Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 07 / 2006

Transaction ID: 60727.C4654

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Susan Ordway

Mailing Address 4192 E. Gull Lake Drive

City Hickory Corners State MI Zip Code 49060

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2006

Transaction ID: 60727.C4603

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Marilyn Parks

Mailing Address 3 Hiawatha Cove Trl Apt 9

City Battle Creek State MI Zip Code 49015-3599

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 11 / 2006

Transaction ID: 60727.C4632

Amount of Each Receipt this Period  
400.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Lawrence Pawl

Mailing Address 515 Michigan, NE  
Suite 301

City State Zip Code  
Grand Rapids MI 49503

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

Name of Employer  
SELF EMPLOYED

Occupation  
Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 11 / 2006

Transaction ID: 60727.C4613

Amount of Each Receipt this Period  
200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Timothy Peterson

Mailing Address 431 Eastwood Shores

City State Zip Code  
Traverse City MI 49684

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 02 / 2006

Transaction ID: 60712.C4481

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Ann Rosenbaum Petredean

Mailing Address 26290 M-60 E.

City State Zip Code  
Homer MI 49245

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

Name of Employer  
CALHOUN COUNTY

Occupation  
Treasurer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2006

Transaction ID: 60727.C4617

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1400.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
George Petredean

Mailing Address 26290 M-60

City State Zip Code  
Homer MI 49245

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

Name of Employer  
Calhoun Foundry Company, Inc.

Occupation  
Chairman

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

**Transaction ID:** 60727.C4618

Amount of Each Receipt this Period  
200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Daniel Phelan

Mailing Address 2111 Emmons Rd

City State Zip Code  
Jackson MI 49201-8395

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

Name of Employer  
Jackson Community College

Occupation  
President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1175.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2006

**Transaction ID:** 60727.C4609

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Stephen Ranzini

Mailing Address 2015 Washtenaw Ave.

City State Zip Code  
Ann Arbor MI 48104

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

Name of Employer  
University Bank

Occupation  
Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

**Transaction ID:** 60727.C4641

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Margaret Ressler

Mailing Address 2960 Hickory Lane

City State Zip Code  
Ann Arbor MI 48104

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
07 / 05 / 2006

Transaction ID: 60712.C4475

Amount of Each Receipt this Period  
100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Douglas Roberts

Mailing Address 1853 Northgate Dr.

City State Zip Code  
East Lansing MI 48823

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

Name of Employer Michigan State University Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 19 / 2006

Transaction ID: 60727.C4592

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey Rumley

Mailing Address 951 Hampton

City State Zip Code  
Grosse Pointe MI 48236

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

Name of Employer Blue Cross & Blue Sheild of MI Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4694

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Marilyn Sackrider

Mailing Address 1633 E. Michigan Avenue

City State Zip Code  
Battle Creek MI 49014

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

Name of Employer Occupation  
HOMEMAKER Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1100.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4626

Amount of Each Receipt this Period  
1100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Michael Sandler

Mailing Address 4270 Barcroft Way

City State Zip Code  
West Bloomfield MI 48323

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

Name of Employer Occupation  
Henry Ford Health System Physician

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

300.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2006

Transaction ID: 60727.C4550

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Susan Sarin

Mailing Address 12792 Sleigh Trail

City State Zip Code  
Milford MI 48381

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

Name of Employer Occupation  
Cape Health Plan Ceo

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

700.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2006

Transaction ID: 60727.C4612

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1400.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Chad Schmucker

Mailing Address 1725 Probert

City State Zip Code  
Jackson MI 49203

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

Name of Employer Occupation  
Jackson Circuit Court Judge

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2006

**Transaction ID:** 60727.C4574

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Nancy Schuler

Mailing Address 17321 17 Mile Rd

City State Zip Code  
Marshall MI 49068

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

Name of Employer Occupation  
Schulers Restaurant Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1950.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2006

**Transaction ID:** 60727.C4523

Amount of Each Receipt this Period  
1950.00

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

004 Advertisement

**C.** Full Name (Last, First, Middle Initial)  
Joyce Seifert

Mailing Address 307 Beckett Park

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer Occupation  
RETIRED Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2006

**Transaction ID:** 60727.C4610

Amount of Each Receipt this Period  
200.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Thomas Simmer

Mailing Address 4975 S. Ridgeside Circle

City State Zip Code  
Ann Arbor MI 48105

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

Name of Employer Blue Cross & Blue Sheild of MI  
Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2006

Transaction ID: 60727.C4623

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 3390 Travis Pointe Rd. Ste. B

City State Zip Code  
Ann Arbor MI 48108

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

Name of Employer Travis Properties, Inc.  
Occupation Developer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 19 / 2006

Transaction ID: 60727.C4562

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Lawrence Sims

Mailing Address 783 Stoneham

City State Zip Code  
Saginaw MI 48603

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

Name of Employer Self  
Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 07 / 2006

Transaction ID: 60712.C4447

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1400.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Sidney Smith

Mailing Address 730 E. Bluegrass Road

City State Zip Code  
Mount Pleasant MI 48858

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

Name of Employer  
Smith Equities

Occupation  
Developer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 12 / 2006

