

CERTIFIED MAIL
JUL 13 1990

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
JUL 15 1990
AM 11:18
U.S. DEPARTMENT OF JUSTICE
FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20543

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

FRIENDS FOR JIM DINGEMAN

ADDRESS (number and street) ☐ Check if different than previously reported.

4284 GRATIOT

CITY, STATE and ZIP CODE

STATE/DISTRICT

PORT HURON, MICHIGAN 48060 12th DISTRICT

2. FEC IDENTIFICATION NUMBER

C-00239459

3. IS THIS REPORT AN AMENDMENT?

☐ YES

☐ NO

4. TYPE OF REPORT

☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid-Year Report (Non-election Year Only)

☐ Twelfth day report preceding

(Type of Election)

election on _____ in the State of _____

☐ Thirtieth day report following the General Election on

_____ in the State of _____

☐ Termination Report

This report contains activity for

☐ Primary Election

☐ General Election

☐ Special Election

☐ Runoff Election

SUMMARY

5. Covering Period 4/1/90 through 6/30/90

COLUMN A
This Period

COLUMN B
Calendar Year-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions (other than loans) (from Line 11(e))

38,912.99

69,115.99

(b) Total Contribution Refunds (from Line 20(d))

30.00

30.00

(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))

38,882.99

69,085.99

7. Net Operating Expenditures

(a) Total Operating Expenditures (from Line 17)

60,471.69

83,032.38

(b) Total Offsets to Operating Expenditures (from Line 14)

(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))

60,471.69

83,032.38

8. Cash on Hand at Close of Reporting Period (from Line 27)

58,434.08

9. Debts and Obligations Owed TO the Committee
(Itemize all on Schedule C and/or Schedule D)

-0-

10. Debts and Obligations Owed BY the Committee
(Itemize all on Schedule C and/or Schedule D)

86,845.90

For further information
contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-376-3120

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

ARNOLD KRIEGER

Signature of Treasurer

Date

X 7/13/90

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

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) FRIENDS FOR JIM DINGEMAN		Report Covering the Period: From: 4/1/90 To: 6/30/90	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)		33,001.56	
(ii) Unitemized			
(iii) Total of contributions from individuals		33,001.56	62,204.56
(b) Political Party Committees		2,578.27	2,578.27
(c) Other Political Committees (such as PACs)		2,720.00	3,720.00
(d) The Candidate		613.16	613.16
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))		38,912.99	69,115.99
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.			
13. LOANS:			
(a) Made or Guaranteed by the Candidate		1,954.56	1,954.56
(b) All Other Loans			
(c) TOTAL LOANS (add 13(a) and (b))		1,954.56	1,954.56
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)			
15. OTHER RECEIPTS (Dividends, Interest, etc.)		1,368.16	3,436.88
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		42,235.71	74,507.43
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		60,471.69	83,032.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.			
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate		-0-	50,000.00
(b) Of All Other Loans			
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		-0-	50,000.00
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		30.00	30.00
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)			
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		30.00	30.00
21. OTHER DISBURSEMENTS			
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21).		60,501.69	133,062.38

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 76,700.06	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 42,235.71	24
25. SUBTOTAL (add Line 23 and Line 24)	\$ 118,935.77	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).	\$ 60,501.69	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25).	\$ 58,434.08	27

90014020495

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
1 29
FOR LINE NUMBER
11(a)(1)

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

NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Anonymous Persons Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/25	Amount of Each Receipt this Period 20.00
B. Full Name, Mailing Address and ZIP Code James C. Acheson P.O. Box 610 489 Port Huron, MI 48061 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/7	Amount of Each Receipt this Period 100.00
C. Full Name, Mailing Address and ZIP Code Monroe or Linda Adams 516 Wellington Crescent Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4/19	Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and ZIP Code Randolph J. Agley 114 Lothrop Grosse Pointe Farms, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Talon, Inc. Occupation Chairman Aggregate Year-to-Date > \$	Date (month, day, year) 4/27	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code S. Akram Ali 3270 Wildheim Drive Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/30	Amount of Each Receipt this Period 50.00
F. Full Name, Mailing Address and ZIP Code Terrie A. Alfonse 20737 Mack Ave. Grosse Pointe Woods, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/14	Amount of Each Receipt this Period 100.00
G. Full Name, Mailing Address and ZIP Code Dorothy W. Almen 1525 N. Fordson Dr. Oklahoma City, OK 73127 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/30	Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)

1,020.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE **2** OF **29**
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code <i>Marvin R. Anderson</i> <i>17 Deeplands Ct.</i> <i>Detroit, MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>25.00</i>	Date (month, day, year) <i>5/4</i>	Amount of Each Receipt this Period <i>25.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Annie Andros</i> <i>42 Breitmeyer Pl.</i> <i>Mt. Clemens, MI 48043</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>30.00</i>	Date (month, day, year) <i>5/15</i>	Amount of Each Receipt this Period <i>30.00</i>
C. Full Name, Mailing Address and ZIP Code <i>Edward F. Andrews, Jr.</i> <i>567 Purdy</i> <i>Birmingham, MI</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>30.00</i>	Date (month, day, year) <i>5/22</i>	Amount of Each Receipt this Period <i>30.00</i>
D. Full Name, Mailing Address and ZIP Code <i>Elaine Arnold</i> <i>36118 Del Ray</i> <i>Sterling Heights, MI 48310</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>5.00</i>	Date (month, day, year) <i>5/25</i>	Amount of Each Receipt this Period <i>5.00</i>
E. Full Name, Mailing Address and ZIP Code <i>Shamshad Anwar</i> <i>1201 Stone Street, Suite 3</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>75.00</i>	Date (month, day, year) <i>6/30</i>	Amount of Each Receipt this Period <i>75.00</i>
F. Full Name, Mailing Address and ZIP Code <i>Dean J. Ausilio</i> <i>38800 Ryan, Ste. 100</i> <i>Sterling Heights, MI 48310</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>50.00</i>	Date (month, day, year) <i>5/25</i>	Amount of Each Receipt this Period <i>50.00</i>
G. Full Name, Mailing Address and ZIP Code <i>D.R. Austin</i> <i>333 Fort Street</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>30.00</i>	Date (month, day, year) <i>5/22</i>	Amount of Each Receipt this Period <i>30.00</i>

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 3 OF 29
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code John G. Bacon 44 First Street Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer self Occupation Attorney Aggregate Year-to-Date > \$ 230.00	Date (month, day, year) 5/25 6/26	Amount of Each Receipt this Period 30.00 100.00
B. Full Name, Mailing Address and ZIP Code Dr. Robert S. Bailey 2880 Bardamar Dr. Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 75.00	Date (month, day, year) 6/30	Amount of Each Receipt this Period 75.00
C. Full Name, Mailing Address and ZIP Code Thomas C. Barrett 2516 Pine Grove Ave. Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50.00	Date (month, day, year) 6/26	Amount of Each Receipt this Period 50.00
D. Full Name, Mailing Address and ZIP Code Mark A. Baun 34 Beacon Hill Grosse Pointe Farms, MI 48230 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 200.00	Date (month, day, year) 6/20	Amount of Each Receipt this Period 200.00
E. Full Name, Mailing Address and ZIP Code Lois J. Beard 1283 Woodbridge St. Clair Shores, MI 48080 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 30.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 20.00
F. Full Name, Mailing Address and ZIP Code William C. Beardslee 2256 N. Channel Dr. Harpers Island, MI 48025 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 6/20	Amount of Each Receipt this Period 100.00
G. Full Name, Mailing Address and ZIP Code Dr. Carl G. Becker 21035 Balfour Rd. Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 75.00	Date (month, day, year) 5/15	Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Dr. Archie Bedell 20071 White Oaks Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 75.00	Date (month, day, year) 4/7	Amount of Each Receipt this Period 25.00
B. Full Name, Mailing Address and ZIP Code Albert Beste 1325 Woodbridge Dr. St. Clair Shores, MI 48080 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5.00	Date (month, day, year) 4/9	Amount of Each Receipt this Period 5.00
C. Full Name, Mailing Address and ZIP Code Russell Bishop, III P.O. Box 5711 Incline Village, NV 89450 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/30	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code Hubert J. Bohle 314 Riviera Drive St. Clair Shores, MI 48080 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 130.00	Date (month, day, year) 5/25 6/30	Amount of Each Receipt this Period 30.00 100.00
E. Full Name, Mailing Address and ZIP Code William P. Bonbright 102 Touraine Grosse Pointe Farms, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 200.00	Date (month, day, year) 6/30	Amount of Each Receipt this Period 200.00
F. Full Name, Mailing Address and ZIP Code Joseph Bond 20222 Ten Mile Road St. Clair Shores, MI 48080 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 5/25	Amount of Each Receipt this Period 20.00
G. Full Name, Mailing Address and ZIP Code Ralph H. Booth II 274 Provencal Grosse Pointe, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Self Occupation Media Executive Aggregate Year-to-Date > \$	Date (month, day, year) 5/22	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

1130.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary PagePAGE 5 OF 29
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Robert C. Brandenburg 17396 Delawere Utica, MI 48037 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 30.00	Date (month, day, year) 5/25	Amount of Each Receipt this Period 30.00
B. Full Name, Mailing Address and ZIP Code James B. Bridge 2916 Linda Court Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50.00	Date (month, day, year) 6/30	Amount of Each Receipt this Period 50.00
C. Full Name, Mailing Address and ZIP Code Barrett O. Brink 516 Sunningdale Dr. Grosse Pointe Shores, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 20.00
D. Full Name, Mailing Address and ZIP Code Gibson H. Bryan 1596 Lancaster Terrace Jacksonville, FL 32204 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 6/7	Amount of Each Receipt this Period 100.00
E. Full Name, Mailing Address and ZIP Code David B. Burns 1226 Minnie Street Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/15	Amount of Each Receipt this Period 10.00
F. Full Name, Mailing Address and ZIP Code Keith Carabell 33 N. River Road Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/25	Amount of Each Receipt this Period 20.00
G. Full Name, Mailing Address and ZIP Code Howard R. Carroll 25 Bellevue St. Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE 6 OF 29
FOR LINE NUMBER 11 (A)(i)

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NAME OF COMMITTEE (in Full)

Friends for Jim Dugeman

A. Full Name, Mailing Address and ZIP Code <i>Dr. M. Chetty</i> <i>P.O. Box 611087</i> <i>Port Huron, MI 48061</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>50.00</i>	Date (month, day, year) <i>6/30</i>	Amount of Each Receipt this Period <i>50.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Donald Chamberlin</i> <i>150 Country Club Dr.</i> <i>Grosse Pointe Farms, MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>100.00</i>	Date (month, day, year) <i>4/27</i>	Amount of Each Receipt this Period <i>100.00</i>
C. Full Name, Mailing Address and ZIP Code <i>Roy D. Chapin, Jr.</i> <i>234 Touraine</i> <i>Grosse Pointe Farms, MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>100.00</i>	Date (month, day, year) <i>6/26</i>	Amount of Each Receipt this Period <i>100.00</i>
D. Full Name, Mailing Address and ZIP Code <i>John Chamura</i> <i>32466 Gilbert Dr.</i> <i>Warren, MI 48093</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>20.00</i>	Date (month, day, year) <i>5/25</i>	Amount of Each Receipt this Period <i>20.00</i>
E. Full Name, Mailing Address and ZIP Code <i>Mark Clark</i> <i>802 Sanborn St.</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>20.00</i>	Date (month, day, year) <i>5/22</i>	Amount of Each Receipt this Period <i>20.00</i>
F. Full Name, Mailing Address and ZIP Code <i>Michael Connolly</i> <i>181 Merriweather Rd.</i> <i>Grosse Pointe Farms, MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Cross Wrock</i> Occupation <i>Attorney</i> Aggregate Year-to-Date > \$ <i>250.00</i>	Date (month, day, year) <i>4/21</i>	Amount of Each Receipt this Period <i>250.00</i>
G. Full Name, Mailing Address and ZIP Code <i>James T. Corden</i> <i>300 County Building</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>50.00</i>	Date (month, day, year) <i>6/30</i>	Amount of Each Receipt this Period <i>50.00</i>

SUBTOTAL of Receipts This Page (optional)

590.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code <i>Mrs. Doris Coyle</i> <i>17200 Maumee</i> <i>Grosse Pointe, MI 48230</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>200.00</i>	Date (month, day, year) <i>6/26</i>	Amount of Each Receipt this Period <i>200.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
B. Full Name, Mailing Address and ZIP Code <i>Thomas Coyle</i> <i>320 McKinley Road</i> <i>Grosse Pointe Farms, MI 48236</i>	Name of Employer <i>Midwest Marketing</i> Occupation <i>Marketing Specialist</i>	Date (month, day, year) <i>6/26</i>	Amount of Each Receipt this Period <i>250.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ <i>250.00</i>		
C. Full Name, Mailing Address and ZIP Code <i>Dickinson, Wright, Moon, Van Aussen & Freeman</i> <i>800 First Natl. Building</i> <i>Detroit, MI 48226</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>200.00</i>	Date (month, day, year) <i>6/14</i>	Amount of Each Receipt this Period <i>200.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
D. Full Name, Mailing Address and ZIP Code <i>Peter Dingeman</i> <i>6069 Brynarthrop Dr.</i> <i>Utica, MI 48087</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>15.00</i>	Date (month, day, year) <i>6/20</i>	Amount of Each Receipt this Period <i>15.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
E. Full Name, Mailing Address and ZIP Code <i>Anthony Dinoto, Jr.</i> <i>27760 Wagner</i> <i>Warren, MI 48093</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>55.00</i>	Date (month, day, year) <i>4/11</i> <i>6/26</i>	Amount of Each Receipt this Period <i>20.00</i> <i>25.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code <i>Michael B. Disser</i> <i>25 Beacon Hill</i> <i>Grosse Pointe Farms, MI 48236</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>100.00</i>	Date (month, day, year) <i>5/22</i>	Amount of Each Receipt this Period <i>100.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
G. Full Name, Mailing Address and ZIP Code <i>John L. Drummy</i> <i>120 Tonnancour</i> <i>Grosse Pointe Farms, MI 48236</i>	Name of Employer <i>Drummy Oldsmobile</i> Occupation <i>Auto Dealer</i>	Date (month, day, year) <i>4/6</i>	Amount of Each Receipt this Period <i>1000.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

1,810.00

TOTAL This Period (last page this line number only)

90014020503

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code

James Duren
4143 Old Forge Dr.
Port Huron, MI 48060

Name of Employer

Date (month,
day, year)

6/30

Amount of Each
Receipt this Period

50.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

50.00

B. Full Name, Mailing Address and ZIP Code

Robert Eastman
3476 Eastman Dr.
Flushing, MI 49433

Name of Employer

Date (month,
day, year)

4/6
5/1

Amount of Each
Receipt this Period

500.00
500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

1000.00

C. Full Name, Mailing Address and ZIP Code

John Ermler
30025 Wagner
Warren, MI 48093

Name of Employer

Date (month,
day, year)

5/22
6/26

Amount of Each
Receipt this Period

20.00
50.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

70.00

D. Full Name, Mailing Address and ZIP Code

Robert Evans, Sr.
200 Ren Cen, Suite 2055
Detroit, MI 48243

Name of Employer

Date (month,
day, year)

4/24

Amount of Each
Receipt this Period

1000.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

1000.00

E. Full Name, Mailing Address and ZIP Code

Alfred J. Fisher III
166 Touraine Road
Grosse Pointe Farms, MI 48236

Name of Employer

Date (month,
day, year)