Transaction ID: 60727.C4599

Amount of Each Receipt this Period  
2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Joyce Soebbing

Mailing Address 1102 OKeefe Road

City State Zip Code  
Marshall MI 49068

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 01 / 2006

Transaction ID: 60712.C4448

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Woodward Stover

Mailing Address 430 Oxford Road

City State Zip Code  
East Lansing MI 48823

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

Name of Employer  
MI Avenue Ventures

Occupation  
Banker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2006

Transaction ID: 60727.C4602

Amount of Each Receipt this Period  
2000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Barbara Sullivan

Mailing Address 9835 Whisperwood Lane

City State Zip Code  
Brighton MI 48116

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

Name of Employer  
HOMEMAKER

Occupation  
Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4645

Amount of Each Receipt this Period  
200.00

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

**B.** Full Name (Last, First, Middle Initial)  
John Surratt

Mailing Address 3750 Elizabeth Road

City State Zip Code  
Ann Arbor MI 48103

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

Name of Employer  
RETIRED

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4646

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Bradley Sweda

Mailing Address 602 Wyngate Dr.

City State Zip Code  
Rochester MI 48307

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

Name of Employer  
Genesys Hospital

Occupation  
Surgeon

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4567

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

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



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ardag Tachian

Mailing Address 23012 Argyle Ct.

City State Zip Code  
Novi MI 48374

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

Name of Employer Self Occupation  
Franchise Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4714

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Reza Tehrani

Mailing Address 1160 Lakeside Drive

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer Critical Pulmonary Care Occupation  
Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4627

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Edward Thawngmung

Mailing Address 33 N. 21st Street

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer Information Requested Occupation  
Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2006

Transaction ID: 60727.C4536

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1350.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Michael Timmis

Mailing Address 188 Cloverly Road

City State Zip Code  
Grosse Pointe MI 48236

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

Name of Employer Talon, Llc Occupation Chairman

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2006

Transaction ID: 60727.C4533

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
John Toth

Mailing Address 13798 Grandpoint Drive

City State Zip Code  
Cement City MI 49233

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

Name of Employer Blue Cross & Blue Sheild of MI Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4605

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Kirakos Vapurciyan

Mailing Address 2679 Sunnyknoll

City State Zip Code  
Berkley MI 48072

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4724

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Robert Vlastic

Mailing Address 38710 Woodward, Suite 100

City Bloomfield Hills State MI Zip Code 48304

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 05 / 2006

Transaction ID: 60727.C4597

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
James Walsh

Mailing Address P.O. Box 596

City Waterloo State IA Zip Code 50704

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

Name of Employer VGM, Inc. Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4621

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Eugene Wanger

Mailing Address 1735 Abington Place

City Lansing State MI Zip Code 48910-1116

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 975.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2006

Transaction ID: 60727.C4556

Amount of Each Receipt this Period  
400.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
David Waymire

Mailing Address 4557 Otto Rd

City State Zip Code  
Charlotte MI 48813-9723

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

Name of Employer  
Martin Waymire Advocacy Com.

Occupation  
Consultant

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 16 / 2006

**Transaction ID:** 60727.C4534

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Marc Weiser

Mailing Address 1068 West Bemis Road

City State Zip Code  
Saline MI 48176

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

Name of Employer  
Waypoint Ventures

Occupation  
Managing Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2100.00

Date of Receipt  
MM / DD / YYYY  
07 / 19 / 2006

**Transaction ID:** 60727.C4571

Amount of Each Receipt this Period  
2100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mary Weiser

Mailing Address 1068 W. Bemis Road

City State Zip Code  
Saline MI 48176

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

Name of Employer  
HOMEMAKER

Occupation  
Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2100.00

Date of Receipt  
MM / DD / YYYY  
07 / 19 / 2006

**Transaction ID:** 60727.C4572

Amount of Each Receipt this Period  
2100.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

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

Mailing Address 227 Chestnut Court

City Bloomfield State MI Zip Code 48304

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

Name of Employer ARC Occupation Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 17 / 2006

Transaction ID: 60727.C4548

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Phil Willis

Mailing Address 2545 Spring Arbor Road Suite 103

City Jackson State MI Zip Code 49203

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 14 / 2006

Transaction ID: 60727.C4717

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
William Winslow

Mailing Address 183 Turn Berry Ln

City Battle Creek State MI Zip Code 49015-9406

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

Name of Employer Albion Industries Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1550.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 19 / 2006

Transaction ID: 60727.C4561

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Paul Yangoutian

Mailing Address 19230 Fry Road

City Northville State MI Zip Code 48167

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

Name of Employer Self Occupation Developer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4725

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Charles Yessaian

Mailing Address 19230 Fry Road

City Northville State MI Zip Code 48167

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4687

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Tulie Yessaian

Mailing Address 19230 Fry Road

City Northville State MI Zip Code 48167

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

Name of Employer HOMEMAKER Occupation Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

Transaction ID: 60727.C4688

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 47 / 79	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Sophie Zaplitny

Mailing Address 6882 MORGAN RD E

City State Zip Code  
BATTLE CREEK MI 49017

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

Name of Employer Occupation  
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	4	/	2	0	0	6

Transaction ID: 60727.C4620

Amount of Each Receipt this Period  
200.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	62075.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 79
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
American Crystal Sugar Co. PAC

Mailing Address 101 North Third Street

City State Zip Code  
Moorhead MN 56560

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

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2006

**Transaction ID:** 60727.C4657

Amount of Each Receipt this Period  
2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
American Dental Political Action Cmte.

Mailing Address 1111 14th Street Nw, Suite 1100

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

**Transaction ID:** 60727.C4601

Amount of Each Receipt this Period  
1500.00

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

**C.** Full Name (Last, First, Middle Initial)  
American Waterways Operators - PAC

Mailing Address 801 N. Quincy Street, Ste. 200

City State Zip Code  
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00034678

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2006

**Transaction ID:** 60727.C4712

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 79
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)  
Schwarz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Armenian American Public Affairs Cmte.

Mailing Address PO Box 7421

City Bloomfield Hills State MI Zip Code 48302-7421

FEC ID number of contributing federal political committee. **C** C00355628

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2006

**Transaction ID:** 60727.C4686

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
ASG-MRG PAC

Mailing Address 32001 32nd Ave., S.

City Auburn State WA Zip Code 98001

FEC ID number of contributing federal political committee. **C** C00411694

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2006

**Transaction ID:** 60727.C4710

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 5915 Eastman Ave Ste 100 Suite 100

City Midland State MI Zip Code 48640-6824

FEC ID number of contributing federal political committee. **C** C00350462

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2006

**Transaction ID:** 60727.C4552

Amount of Each Receipt this Period  
3000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 79
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
Schwarz for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sherwood Boehlert Committee Mailing Address P.O. Box 819 City State Zip Code New Hartford NY 13413 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>7</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60727.C4726 Amount of Each Receipt this Period <table border="1"> <tr> <td>2000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		2	0	0	6	2000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		0	1		2	0	0	6														
2000.00																							
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>2000.00</td> </tr> </table>		2000.00																					
2000.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Horizon Lines Assoc. Good Govt. Fund Mailing Address 4064 Colony Road Suite 200 City State Zip Code Charlotte NC 28211 FEC ID number of contributing federal political committee. <b>C</b> C00385179		Date of Receipt <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>7</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60727.C4711 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	8		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		1	8		2	0	0	6														
500.00																							
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00																					
500.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Matthew W. Burke, M.D. Mailing Address 12675 Portsmouth Ct. City State Zip Code Plymouth MI 48170 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>7</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60727.C4596 Amount of Each Receipt this Period <table border="1"> <tr> <td>150.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	2		2	0	0	6	150.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		1	2		2	0	0	6														
150.00																							
Name of Employer Occupation Henry Ford Health System Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>150.00</td> </tr> </table>		150.00																					
150.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 79
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

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

Mailing Address 7525 Red River Road

City Wahpeton State ND Zip Code 58075

FEC ID number of contributing federal political committee. **C** C00164939

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2006

Transaction ID: 60727.C4715

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
MEBA PAF PAC

Mailing Address 444 N. Capitol Street, NW Ste. 800

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00279380

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 01 / 2006

Transaction ID: 60727.C4727

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
National Association of Letter Carriers

Mailing Address Natl. Assn. of Letter Carriers AF 100 Indiana Ave., NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2006

Transaction ID: 60727.C4525

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 79
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. National Pork Producers PORK PAC</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2006	
Mailing Address PO Box 10383		Transaction ID: 60727.C4656	
City Des Moines	State IA	Amount of Each Receipt this Period 1000.00	
Zip Code 50306-0383		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00201871			
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>B. OB-GYNs for Womens Health PAC</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2006	
Mailing Address PO Box 23498		Transaction ID: 60712.C4414	
City Washington	State DC	Amount of Each Receipt this Period 2500.00	
Zip Code 20026-3498		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00364158			
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Pioneer PAC</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 01 / 2006	
Mailing Address 412 First Street, SE Ste. 100		Transaction ID: 60727.C4728	
City Washington	State DC	Amount of Each Receipt this Period 4896.00	
Zip Code 20003		In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00325357		004 Website Ad - MLive.com	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4896.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8396.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 79
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

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

Mailing Address 1310 G Street, NW  
Ste. 600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00345629

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2006

Transaction ID: 60727.C4570

Amount of Each Receipt this Period  
5000.00

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

**B.** Full Name (Last, First, Middle Initial)  
United Transportaion Union PAC

Mailing Address 14600 Detroit Avenue

City Cleveland State OH Zip Code 44107

FEC ID number of contributing federal political committee. **C** C70000468

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2006

Transaction ID: 60727.C4595

Amount of Each Receipt this Period  
1500.00

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

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

Mailing Address 55 Glenlake Pkwy, NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2006

Transaction ID: 60727.C4655

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 79
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)  
Verizon Communications Inc Good Governme