5/30

Amount of Each
Receipt this Period

2000.00

Receipt For:

☒ Primary

☒ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

2000.00

F. Full Name, Mailing Address and ZIP Code

Barbara M. Fisher
166 Touraine Road
Grosse Pointe Farms, MI 48236

Name of Employer

Date (month,
day, year)

5/30

Amount of Each
Receipt this Period

2000.00

Receipt For:

☒ Primary

☒ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

2000.00

G. Full Name, Mailing Address and ZIP Code

David T. Fischer
P.O. Box 909
Troy, MI 48069

Name of Employer

Date (month,
day, year)

5/15

Amount of Each
Receipt this Period

500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

500.00

SUBTOTAL of Receipts This Page (optional)

6620.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 9 OF 29
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Mary H. Fitch 37105 Charter Oaks Blvd. Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 5/25	Amount of Each Receipt this Period 20.00
B. Full Name, Mailing Address and ZIP Code David K. Fitzsimons 165 Cloverly Road Grosse Pointe Farms, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Copper & Brass Sales, Inc. Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) 5/4	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Walter B. Ford, II 248 Provencal Road Grosse Pointe Farms, MI 48234 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Self Occupation Businessman Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6/21	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Mark Forton 48143 Mallard New Baltimore, MI 48047 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 6/20	Amount of Each Receipt this Period 20.00
E. Full Name, Mailing Address and ZIP Code Allan Foss 59600 Wardenman New Haven, MI 48048 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2.00	Date (month, day, year) 5/30	Amount of Each Receipt this Period 1.00
F. Full Name, Mailing Address and ZIP Code Roland Frascchetti 22576 Ardmore Park St. Clair Shores, MI 48081 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Macomb County Occupation County Commissioner Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 6/30	Amount of Each Receipt this Period 20.00
G. Full Name, Mailing Address and ZIP Code William Froberg 754 Huntington Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 30.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)

841.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code

Walter F. Fuller
985 SE 19 Ave, # 106
Deerfield Beach, FL 33441

Name of Employer

N/A

Date (month, day, year)

5/22

Amount of Each Receipt this Period

1000.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Retired

Aggregate Year-to-Date > \$

1000.00

B. Full Name, Mailing Address and ZIP Code

William Fuller
1100 Westwood
Birmingham, MI 48009

Name of Employer

Date (month, day, year)

5/22

Amount of Each Receipt this Period

30.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

70.00

C. Full Name, Mailing Address and ZIP Code

William Fuller
4001 Haggerty Road
West Bloomfield, MI 48033

Name of Employer

Bay Pointe Golf Club

Date (month, day, year)

5/11

Amount of Each Receipt this Period

1000.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

President

Aggregate Year-to-Date > \$

1000.00

D. Full Name, Mailing Address and ZIP Code

Edward A. Fuller
4001 Haggerty Road
West Bloomfield, MI 48033

Name of Employer

Bay Pointe Golf Club

Date (month, day, year)

5/30

Amount of Each Receipt this Period

500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Executive

Aggregate Year-to-Date > \$

500.00

E. Full Name, Mailing Address and ZIP Code

J. Eric Gambrell
2540 Cold Spring
Bloomfield Hills, MI 48013

Name of Employer

Date (month, day, year)

5/25

Amount of Each Receipt this Period

30.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

30.00

F. Full Name, Mailing Address and ZIP Code

Neil Georgi
80 Woodland Shore
Grosse Pointe, MI 48236

Name of Employer

Date (month, day, year)

6/30

Amount of Each Receipt this Period

100.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

100.00

G. Full Name, Mailing Address and ZIP Code

Judson S. Gilbert, II
2696 Pte. Tremble Rd.
Algonac, MI 48001

Name of Employer

Date (month, day, year)

4/3

Amount of Each Receipt this Period

25.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

25.00

SUBTOTAL of Receipts This Page (optional)

2685.00

TOTAL This Period (last page this line number only)

00014020305

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Paul Goebel, Jr. 511 F Waters Building Grand Rapids, MI 49503 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and ZIP Code Keith Gornick P.O. Box 85 Gaylord, MI 49735 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Gornick Enterprises Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) 4/3	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code Gilbert Gove 268 Cloverly Road Grosse Pointe Farms, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50.00	Date (month, day, year) 6/21	Amount of Each Receipt this Period 50.00
D. Full Name, Mailing Address and ZIP Code Walter Graves 27765 Moran St. Mt. Clemens, MI 48045 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 70.00	Date (month, day, year) 5/22 5/1	Amount of Each Receipt this Period 20.00 50.00
E. Full Name, Mailing Address and ZIP Code Scott Gregory 9666 E. Jefferson Detroit, MI 48214 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 20.00
F. Full Name, Mailing Address and ZIP Code E. Mark Gregory 495 Deeplands Grosse Pointe, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 30.00	Date (month, day, year) 5/15	Amount of Each Receipt this Period 30.00
G. Full Name, Mailing Address and ZIP Code Carl Haas 582 N. Riverside Ave. St. Clair, MI 48079 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Blue Water Plastics Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) 5/15	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

1520.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Mike Hall 15623 E. Ten Mile East Detroit, MI 48021 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 20.00
B. Full Name, Mailing Address and ZIP Code James Halushka 4443 Fox Hill Sterling Heights, MI 48310 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 5/25	Amount of Each Receipt this Period 20.00
C. Full Name, Mailing Address and ZIP Code Robert Harrington 6003-B Riverside Ave New York, NY 10471 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 5/25	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and ZIP Code Donald Harrison 23322 Greencrest Dr. St. Clair Shores, MI 48080 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 150.00	Date (month, day, year) 4/21	Amount of Each Receipt this Period 150.00
E. Full Name, Mailing Address and ZIP Code John Heeran 23107 N. Rosedale Ct. St. Clair Shores, MI 48080 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 4/6	Amount of Each Receipt this Period 20.00
F. Full Name, Mailing Address and ZIP Code Thomas Higginbottom 1311 S. Renaud Grosse Pointe Woods, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 30.00	Date (month, day, year) 5/15	Amount of Each Receipt this Period 30.00
G. Full Name, Mailing Address and ZIP Code Alfred Hillenbrand 407 Lothrop Grosse Pointe Farms, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/30	Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)

440.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Kermit Hilles Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 6/7	Amount of Each Receipt this Period 20.00
B. Full Name, Mailing Address and ZIP Code Dr. David Hitzlop 1024 Superior St., Floor 2 Port Huron, MI 48040 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 75.00	Date (month, day, year) 6/26	Amount of Each Receipt this Period 75.00
C. Full Name, Mailing Address and ZIP Code William Howenstein Leo Stephens Rd. Grosse Pointe Farms, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Copper & Brass Sales Occupation Businessman Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6/14	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Dr. Benjamin John 4460 Gratiot Port Huron, MI 48000 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 75.00	Date (month, day, year) 6/30	Amount of Each Receipt this Period 75.00
E. Full Name, Mailing Address and ZIP Code Dr. Choochart Kasemsarn 940 N 3rd St. St. Clair, MI 48079 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50.00	Date (month, day, year) 6/30	Amount of Each Receipt this Period 50.00
F. Full Name, Mailing Address and ZIP Code Gregory Kassab 310 Piquette St. Detroit, MI 49202 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Stainless, Inc. Occupation CEO Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6/26	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code Ron Keine 35765 Groesbeck Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 30.00	Date (month, day, year) 5/11	Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Christopher Kellerman 3300 Timberline Drive Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/7	Amount of Each Receipt this Period 200.00
B. Full Name, Mailing Address and ZIP Code Knowles & Nickerson P.O. Box 61 - 1024 Port Huron, MI 48061 - 1024 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/30	Amount of Each Receipt this Period 100.00
C. Full Name, Mailing Address and ZIP Code Fred Koppitch, Jr. 724 Patton Detroit, MI 48225 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/7	Amount of Each Receipt this Period 15.00
D. Full Name, Mailing Address and ZIP Code Francis Krajenke, Sr. Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/25	Amount of Each Receipt this Period 50.00
E. Full Name, Mailing Address and ZIP Code William Laurie, Jr. 121 Merriweather Grosse Pointe Farms, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/20	Amount of Each Receipt this Period 50.00
F. Full Name, Mailing Address and ZIP Code Bill Lee 3461 Gratiot Mt. Clemens, MI 48046 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/15	Amount of Each Receipt this Period 30.00
G. Full Name, Mailing Address and ZIP Code Werner Lehmann 6995 Meadowlake Birmingham, MI 48010 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/11	Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)