Mailing Address 1717 Arch St Fl 47S

City Philadelphia State PA Zip Code 19103-2713

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 07 / 2006

Transaction ID: 60712.C4407

Amount of Each Receipt this Period  
 1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	30046.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. AAA Limosine Service</b>		<b>Transaction ID:</b> 60727.E1363 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 79 Beaver Ave., Ste. 6		Amount of Each Disbursement this Period 137.48
City Clinton State NJ Zip Code 08809-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Car Service	Candidate Name	CAR SERVICE
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. AAA Limosine Service</b>		<b>Transaction ID:</b> 60727.E1364 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 79 Beaver Ave., Ste. 6		Amount of Each Disbursement this Period 131.48
City Clinton State NJ Zip Code 08809-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Car Service	Candidate Name	CAR SERVICE
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Adams Outdoor Advertising</b>		<b>Transaction ID:</b> 60727.E1316 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 3801 Capitol City Blvd		Amount of Each Disbursement this Period 27650.00
City Lansing State MI Zip Code 48906-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Advertising	Candidate Name	ADVERTISING
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>27918.96</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Battle Creek Enquirer</b>		<b>Transaction ID:</b> 60727.E1396 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 155 Van Buren St W		Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City State Zip Code Battle Creek MI 49017-3002	Category/Type 001	
Purpose of Disbursement Subscription	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SUBSCRIPTION
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

Full Name (Last, First, Middle Initial) <b>B. The Bertram Group</b>		<b>Transaction ID:</b> 60727.E1317 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 2164 Beechnut Trl		Amount of Each Disbursement this Period 2900.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City State Zip Code Holt MI 48842-8784	Category/Type 003	
Purpose of Disbursement Fundraising Consulting Fee	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING CONSULTING FEE
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

Full Name (Last, First, Middle Initial) <b>C. The Bertram Group</b>		<b>Transaction ID:</b> 60727.E1388 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 6
Mailing Address 2164 Beechnut Trl		Amount of Each Disbursement this Period 103.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City State Zip Code Holt MI 48842-8784	Category/Type 001	
Purpose of Disbursement Reimbursement - mileage	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMBURSEMENT - MILEAGE
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3103.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. The Bertram Group</b>		<b>Transaction ID:</b> 60727.E1330 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 2164 Beechnut Trl		Amount of Each Disbursement this Period 2900.00
City Holt State MI Zip Code 48842-8784	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Consulting Fee Candidate Name	Category/Type 003	<b>FUNDRAISING CONSULTING FEE</b>
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Blues in a Basket</b>		<b>Transaction ID:</b> 60727.E1393 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 6135 E. Clinton Trail		Amount of Each Disbursement this Period 245.00
City Eaton Rapids State MI Zip Code 48827-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Event Entertainment Candidate Name	Category/Type 003	<b>EVENT ENTERTAINMENT</b>
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Capitol City Mailers</b>		<b>Transaction ID:</b> 60727.E1335 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6
Mailing Address 1611 North Grand River Avenue		Amount of Each Disbursement this Period 1224.20
City Lansing State MI Zip Code 48906-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Mailing Candidate Name	Category/Type 006	<b>MAILING</b>
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4369.20</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

<b>A. Capitol City Mailers</b> Full Name (Last, First, Middle Initial) Mailing Address 1611 North Grand River Avenue City Lansing State MI Zip Code 48906- Purpose of Disbursement Mailing 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>Transaction ID:</b> 60727.E1334 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6 Amount of Each Disbursement this Period 1237.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>MAILING</b>
--	--	---

<b>B. Century Marketing</b> Full Name (Last, First, Middle Initial) Mailing Address 3544 Sunnyside Lane City Markham State VA Zip Code 22643- Purpose of Disbursement Campaign Mail 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>Transaction ID:</b> 60727.E1319 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 7585.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>CAMPAIGN MAIL</b>
---	--	---

<b>C. Century Marketing</b> Full Name (Last, First, Middle Initial) Mailing Address 3544 Sunnyside Lane City Markham State VA Zip Code 22643- Purpose of Disbursement Campaign Mail 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>Transaction ID:</b> 60727.E1322 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 20180.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>CAMPAIGN MAIL</b>
---	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>29002.65</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Comcast Cable</b>		<b>Transaction ID:</b> 60727.E1351 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 6
Mailing Address 1500 Market Street		Amount of Each Disbursement this Period 622.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Philadelphia State PA Zip Code 19102-	Purpose of Disbursement Cable and Internet Candidate Name Category/Type 001	
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>CABLE AND INTERNET</b>

Full Name (Last, First, Middle Initial) <b>B. Mike Compagnoni</b>		<b>Transaction ID:</b> 60727.E1382 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 6
Mailing Address 3 Old Farm Hill Road		Amount of Each Disbursement this Period 250.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Newtown State CT Zip Code 06470-	Purpose of Disbursement Reimbursement - Mileage Candidate Name Category/Type 001	
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>REIMBURSEMENT - MILEAGE</b>

Full Name (Last, First, Middle Initial) <b>C. Paul Egnatuk</b>		<b>Transaction ID:</b> 60727.E1365 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 711 1/2 Mansion Street		Amount of Each Disbursement this Period 227.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marshall State MI Zip Code 49068-	Purpose of Disbursement Reimbursement - Mileage Candidate Name Category/Type 001	
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>REIMBURSEMENT - MILEAGE</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1100.30
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Paul Egnatuk</b>		Transaction ID: 60727.E1366 Date of Disbursement 07 / 01 / 2006	
Mailing Address 711 1/2 Mansion Street		Amount of Each Disbursement this Period 580.96	
City Marshall State MI Zip Code 49068-	Purpose of Disbursement Reimbursement: SEE BELOW Candidate Name	002 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		REIMBURSEMENT: SEE BELOW	

Full Name (Last, First, Middle Initial) <b>B. Sofitel Lafayette Square</b>		Transaction ID: 60727.E1367 Date of Disbursement 06 / 15 / 2006	
Mailing Address 806 15th Street, NW		Amount of Each Disbursement this Period 580.96	
City Washington State DC Zip Code 20005-	Purpose of Disbursement Hotel Candidate Name	002 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		[MEMO ITEM] MEMO: HOTEL	

Full Name (Last, First, Middle Initial) <b>C. FedEx Kinkos</b>		Transaction ID: 60727.E1350 Date of Disbursement 07 / 10 / 2006	
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 22.89	
City Lansing State MI Zip Code 48911-4109	Purpose of Disbursement Overnight Shipping Candidate Name	001 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		OVERNIGHT SHIPPING	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	603.85
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. FedEx Kinkos</b>		<b>Transaction ID:</b> 60727.E1358 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 26.98
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. FedEx Kinkos</b>		<b>Transaction ID:</b> 60727.E1357 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 12.32
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. General Motors Corporation</b>		<b>Transaction ID:</b> 60727.E1327 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 6
Mailing Address 1660 L Street, NW		Amount of Each Disbursement this Period 534.30
City Washington State DC Zip Code 20036-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Travel Expense	Candidate Name	TRAVEL EXPENSE
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	573.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Glengariff Group, Inc.</b>		<b>Transaction ID: 60727.E1315</b> Date of Disbursement 07 / 01 / 2006
Mailing Address 1653 West Hollywood Ave.		Amount of Each Disbursement this Period 11500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  POLLING
City Chicago State IL Zip Code 60660-		
Purpose of Disbursement Polling Candidate Name	005 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Glengariff Group, Inc.</b>		<b>Transaction ID: 60727.E1314</b> Date of Disbursement 07 / 01 / 2006
Mailing Address 1653 West Hollywood Ave.		Amount of Each Disbursement this Period 3500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  POLLING EXPENSE
City Chicago State IL Zip Code 60660-		
Purpose of Disbursement Polling Expense Candidate Name	005 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Greater Jackson Chamber of Commerce</b>		<b>Transaction ID: 60727.E1331</b> Date of Disbursement 07 / 13 / 2006
Mailing Address 1 S Jackson Sq Ste 1100 Suite 1100		Amount of Each Disbursement this Period 260.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  MEMBERSHIP FEES
City Jackson State MI Zip Code 49201-2240		
Purpose of Disbursement Membership Fees Candidate Name	012 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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15260.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Greenstone Farm Credit Services Eaton</b>		<b>Transaction ID: 60727.E1343</b> Date of Disbursement 07 / 11 / 2006
Mailing Address 241 S. Cochran		Amount of Each Disbursement this Period 512.59
City Charlotte State MI Zip Code 48813-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 4-H Livestock Auction	Candidate Name	4-H LIVESTOCK AUCTION
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Hampton Inn</b>		<b>Transaction ID: 60727.E1361</b> Date of Disbursement 07 / 17 / 2006
Mailing Address 525 N. Canal		Amount of Each Disbursement this Period 434.50
City Lansing State MI Zip Code 48917-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Hotel	Candidate Name	HOTEL
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Gary Herbert</b>		<b>Transaction ID: 60727.E1371</b> Date of Disbursement 07 / 01 / 2006
Mailing Address 6600 Herbert Road		Amount of Each Disbursement this Period 119.53
City Delton State MI Zip Code 49046-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES:SEE BELOW	Candidate Name	OFFICE SUPPLIES:SEE BELOW
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1066.62</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Transaction ID: 60727.E1372 Date of Disbursement 07 / 01 / 2006	
Mailing Address 3003 East Michigan Avenue		Amount of Each Disbursement this Period 119.53	
City Lansing State MI Zip Code 48912-	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Gary Herbert</b>		Transaction ID: 60727.E1373 Date of Disbursement 07 / 01 / 2006	
Mailing Address 6600 Herbert Road		Amount of Each Disbursement this Period 395.85	
City Delton State MI Zip Code 49046-	Purpose of Disbursement Reimbursement: Mileage Candidate Name Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		REIMBURSEMENT: MILEAGE	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Gary Herbert</b>		Transaction ID: 60727.E1375 Date of Disbursement 07 / 10 / 2006	
Mailing Address 6600 Herbert Road		Amount of Each Disbursement this Period 268.58	
City Delton State MI Zip Code 49046-	Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name Category/Type [ ]	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		REIMBURSEMENT: SEE BELOW	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	664.43
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 65 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

<b>A. Meijers</b> Full Name (Last, First, Middle Initial) Mailing Address 5125 W Saginaw Hwy City Lansing State MI Zip Code 48864- Purpose of Disbursement Office Supplies 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: 60727.E1380 Date of Disbursement 07 / 10 / 2006 Amount of Each Disbursement this Period 21.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
--	--	---