465.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code

*John Lehnner
76 S Wilson Blvd.
Mt. Clemens, MI 48043*

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

5/25

30.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *30.00*

B. Full Name, Mailing Address and ZIP Code

*Gary LeRoy
4155 Quaker Hill
Port Huron, MI 48060*

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

6/30

50.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *80.00*

C. Full Name, Mailing Address and ZIP Code

*Lisa Letarte
23707 Whitlay Dr.
Mt. Clemens, MI 48043*

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

5/25

30.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *30.00*

D. Full Name, Mailing Address and ZIP Code

*Fred Linscheid
4090 Fairway
Port Huron, MI 48060*

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

5/22

30.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *30.00*

E. Full Name, Mailing Address and ZIP Code

*Russell Lockhart
27587 W 26 Mile Road
New Haven, MI 48048*

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

6/14

10.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *10.00*

F. Full Name, Mailing Address and ZIP Code

*Thomas Mackey
515 Rivard Blvd.
Grosse Pointe, MI 48230*

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

5/30

100.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *100.00*

G. Full Name, Mailing Address and ZIP Code

*Craig Manser
3864 Deerwood Ct.
Northville, MI 48167*

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

5/25

20.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *70.00*

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code <i>Patrick Mansfield</i> <i>73 Muskoka</i> <i>Grosse Pointe Farms, MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>100.00</i>	Date (month, day, year) <i>4/19</i>	Amount of Each Receipt this Period <i>100.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Paul Marco</i> <i>458 Chalfonte</i> <i>Grosse Pointe Farms MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>200.00</i>	Date (month, day, year) <i>6/26</i>	Amount of Each Receipt this Period <i>200.00</i>
C. Full Name, Mailing Address and ZIP Code <i>Marco Timmis & Inman</i> <i>20180 Mack Ave.</i> <i>Grosse Pointe, MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>200.00</i>	Date (month, day, year) <i>6/26</i>	Amount of Each Receipt this Period <i>200.00</i>
D. Full Name, Mailing Address and ZIP Code <i>Paul Maxwell</i> <i>2915 Lapeer</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>25.00</i>	Date (month, day, year) <i>5/25</i>	Amount of Each Receipt this Period <i>25.00</i>
E. Full Name, Mailing Address and ZIP Code <i>Kenneth Meade</i> <i>130 Kercheval</i> <i>Grosse Pointe Farms, MI 48236</i> Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer <i>Self</i> Occupation <i>Auto Dealer</i> Aggregate Year-to-Date > \$ <i>1,500</i>	Date (month, day, year) <i>4/19</i> <i>4/19</i>	Amount of Each Receipt this Period <i>500.00</i> <i>1000.00</i>
F. Full Name, Mailing Address and ZIP Code <i>Bruce Birnbauer</i> <i>269 Cloverly</i> <i>Grosse Pointe Farms, MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>100.00</i>	Date (month, day, year) <i>5/25</i>	Amount of Each Receipt this Period <i>100.00</i>
G. Full Name, Mailing Address and ZIP Code <i>L. William Moll</i> <i>94 Merriweather</i> <i>Grosse Pointe, MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>25.00</i>	Date (month, day, year) <i>6/26</i>	Amount of Each Receipt this Period <i>25.00</i>

SUBTOTAL of Receipts This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code

*Donald Moore
P.O. box 281
Pearl Beach, MI 48052*

Name of Employer

Date (month, day, year)

6/30

Amount of Each Receipt this Period
50.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *50.00*

B. Full Name, Mailing Address and ZIP Code

*Franklin H. Moore, Jr.
200 S. Riverside
St. Clair, MI 48079*

Name of Employer

Date (month, day, year)

6/26

Amount of Each Receipt this Period
100.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *350.00*

C. Full Name, Mailing Address and ZIP Code

*Michael Morian
46127 Lacrosse
Mt. Clemens, MI 48044*

Name of Employer

Date (month, day, year)

5/22

Amount of Each Receipt this Period
30.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *30.00*

D. Full Name, Mailing Address and ZIP Code

*Franklin Mortimer, II
2804 Bardamar Dr.
Port Huron, MI 48060*

Name of Employer

Date (month, day, year)

6/26

Amount of Each Receipt this Period
25.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *25.00*

E. Full Name, Mailing Address and ZIP Code

*William A. Mosher
336 Huron Ave.
Port Huron, MI 48060*

Name of Employer

Date (month, day, year)

5/11

Amount of Each Receipt this Period
100.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *100.00*

F. Full Name, Mailing Address and ZIP Code

*Anthony Mourad
739 S. Rosedale Ct.
Grosse Pointe Woods, MI 48074*

Name of Employer

Date (month, day, year)

6/26

Amount of Each Receipt this Period
250.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *1,250.00*

G. Full Name, Mailing Address and ZIP Code

*Charles Muer
1615 N. River Rd.
St. Clair, MI 48079*

Name of Employer

Date (month, day, year)

6/7

Amount of Each Receipt this Period
100.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ *100.00*

SUBTOTAL of Receipts This Page (optional)

655.00

TOTAL This Period (last page this line number only)

90014020313

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code <i>Joseph Munern</i> <i>30327 Gregory</i> <i>Sterling Heights, MI 48072</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>20.00</i>	Date (month, day, year) <i>5/25</i>	Amount of Each Receipt this Period <i>20.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
B. Full Name, Mailing Address and ZIP Code <i>Walter McCain</i> <i>35775 Byriver Dr.</i> <i>Mt. Clemens, MI 48043</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>25.00</i>	Date (month, day, year) <i>4/27</i>	Amount of Each Receipt this Period <i>25.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
C. Full Name, Mailing Address and ZIP Code <i>Stanley McDonald</i> <i>900 N. Riverside</i> <i>SE. Clair, MI 48019</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>75.00</i>	Date (month, day, year) <i>6/30</i>	Amount of Each Receipt this Period <i>75.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
D. Full Name, Mailing Address and ZIP Code <i>Gary McElwee</i> <i>129 E. High St.</i> <i>Hellertown, PA 18055</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>10.00</i>	Date (month, day, year) <i>6/7</i>	Amount of Each Receipt this Period <i>10.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
E. Full Name, Mailing Address and ZIP Code <i>Thomas McGarron</i> <i>111 Touraine</i> <i>Grosse Pointe Farms, MI 48236</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>100.00</i>	Date (month, day, year) <i>4/6</i>	Amount of Each Receipt this Period <i>100.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code <i>Bill McMachen</i> <i>44437 Thunder Bay</i> <i>Mt. Clemens, MI 48045</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>100.00</i>	Date (month, day, year) <i>5/25</i>	Amount of Each Receipt this Period <i>100.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
G. Full Name, Mailing Address and ZIP Code <i>Brian McNally</i> <i>1064 Country Club Dr.</i> <i>SE. Clair Shores, MI 48082</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>10.00</i>	Date (month, day, year) <i>4/6</i>	Amount of Each Receipt this Period <i>10.00</i>
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code <i>Dr. Edward Nebel</i> <i>2117 N. River Rd.</i> <i>St. Clair, MI 48079</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>75.00</i>	Date (month, day, year) <i>6/30</i>	Amount of Each Receipt this Period <i>75.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Daniel Nicholas</i> <i>1515 Georgia Ave.</i> <i>Marysville, MI 48040</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>25.00</i>	Date (month, day, year) <i>5/25</i>	Amount of Each Receipt this Period <i>25.00</i>
C. Full Name, Mailing Address and ZIP Code <i>David Nicholson</i> <i>4500 Lakeshore Rd.</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>20.00</i>	Date (month, day, year) <i>5/22</i>	Amount of Each Receipt this Period <i>20.00</i>
D. Full Name, Mailing Address and ZIP Code <i>Clas Nilstoft</i> <i>414 E. Super Rd.</i> <i>Bad Axe, MI 48413</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Self</i> Occupation <i>Businessman</i> Aggregate Year-to-Date > \$ <i>250.00</i>	Date (month, day, year) <i>6/26</i>	Amount of Each Receipt this Period <i>250.00</i>
E. Full Name, Mailing Address and ZIP Code <i>Nancy Nuss</i> <i>11323 Alger</i> <i>Warren, MI 48093</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>20.00</i>	Date (month, day, year) <i>5/25</i>	Amount of Each Receipt this Period <i>20.00</i>
F. Full Name, Mailing Address and ZIP Code <i>Ernest Oskin</i> <i>952 N. Riverside Ave.</i> <i>St. Clair, MI 48079</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>100.00</i>	Date (month, day, year) <i>4/6</i>	Amount of Each Receipt this Period <i>100.00</i>
G. Full Name, Mailing Address and ZIP Code <i>Starr Papsdorf</i> <i>38441 Wooster</i> <i>Mt. Clemens, MI 48043</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>10.00</i>	Date (month, day, year) <i>4/10</i>	Amount of Each Receipt this Period <i>10.00</i>