<b>B. Office Max</b> Full Name (Last, First, Middle Initial) Mailing Address 5503 W Saginaw Hwy City Lansing State MI Zip Code 48917-1920 Purpose of Disbursement Office Supplies 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: 60727.E1376 Date of Disbursement 07 / 10 / 2006 Amount of Each Disbursement this Period 104.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
---	--	--

<b>C. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address 3003 East Michigan Avenue City Lansing State MI Zip Code 48912- Purpose of Disbursement Office Supplies 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: 60727.E1379 Date of Disbursement 07 / 10 / 2006 Amount of Each Disbursement this Period 34.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
---	--	---

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Transaction ID: 60727.E1377 Date of Disbursement 07 / 10 / 2006	
Mailing Address 3003 East Michigan Avenue		Amount of Each Disbursement this Period 95.37	
City Lansing State MI Zip Code 48912-	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Gary Herbert</b>		Transaction ID: 60727.E1374 Date of Disbursement 07 / 10 / 2006	
Mailing Address 6600 Herbert Road		Amount of Each Disbursement this Period 530.48	
City Delton State MI Zip Code 49046-	Purpose of Disbursement Reimbursement - Mileage Candidate Name Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		REIMBURSEMENT - MILEAGE	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. JTV</b>		Transaction ID: 60727.E1333 Date of Disbursement 07 / 14 / 2006	
Mailing Address 152 W Michigan Ave		Amount of Each Disbursement this Period 1000.00	
City Jackson State MI Zip Code 49201-1302	Purpose of Disbursement Ad Buy Candidate Name Category/Type 004	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		AD BUY	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1530.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

<b>A. Andrea Malewski</b> Full Name (Last, First, Middle Initial) Mailing Address 1308 Hall St. City Eaton Rapids State MI Zip Code 48827- Purpose of Disbursement Reimbursement - Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60727.E1383</b> Date of Disbursement 07 / 02 / 2006 Amount of Each Disbursement this Period 210.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>REIMBURSEMENT - MILEAGE</b>
--	--	--

<b>B. MBNA America</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 15286 City Wilmington State DE Zip Code 19886- Purpose of Disbursement CREDIT CARD: SEE BELOW 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>Transaction ID: 60727.E1390</b> Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 1007.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>CREDIT CARD: SEE BELOW</b>
---	--	--

<b>C. Continental Airlines</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 4607 City Houston State TX Zip Code 77210- Purpose of Disbursement Airline Ticket 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>Transaction ID: 60727.E1391</b> Date of Disbursement 06 / 05 / 2006 Amount of Each Disbursement this Period 977.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> <b>MEMO: AIRLINE TICKET</b>
---	--	---

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1217.98</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

<b>A. Louie Meizlish</b> Full Name (Last, First, Middle Initial) Mailing Address 81 Latta Street City Beverly Hills State MI Zip Code 49017-		<b>Transaction ID: 60727.E1384</b> Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 487.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>REIMBURSEMENT: SEE BELOW</b>
Purpose of Disbursement REIMBURSEMENT: SEE BELOW 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:		Category/Type REIMBURSEMENT: SEE BELOW

<b>B. Office Max</b> Full Name (Last, First, Middle Initial) Mailing Address 5503 W Saginaw Hwy City Lansing State MI Zip Code 48917-1920		<b>Transaction ID: 60727.E1387</b> Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 487.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
Purpose of Disbursement Office Supplies 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:		Category/Type 001

<b>C. Louie Meizlish</b> Full Name (Last, First, Middle Initial) Mailing Address 81 Latta Street City Beverly Hills State MI Zip Code 49017-		<b>Transaction ID: 60727.E1385</b> Date of Disbursement 07 / 10 / 2006 Amount of Each Disbursement this Period 397.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>REIMBURSEMENT - MILEAGE</b>
Purpose of Disbursement Reimbursement - Mileage 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:		Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	885.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

<b>A. Louie Meizlish</b> Full Name (Last, First, Middle Initial) Mailing Address 81 Latta Street City Beverly Hills State MI Zip Code 49017-		<b>Transaction ID: 60727.E1386</b> Date of Disbursement 07 / 15 / 2006 Amount of Each Disbursement this Period 398.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>REIMBURSEMENT - MILEAGE</b>
Purpose of Disbursement Reimbursement - Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type 001

<b>B. Michigan Retailers Association</b> Full Name (Last, First, Middle Initial) Mailing Address 603 South Washington City Lansing State MI Zip Code 48933-		<b>Transaction ID: 60727.E1349</b> Date of Disbursement 07 / 10 / 2006 Amount of Each Disbursement this Period 184.89 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>PROCESSING FEE</b>
Purpose of Disbursement Processing Fee 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) ▼		Category/Type 001

<b>C. Moby Dick Airways</b> Full Name (Last, First, Middle Initial) Mailing Address 1530 16th Street Suite 602 City Washington State DC Zip Code 20009-		<b>Transaction ID: 60727.E1332</b> Date of Disbursement 07 / 13 / 2006 Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TRAVEL EXPENSE</b>
Purpose of Disbursement Travel Expense 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) ▼		Category/Type 002