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code <i>Dr. V.D. Parekh</i> <i>1201 Stone St</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>100.00</i>	Date (month, day, year) <i>6/30</i>	Amount of Each Receipt this Period <i>100.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Dr. Vraj Parikh</i> <i>2906 Canal Dr</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>50.00</i>	Date (month, day, year) <i>6/30</i>	Amount of Each Receipt this Period <i>50.00</i>
C. Full Name, Mailing Address and ZIP Code <i>Rocco Patamia</i> <i>35530 Morris</i> <i>Fraser, MI 48026</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>20.00</i>	Date (month, day, year) <i>5/22</i>	Amount of Each Receipt this Period <i>20.00</i>
D. Full Name, Mailing Address and ZIP Code <i>Margaret Peabody</i> <i>277 Mirabeau Pl.</i> <i>Grosse Pointe, MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>30.00</i>	Date (month, day, year) <i>5/25</i>	Amount of Each Receipt this Period <i>30.00</i>
E. Full Name, Mailing Address and ZIP Code <i>James Pellerito</i> <i>22518 La Von</i> <i>St. Clair Shores, MI 48061</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>20.00</i>	Date (month, day, year) <i>4/3</i>	Amount of Each Receipt this Period <i>20.00</i>
F. Full Name, Mailing Address and ZIP Code <i>Norman Peskar</i> <i>2006 W Valley Road</i> <i>Bloomfield Hills, MI 48013</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Automotive Moulding</i> Occupation <i>President</i> Aggregate Year-to-Date > \$ <i>250.00</i>	Date (month, day, year) <i>4/3</i>	Amount of Each Receipt this Period <i>250.00</i>
G. Full Name, Mailing Address and ZIP Code <i>John Piceu</i> <i>24671 Telegraph Rd.</i> <i>Southfield, MI 48075</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>200.00</i>	Date (month, day, year) <i>4/9</i>	Amount of Each Receipt this Period <i>200.00</i>

SUBTOTAL of Receipts This Page (optional)

670.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code <i>C. Francis Pillsbury, Jr.</i> <i>4510 Lakeshore, No 110</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) <i>5/4</i>	Amount of Each Receipt this Period <i>100.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Ernie Fuller</i> <i>8600 PGA Drive</i> <i>Walled Lake, MI 48088</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Pinewood Development</i> Occupation <i>President</i> Aggregate Year-to-Date > \$	Date (month, day, year) <i>5/30</i>	Amount of Each Receipt this Period <i>500.00</i>
C. Full Name, Mailing Address and ZIP Code <i>Richard Platt</i> <i>381 Country Club Lane</i> <i>Grosse Pointe Farms, MI 48236</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Self</i> Occupation <i>Businessman</i> Aggregate Year-to-Date > \$	Date (month, day, year) <i>6/14</i>	Amount of Each Receipt this Period <i>300.00</i>
D. Full Name, Mailing Address and ZIP Code <i>Joseph Poli</i> <i>17100 E 14 St.</i> <i>Hayward, CA 94541</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) <i>6/14</i>	Amount of Each Receipt this Period <i>30.00</i>
E. Full Name, Mailing Address and ZIP Code <i>Doug Povenz</i> <i>5130 Lakeshore Rd.</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) <i>5/4</i>	Amount of Each Receipt this Period <i>50.00</i>
F. Full Name, Mailing Address and ZIP Code <i>Ken Prather</i> <i>5 Stratford Place</i> <i>Grosse Pointe, MI 48230</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) <i>6/26</i>	Amount of Each Receipt this Period <i>200.00</i>
G. Full Name, Mailing Address and ZIP Code <i>Carl Pruehs</i> <i>11455 Kingston</i> <i>Fraser, MI 48026</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) <i>4/6</i>	Amount of Each Receipt this Period <i>35.00</i>

SUBTOTAL of Receipts This Page (optional)

\$ *1215.00*

TOTAL This Period (last page this line number only)

SCHEDULE A

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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Judith Kemejes 58 S Highland Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/11 20.00	Amount of Each Receipt this Period 20.00
B. Full Name, Mailing Address and ZIP Code Colleen Rhodes 35502 Groesbeck Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/25 30.00	Amount of Each Receipt this Period 30.00
C. Full Name, Mailing Address and ZIP Code John Robbins 3145 Monticello Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4/6 25.00	Amount of Each Receipt this Period 25.00
D. Full Name, Mailing Address and ZIP Code Regan Rohde 534 Stratford Pl., Apt. 1E Chicago, IL 60657 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/15 100.00	Amount of Each Receipt this Period 100.00
E. Full Name, Mailing Address and ZIP Code Irene Roman 37067 Charter Oakes Blvd. Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/25 20.00	Amount of Each Receipt this Period 20.00
F. Full Name, Mailing Address and ZIP Code Diane Ross 22874 23 Mile Road Mt. Clemens, MI 48044 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4/19 10.00	Amount of Each Receipt this Period 10.00
G. Full Name, Mailing Address and ZIP Code Dr. Alexander Ruthven 1209 10 St. Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/30 50.00	Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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

NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Mohammad Saeed 4340 Gratiot Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/30	Amount of Each Receipt this Period 50.00
B. Full Name, Mailing Address and ZIP Code Ken Sanborn P.O. Box 46571 Mt. Clemens, MI 48046 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/25	Amount of Each Receipt this Period 20.00
C. Full Name, Mailing Address and ZIP Code Edward Sass, Jr. 1875 S. River Road St. Clair, MI 48079 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/20	Amount of Each Receipt this Period 50.00
D. Full Name, Mailing Address and ZIP Code John Schaefer 360 N. Woodward, Suite 300 Birmingham, MI 48009 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/25	Amount of Each Receipt this Period 100.00
E. Full Name, Mailing Address and ZIP Code N.W. Schlaff 26555 Evergreen, No 200 Southfield, MI 48070 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/14	Amount of Each Receipt this Period 30.00
F. Full Name, Mailing Address and ZIP Code Frederick Schroeder, Jr. 115 Lewiston Road Grosse Pointe Farms, MI 48234 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/7	Amount of Each Receipt this Period 50.00
G. Full Name, Mailing Address and ZIP Code William D. Schuette 303 E Saginaw Rd. Sanford, MI 48057 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer U.S. House of Represent. Occupation Member of Congress Aggregate Year-to-Date > \$	Date (month, day, year) 5/15	Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingman

A. Full Name, Mailing Address and ZIP Code Donald Schultz 16474 Chatham Dr. Fraser, MI 48026 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 30.00	Date (month, day, year) 5/25	Amount of Each Receipt this Period 30.00
B. Full Name, Mailing Address and ZIP Code Scott Schultz 4042 Sequoia Okemos, MI 48864 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 4/6	Amount of Each Receipt this Period 100.00
C. Full Name, Mailing Address and ZIP Code William Sears 2589 Robbins Ct. Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 6/26	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and ZIP Code Michael Sessa 29559 Riverside Bay Ct. Mt. Clemens, MI 48045 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Macomb County Occupation County Commissioner Aggregate Year-to-Date > \$ 50.00	Date (month, day, year) 5/1	Amount of Each Receipt this Period 50.00
E. Full Name, Mailing Address and ZIP Code William Sharrard 2405 River Rd. Marysville, MI 48040 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 30.00	Date (month, day, year) 6/20	Amount of Each Receipt this Period 30.00
F. Full Name, Mailing Address and ZIP Code Thomas Shumaker 24610 Michigan Ave Dearborn, MI 48124 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 100.00
G. Full Name, Mailing Address and ZIP Code Dr. Rene Smit 1005 River St., Ste. 3 Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 75.00	Date (month, day, year) 6/26	Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional)

485.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code David Smith 4316 Verner Ct. Bloomfield Hills, MI 48013 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Cathrup Village Occupation Manufacturers Rep. Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 4/19	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Bill Spaulding 6271 Lakeshore Rd. Lexington, MI 48450 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 50.00
C. Full Name, Mailing Address and ZIP Code Charles Stanger 200 S. Riverside St. Clair, MI 48079 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50.00	Date (month, day, year) 6/20	Amount of Each Receipt this Period 50.00
D. Full Name, Mailing Address and ZIP Code Richard Sterban Ren Cen Station P.O. Box 45427 Detroit, MI 48243 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Oak Ridge Boys Occupation Entertainer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/26	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Wendy Stewart 23609 Whitley Dr. Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 30.00	Date (month, day, year) 5/25	Amount of Each Receipt this Period 30.00
F. Full Name, Mailing Address and ZIP Code Ed Groble 109 Kenwood Rd. Grosse Pointe Farms, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Continental Aluminum Occupation Executive Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6/14	Amount of Each Receipt this Period 1000.00
G. Full Name, Mailing Address and ZIP Code Yvonne Grother P.O. Box 610 Rochester, MI 48306 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 75.00	Date (month, day, year) 4/21	Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional)

2205.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code <i>Dr. John Sullivan</i> <i>8745 Lakeshore</i> <i>Lexington, MI 48450</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>50.00</i>	Date (month, day, year) <i>6/30</i>	Amount of Each Receipt this Period <i>50.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Theodore Sweeney</i> <i>573 University Place</i> <i>Grosse Pointe, MI 48230</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>self</i> Occupation <i>Attorney</i> Aggregate Year-to-Date > \$ <i>250.00</i>	Date (month, day, year) <i>6/21</i>	Amount of Each Receipt this Period <i>250.00</i>
C. Full Name, Mailing Address and ZIP Code <i>James Taylor</i> <i>400 N. Oxford Rd.</i> <i>Grosse Pointe Woods, MI 48230</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Self</i> Occupation <i>Businessman</i> Aggregate Year-to-Date > \$ <i>250.00</i>	Date (month, day, year) <i>6/24</i>	Amount of Each Receipt this Period <i>250.00</i>
D. Full Name, Mailing Address and ZIP Code <i>Michael Timmis</i> <i>178 Cloverly</i> <i>Grosse Pointe Farms, MI 48230</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Marco, Timmis & Luman</i> Occupation <i>Attorney</i> Aggregate Year-to-Date > \$ <i>250.00</i>	Date (month, day, year) <i>6/24</i>	Amount of Each Receipt this Period <i>250.00</i>
E. Full Name, Mailing Address and ZIP Code <i>Douglas S. Touma</i> <i>50 81 Lakeshore</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>70.00</i>	Date (month, day, year) <i>5/22</i> <i>6/30</i>	Amount of Each Receipt this Period <i>20.00</i> <i>50.00</i>
F. Full Name, Mailing Address and ZIP Code <i>Dr. Charles Townley</i> <i>1037 Water St.</i> <i>Port Huron, MI 48061-5002</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>50.00</i>	Date (month, day, year) <i>6/30</i>	Amount of Each Receipt this Period <i>50.00</i>
G. Full Name, Mailing Address and ZIP Code <i>Ernest Tracy, Jr.</i> <i>Kercheval</i> <i>Grosse Pointe Farms, MI 48230</i> Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer <i>self</i> Occupation <i>Businessman</i> Aggregate Year-to-Date > \$ <i>2000.00</i>	Date (month, day, year) <i>6/30</i>	Amount of Each Receipt this Period <i>2000.00</i>

SUBTOTAL of Receipts This Page (optional)

2920.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code T.W. Trefzer, III 520 Anita Grosse Pointe Woods, MI 48230 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/20	Amount of Each Receipt this Period 25.00
B. Full Name, Mailing Address and ZIP Code George Uzni 24610 Michigan Ave. Dearborn, MI 48124 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4/3	Amount of Each Receipt this Period 100.00
C. Full Name, Mailing Address and ZIP Code Russell Van Houten, Jr. 816 Bedford Rd. Grosse Pointe Park, MI 48230 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/25	Amount of Each Receipt this Period 60.00
D. Full Name, Mailing Address and ZIP Code Michael Vanlokeren 358 Chalfonte Grosse Pointe Farms, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/20	Amount of Each Receipt this Period 50.00
E. Full Name, Mailing Address and ZIP Code Harry Verysen 37159 Greenwich Mt. Clemens, MI 48043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Stamping, Inc. Occupation President Aggregate Year-to-Date > \$	Date (month, day, year) 4/21 6/30	Amount of Each Receipt this Period 150.00 250.00
F. Full Name, Mailing Address and ZIP Code Clune, Walsh, Jr. 45 Edgemere Grosse Pointe Farms, MI 48236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/26	Amount of Each Receipt this Period 200.00
G. Full Name, Mailing Address and ZIP Code Roger Warda 30167 Carriage Dr. Sterling Heights, MI 48310 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/30	Amount of Each Receipt this Period 1.06

SUBTOTAL of Receipts This Page (optional)

836.06

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Glenn Wesselmann 56 Lake Shore Lane Grosse Pointe Shores, MI 48230 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 6/20	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and ZIP Code M.J. Whyte 2000 Town Center, Suite 2700 Southfield, MI 48075 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 4/10	Amount of Each Receipt this Period 100.00
C. Full Name, Mailing Address and ZIP Code Henry T. Wiggins 151 Tappan Street Brookline, MA 02146 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50.00	Date (month, day, year) 6/7	Amount of Each Receipt this Period 50.00
D. Full Name, Mailing Address and ZIP Code Robert Wilbreff 1923 Holland Ave. Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 5/11	Amount of Each Receipt this Period 20.00
E. Full Name, Mailing Address and ZIP Code John Wise 1221 Yorkshire Grosse Pointe Park, MI 48230 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 6/7	Amount of Each Receipt this Period 300.00
F. Full Name, Mailing Address and ZIP Code Colin Young 3627 Vincent Road North Street, MI 48049 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 10.00	Date (month, day, year) 5/25	Amount of Each Receipt this Period 5.00
G. Full Name, Mailing Address and ZIP Code Dr. Arthur Yull 5608 Lakeshore Rd. Port Huron, MI 48060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 75.00	Date (month, day, year) 6/30	Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends For Jim Dingeman