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5583.04</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Chris Moore</b>		Transaction ID: 60727.E1368 Date of Disbursement MM / DD / YYYY 07 / 01 / 2006
Mailing Address 1730 Haslett Road		Amount of Each Disbursement this Period 189.31
City East Lansing State MI Zip Code 48823-	Purpose of Disbursement Reimbursement - Mileage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>REIMBURSEMENT - MILEAGE</b>

Full Name (Last, First, Middle Initial) <b>B. Chris Moore</b>		Transaction ID: 60727.E1370 Date of Disbursement MM / DD / YYYY 07 / 15 / 2006
Mailing Address 1730 Haslett Road		Amount of Each Disbursement this Period 179.84
City East Lansing State MI Zip Code 48823-	Purpose of Disbursement Reimbursement - Mileage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>REIMBURSEMENT - MILEAGE</b>

Full Name (Last, First, Middle Initial) <b>C. Chris Moore</b>		Transaction ID: 60727.E1369 Date of Disbursement MM / DD / YYYY 07 / 19 / 2006
Mailing Address 1730 Haslett Road		Amount of Each Disbursement this Period 341.41
City East Lansing State MI Zip Code 48823-	Purpose of Disbursement Reimbursement - Mileage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>REIMBURSEMENT - MILEAGE</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>710.56</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Northwest Airlines</b>		<b>Transaction ID:</b> 60727.E1354 <b>Date of Disbursement</b> MM / DD / YYYY 07 / 11 / 2006
Mailing Address 2700 Lone Oak Pkwy		Amount of Each Disbursement this Period 299.20
City Saint Paul State MN Zip Code 55121-1546	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Airline Ticket	Candidate Name	002 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) ▼	AIRLINE TICKET

Full Name (Last, First, Middle Initial) <b>B. Northwest Airlines</b>		<b>Transaction ID:</b> 60727.E1355 <b>Date of Disbursement</b> MM / DD / YYYY 07 / 14 / 2006
Mailing Address 2700 Lone Oak Pkwy		Amount of Each Disbursement this Period 50.00
City Saint Paul State MN Zip Code 55121-1546	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Travel	Candidate Name	002 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) ▼	TRAVEL

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		<b>Transaction ID:</b> 60727.E1346 <b>Date of Disbursement</b> MM / DD / YYYY 07 / 06 / 2006
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 8818.01
City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll	Candidate Name	001 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) ▼	PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9167.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Transaction ID: 60727.E1347 Date of Disbursement 07 / 07 / 2006
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 3242.83
City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name	001 Category/Type	PAYROLL
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Transaction ID: 60727.E1348 Date of Disbursement 07 / 10 / 2006
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 144.24
City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Processing Fee Candidate Name	001 Category/Type	PAYROLL PROCESSING FEE
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Pioneer PAC</b>		Transaction ID: 60727.C4728IK Date of Disbursement 07 / 01 / 2006
Mailing Address 412 First Street, SE Ste. 100		Amount of Each Disbursement this Period 4896.00
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Website Ad - MLive.com Candidate Name	004 Category/Type	IN KIND: WEBSITE AD - MLI-VE.COM
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8283.07
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Q 1 Video Network</b>		<b>Transaction ID:</b> 60727.E1323 <b>Date of Disbursement</b> MM / DD / YYYY 07 / 01 / 2006
Mailing Address P.O. Box 620		Amount of Each Disbursement this Period 378.00
City Coldwater State MI Zip Code 49036-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Media Buy	Candidate Name	Category/Type 004
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) ▼	MEDIA BUY

Full Name (Last, First, Middle Initial) <b>B. Nick Romley</b>		<b>Transaction ID:</b> 60727.E1341 <b>Date of Disbursement</b> MM / DD / YYYY 07 / 10 / 2006
Mailing Address 7228 Greenfarm Road		Amount of Each Disbursement this Period 273.43
City West Bloomfield State MI Zip Code 48322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES: SEE BELOW	Candidate Name	Category/Type 001
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) ▼	OFFICE SUPPLIES: SEE BELOW

Full Name (Last, First, Middle Initial) <b>C. Staples</b>		<b>Transaction ID:</b> 60727.E1342 <b>Date of Disbursement</b> MM / DD / YYYY 07 / 10 / 2006
Mailing Address 3003 East Michigan Avenue		Amount of Each Disbursement this Period 273.43
City Lansing State MI Zip Code 48912-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	Category/Type 001
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) ▼	[MEMO ITEM] MEMO: OFFICE SUPPLIES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	651.43
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. Nick Romley</b>		<b>Transaction ID:</b> 60727.E1337 Date of Disbursement 07 / 14 / 2006
Mailing Address 7228 Greenfarm Road		Amount of Each Disbursement this Period 788.16
City West Bloomfield State MI Zip Code 48322-	Purpose of Disbursement OFFICE SUPPLIES: SEE BELOW 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) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  OFFICE SUPPLIES: SEE BELOW