A. Full Name, Mailing Address and ZIP Code <i>Frank Zagelmeyer, III</i> <i>400 Ren Cen, Suite 1900</i> <i>Detroit, MI 48243</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>150.00</i>	Date (month, day, year) <i>4/21</i>	Amount of Each Receipt this Period <i>150.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Marshall Campbell</i> <i>2975 Capeer Rd.</i> <i>Port Huron, MI 48060</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Beard & Campbell Electric</i> Occupation <i>President</i> Aggregate Year-to-Date > \$ <i>Catering</i>	Date (month, day, year) <i>12/7 *INK</i> <i>In-Kind Contribution</i>	Amount of Each Receipt this Period <i>234.50</i>
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

384.50

TOTAL This Period (last page this line number only)

33001.50

90914020325

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code Committee to Support Lydia Detomasi 35960 Trawick Court Sterling Heights, MI 48310		Name of Employer	Date (month, day, year) 6/7	Amount of Each Receipt this Period 60.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$ 60.00	
B. Full Name, Mailing Address and ZIP Code National Republican Congress. Comm. 320 1st St SE Washington, D.C. 20515		Name of Employer * In-Kind Mailing List * In-Kind Media Services	Date (month, day, year) 6/22 6/28	Amount of Each Receipt this Period 2500.00 13.27
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$ 2513.27	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

2578.27

TOTAL This Period (last page this line number only)

2578.27

90014020525

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Friends For Jim Dingeman

A. Full Name, Mailing Address and ZIP Code First Macomb Bank Political Action Fund Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 20.00
B. Full Name, Mailing Address and ZIP Code Mobil Oil Corporation Political Action Committee 150 E. 42nd Street New York, NY 10017 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/22	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Print PAC 1730 North Lynn Street Arlington, VA 22209 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6/30	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code RUFF PAC 501 Capitol Court, NE Suite 100 Washington, D.C. 20002 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/30	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Washington Political Action Committee 444 M. Capitol St., NW Suite 712 Washington, D.C. 20001 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/21	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Comerica PAC 211 West Fort Street Detroit, MI 48226 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 700.00	Date (month, day, year) 4/11	Amount of Each Receipt this Period 200.00
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

2,720.00

TOTAL This Period (last page this line number only)

2,720.00

00014020527

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)

FRIENDS FOR JIM DINGEMAN

A. Full Name, Mailing Address and ZIP Code JIM DINGEMAN 4288 GRATIOR PORT HURON MI 48060	Name of Employer Occupation	Date (month, day, year) 6/15	Amount of Each Receipt this Period 613.16
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 613.16		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

613.16

TOTAL This Period (last page this line number only)

613.16

90014020523

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in Full)

FRIENDS FOR JIM DINGEMAN

A. Full Name, Mailing Address and ZIP Code PETER LUND 24616 CULVER ST. CLAIR SHORES MI 48080	Purpose of Disbursement CAMPAIGN MANAGER -SERVICES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4-2-90 5-1-90 5-22-90 6-15-90	Amount of Each Disbursement This Period 3000.00 3000.00 2,000.00 1,000.00
B. Full Name, Mailing Address and ZIP Code BOB MAUSETH 29205 LUND DRIVE #4 WARREN MI 48093	Purpose of Disbursement CONTRACTED SERVICES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4-2-90 6-15-90 5-1-90 5-22-90 5-31-90	Amount of Each Disbursement This Period 1,200.00 750.00 1,200.00 300.00 1,500.00
C. Full Name, Mailing Address and ZIP Code DWAYNE KRATT 29205 LUND DRIVE #4 WARREN MI 48093	Purpose of Disbursement CONTRACTED SERVICES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4-2-90 6-15-90 5-1-90 5-22-90 5-31-90	Amount of Each Disbursement This Period 300.00 550.00 800.00 300.00 1,100.00
D. Full Name, Mailing Address and ZIP Code BROOKOVER & Co. 9712 HARR CT. BURKE, VIRGINIA 22015	Purpose of Disbursement CONSULTING Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4-2-90	Amount of Each Disbursement This Period 5000.00
E. Full Name, Mailing Address and ZIP Code MICHIGAN BELL P.O. BOX 5030 SAGINAW MI 48663	Purpose of Disbursement TELEPHONE Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4-25-90 5-23-90 6-15-90	Amount of Each Disbursement This Period 54.28 60.02 35.09
F. Full Name, Mailing Address and ZIP Code PARKER WITTUS & Co. 2000 TOWN CENTER STE 1100 SOUTHFIELD MI 48075	Purpose of Disbursement ACCOUNTING SERVICES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4-25-90 5-31-90	Amount of Each Disbursement This Period 1,123.00 627.00
G. Full Name, Mailing Address and ZIP Code DWAYNE KRATT 29205 LUND DRIVE #4 WARREN MI 48093	Purpose of Disbursement EXPENSE REIMBURSEMENT TRAVEL, MEALS ETC Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-10-90	Amount of Each Disbursement This Period 186.64
H. Full Name, Mailing Address and ZIP Code PETER LUND 24616 CULVER ST. CLAIR SHORES MI 48080	Purpose of Disbursement EXPENSE REIMBURSEMENT TRAVEL, MEALS ETC Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-10-90	Amount of Each Disbursement This Period 361.95
I. Full Name, Mailing Address and ZIP Code BOB MAUSETH 29205 LUND DRIVE #4 WARREN MI 48093	Purpose of Disbursement EXPENSE REIMBURSEMENT TRAVEL MEALS ETC Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-10-90	Amount of Each Disbursement This Period 267.97

SUBTOTAL of Disbursements This Page (optional)

23,215.95

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

FRIENDS FOR JIM DINGEMAN

A. Full Name, Mailing Address and ZIP Code GLORYANNE PAJKICK 5215 MITCHELL DETROIT MI 48211	Purpose of Disbursement CONTRACTED SERVICES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-31-90 6-15-90	Amount of Each Disbursement This Period 300.00 150.00
B. Full Name, Mailing Address and ZIP Code DOUG TOLMA 5082 GRATIOT PORT HURON MI 48060	Purpose of Disbursement CONTRACTED SERVICES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-31-90 6-15-90	Amount of Each Disbursement This Period 300.00 150.00
C. Full Name, Mailing Address and ZIP Code MICHAEL DINGEMAN 22 ELM COURT GROSSE POINTE MI	Purpose of Disbursement CONTRACTED SERVICES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-31-90 6-15-90	Amount of Each Disbursement This Period 920.00 440.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

2260.00

TOTAL This Period (last page this line number only)

25475.95

90014020530

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 3 OF 6
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

FRIENDS FOR JIM DINGEMAN

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
THE PICTURE CO. 1332 S. WASHINGTON FARMINGTON HILLS MI 48024	PICTURES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4-2-90	307.00
B. Full Name, Mailing Address and ZIP Code HEADLEE SYSTEMS 38215 W. 10 MILE STE 2 FARMINGTON HILLS MI 48024	COMPUTER SOFTWARE Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4-3-90	595.00
C. Full Name, Mailing Address and ZIP Code U.S. POSTMASTER ST. CLAIR SHORES MI 48080	POSTAGE + MAILING Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4-5-90 4-9-90 4-30-90 5-7-90	75.00 10.88 100.00 250.00
D. Full Name, Mailing Address and ZIP Code U.S. POSTMASTER ST. CLAIR SHORES MI 48080	POSTAGE + MAILING Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	5-9-90 5-15-90 5-16-90 5-21-90	17.00 137.50 100.00 200.00
E. Full Name, Mailing Address and ZIP Code U.S. POSTMASTER ST. CLAIR SHORES MI 48080	POSTAGE + MAILING Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	5-22-90 5-25-90 6-4-90 6-5-90	86.70 125.00 97.00 78.50
F. Full Name, Mailing Address and ZIP Code U.S. POSTMASTER ST. CLAIR SHORES MI 48080	POSTAGE + MAILING Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	6-11-90 6-14-90 6-26-90	250.00 132.00 50.00
G. Full Name, Mailing Address and ZIP Code PATRICK SIMASKO 285 N. GRATIOT MT. CLEMENS MI 48043	RENT Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4-9-90	5000.00
H. Full Name, Mailing Address and ZIP Code TEL-A-FRIEND INC. 5015 PARK LAKE ROAD EAST LANSING MI 48823	PHONE SYSTEM Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4-9-90 4-12-90 5-21-90	730.00 730.00 803.12
I. Full Name, Mailing Address and ZIP Code MICHIGAN BELL P.O. BOX 5030 SAGINAW MI 48663	TELEPHONE DEPOSIT AND USAGE Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4-11-90 5-4-90 5-4-90 6-7-90	1452.00 926.88 368.57 1013.06