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		<b>Transaction ID:</b> 60727.E1340 Date of Disbursement 07 / 13 / 2006
Mailing Address 5503 W Saginaw Hwy		Amount of Each Disbursement this Period 14.82
City Lansing State MI Zip Code 48917-1920	Purpose of Disbursement Office Supplies 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) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) <b>C. Staples</b>		<b>Transaction ID:</b> 60727.E1339 Date of Disbursement 07 / 12 / 2006
Mailing Address 3003 East Michigan Avenue		Amount of Each Disbursement this Period 84.34
City Lansing State MI Zip Code 48912-	Purpose of Disbursement Office Supplies 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) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	788.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

**A.** Us Postmaster, Lansing

Full Name (Last, First, Middle Initial)  
Mailing Address: Downtown Station

City: Lansing State: MI Zip Code: 48933-

Purpose of Disbursement: Postage  
Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 60727.E1338  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**[MEMO ITEM]**  
MEMO: POSTAGE

**B.** Nancy Schuler

Full Name (Last, First, Middle Initial)  
Mailing Address: 17321 17 Mile Rd

City: Marshall State: MI Zip Code: 49068-

Purpose of Disbursement: Advertisement  
Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 60727.C4523IK  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

IN KIND: ADVERTISEMENT

**C.** Schulers Restaurant

Full Name (Last, First, Middle Initial)  
Mailing Address: 115 S. Eagle Street

City: Marshall State: MI Zip Code: 49068-

Purpose of Disbursement: Catering  
Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 60727.E1359  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

CATERING

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. TDS Metrocom</b>		<b>Transaction ID:</b> 60727.E1352 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address 525 Junction Road Suite 6000		Amount of Each Disbursement this Period 374.32
City Madison State WI Zip Code 53717-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Phone Bill	Candidate Name	001 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) ▼	PHONE BILL

Full Name (Last, First, Middle Initial) <b>B. TDS Metrocom</b>		<b>Transaction ID:</b> 60727.E1353 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address 525 Junction Road Suite 6000		Amount of Each Disbursement this Period 388.66
City Madison State WI Zip Code 53717-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Phone Bill	Candidate Name	001 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) ▼	PHONE BILL

Full Name (Last, First, Middle Initial) <b>C. Team Telecom</b>		<b>Transaction ID:</b> 60727.E1321 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 116 Bailey Street		Amount of Each Disbursement this Period 14300.35
City East Lansing State MI Zip Code 48823-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Voter Contact	Candidate Name	001 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) ▼	VOTER CONTACT

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15063.33
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. The John Truscott Group</b>		<b>Transaction ID:</b> 60727.E1318 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 124 West Allegan Street Suite 2010		Amount of Each Disbursement this Period 21425.45
City Lansing State MI Zip Code 48933-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>MEDIA BUY</b>	
Purpose of Disbursement Media Buy Candidate Name		004 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. The John Truscott Group</b>		<b>Transaction ID:</b> 60727.E1325 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 6
Mailing Address 124 West Allegan Street Suite 2010		Amount of Each Disbursement this Period 51384.65
City Lansing State MI Zip Code 48933-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>MEDIA BUY</b>	
Purpose of Disbursement Media Buy Candidate Name		004 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. The John Truscott Group</b>		<b>Transaction ID:</b> 60727.E1326 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 6
Mailing Address 124 West Allegan Street Suite 2010		Amount of Each Disbursement this Period 45000.00
City Lansing State MI Zip Code 48933-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>MEDIA BUY</b>	
Purpose of Disbursement Media Buy Candidate Name		004 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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	117810.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial) <b>A. The Technicom Group</b>		<b>Transaction ID:</b> 60727.E1320 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 14100 Oakland Ave.		Amount of Each Disbursement this Period 14300.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Highland Park State MI Zip Code 48203-	Purpose of Disbursement Campaign Mail 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) ▼	CAMPAIGN MAIL Category/Type: 006

Full Name (Last, First, Middle Initial) <b>B. The Technicom Group</b>		<b>Transaction ID:</b> 60727.E1329 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 14100 Oakland Ave.		Amount of Each Disbursement this Period 2977.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Highland Park State MI Zip Code 48203-	Purpose of Disbursement Campaign Mail 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) ▼	CAMPAIGN MAIL Category/Type: 006

Full Name (Last, First, Middle Initial) <b>C. Us Postmaster, Lansing</b>		<b>Transaction ID:</b> 60727.E1345 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address Downtown Station		Amount of Each Disbursement this Period 195.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lansing State MI Zip Code 48933-	Purpose of Disbursement Postage 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) ▼	POSTAGE Category/Type: 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	17473.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 79

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

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

NAME OF COMMITTEE (In Full)  
Schwarz for Congress

Full Name (Last, First, Middle Initial)  
**A.** Us Postmaster, Lansing

Mailing Address Downtown Station

City Lansing State MI Zip Code 48933-

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 60727.E1344  
Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

8.13

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

POSTAGE

Full Name (Last, First, Middle Initial)  
**B.** Us Postmaster, Lansing

Mailing Address Downtown Station

City Lansing State MI Zip Code 48933-

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 60727.E1356  
Date of Disbursement

07 / 11 / 2006

Amount of Each Disbursement this Period

312.00

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

POSTAGE

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

320.13

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

265186.63