SUBTOTAL of Disbursements This Page (optional)

13630.21

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

FRIENDS FOR JIM DINGEMAN

A. Full Name, Mailing Address and ZIP Code PAGE 31940 GRATIOT ROSEVILLE MI 48066	Purpose of Disbursement OFFICE SUPPLIES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4-19-90 4-19-90 4-25-90 5-11-90	Amount of Each Disbursement This Period 25.00 173.30 102.86 75.30
B. Full Name, Mailing Address and ZIP Code PAGE 31940 GRATIOT ROSEVILLE MI 48066	Purpose of Disbursement OFFICE SUPPLIES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-21-90 6-1-90	Amount of Each Disbursement This Period 112.04 59.16
C. Full Name, Mailing Address and ZIP Code DYNAMIC TEMPORARY SERVICES 100 E BIG BEAVER SUITE 709 TROY MI 48063	Purpose of Disbursement TEMPORARY LABOR Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4-30-90 5-7-90 6-7-90	Amount of Each Disbursement This Period 128.00 304.00 40.00
D. Full Name, Mailing Address and ZIP Code VIP PHOTO SERVICE 30263 LITTLE MACK ROSEVILLE MI	Purpose of Disbursement PHOTO'S Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4-24-90 5-4-90	Amount of Each Disbursement This Period 100.00 168.06
E. Full Name, Mailing Address and ZIP Code XEROX CORP P.O. BOX 8118 350 S. NW HIGHWAY PARK RIDGE IL 60068	Purpose of Disbursement SUPPLIES + MAINT CONTRACT Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4-23-90 6-7-90	Amount of Each Disbursement This Period 230.00 735.83
F. Full Name, Mailing Address and ZIP Code THE GEORGIAN INN 31327 GRATIOT AVE ROSEVILLE MI 49858	Purpose of Disbursement BREAKFAST RECEPTION Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-21-90	Amount of Each Disbursement This Period 286.25
G. Full Name, Mailing Address and ZIP Code O/E SYSTEMS P.O. BOX 55-334A DETROIT MI 48255	Purpose of Disbursement SUPPLIES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-21-90	Amount of Each Disbursement This Period 528.32
H. Full Name, Mailing Address and ZIP Code MARMEN COMPUTING P.O. BOX 176 MENOMINEE MI 49858	Purpose of Disbursement DONOR LIST Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-21-90	Amount of Each Disbursement This Period 229.67
I. Full Name, Mailing Address and ZIP Code MCI COMMUNICATIONS 205 NORTH MICHIGAN AVE CHICAGO IL 60601	Purpose of Disbursement TELEPHONE Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6-7-90	Amount of Each Disbursement This Period 361.81

SUBTOTAL of Disbursements This Page (optional)

3,659.60

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SIR SPEEDY PRINTING 21312 MACK AVE. GROSSE POINTE MI 48236	PRINTING Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4-6-90 4-25-90 5-21-90	86.61 927.85 1339.16
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SIR SPEEDY PRINTING 21312 MACK AVE GROSSE POINTE MI 48236	PRINTING Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	6-7-90	710.67
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MAMAS & ASSOC 3620 NORTH HIGH STREET Suite 20 COLUMBUS OH 43214	RENTAL - NAME LIST + PRINTING Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	6-8-90 6-13-90	2338.50 2230.50
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SAWICKI & SONS 1521 W. LAFAYETTE DETROIT MI 48216	BOMPER STICKERS Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	6-26-90	1000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ART-O-CRAFT 75 MACOMB PLACE MT. CLEMENS MI 48043	PRINTING + Supplies Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4-19-90 5-10-90 5-21-90 6-14-90	21.73 155.48 30.91 8.31
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ART-O-CRAFT 75 MACOMB PLACE MT. CLEMENS MI 48043	PRINTING + Supplies Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	6-26-90	134.80
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DIANE WYNN MT. CLEMENS MI 48043	CLEANING AREA Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	5-10-90 5-24-90 6-7-90 6-23-90	50.00 50.00 50.00 50.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CAMADON INC NEW BERLIN WI	FAX MACHINE Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	6-30-90	1720.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

10904.72

TOTAL This Period (last page this line number only)

0001402033

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 6 OF 6
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

FRIENDS FOR JIM DINGEMAN

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MARSHALL CAMPBELL 2975 LAPEER RD PORT HURON MI 48060	INK - Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	IN KIND 6-7-90	234.50
B. Full Name, Mailing Address and ZIP Code NATIONAL REPUBLICAN CONGRESS COMM. 320 1ST ST SE WASHINGTON DC 20515	Purpose of Disbursement MAILING LIST } IN KIND MEDIA SERVICES } Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6-22-90 6-22-90	Amount of Each Disbursement This Period 2500.00 18.27
C. Full Name, Mailing Address and ZIP Code GROSSE POINTE CLUB 6 BERKSHIRE PLACE GROSSE POINTE MI 48236	Purpose of Disbursement MEALS + ENTERTAINMENT Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5-2-90 5-2-90 5-2-90 5-2-90	Amount of Each Disbursement This Period 16.65 29.40 67.60 78.65
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

2945.07

TOTAL This Period (last page this line number only)

56615.55

* plus 3856.14 OF EXPENSES LESS THAN \$200 IN AGGREGATE = 60471.69

90014020334

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 20(a)

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NAME OF COMMITTEE (in Full)

Friends for Jim Dingeman

A. Full Name, Mailing Address and ZIP Code <i>N.W. Schlaff</i> <i>20 555 Evergreen, No. 200</i> <i>Southfield, MI 48076</i>	Purpose of Disbursement <i>Refund of Contribution</i> <i>Drawn on Corporate Account</i> Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) <i>01/30/90</i>	Amount of Each Disbursement This Period <i>30.00</i>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

9001402035

LOANS

Name of Committee (in Full) FRIENDS FOR JIM DINGEMAN						
A. Full Name, Mailing Address and ZIP Code of Loan Source JIM DINGEMAN (CANDIDATE) 4284 GRATIOT PORT HURON MI 48060	Original Amount of Loan 133,626.31 256,712	Cumulative Payment To Date 49,348.13 - 0 -	Balance Outstanding at Close of This Period 84,278.18 2,567.72			
Election: ☐ Primary ☐ General ☐ Other (specify): Terms: Date Incurred <u>6-30-89</u> Date Due <u>N/A</u> Interest Rate <u>N/A</u> % (apr) ☐ Secured						
List All Endorsers or Guarantors (if any) to Item A						
1. Full Name, Mailing Address and ZIP Code ALL LOANS WERE MADE FROM THE PERSONAL FUNDS OF THE CANDIDATE	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
B. Full Name, Mailing Address and ZIP Code of Loan Source				Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: ☐ Primary ☐ General ☐ Other (specify): Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) ☐ Secured						
List All Endorsers or Guarantors (if any) to Item B						
1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
SUBTOTALS This Period This Page (optional)						
TOTALS This Period (last page in this line only)				86,845.90		
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.						

90014020335

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 11 of 12 for
LINE NUMBER 10 PAGE 1
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
FRIENDS FOR JIM DINGEMAN				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				86845.90
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				86845.90

90014020537