

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
BERGMANFORCONGRESS

ADDRESS (number and street) 3585 BUNKER HILL RD
UNIT 434
 Check if different than previously reported. (ACC) ACME MI 49610-5004
CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER** C C00614214
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
STATE DISTRICT MI 01

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 01 / 01 / 2018 through 03 / 31 / 2018

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 HARDIN, HORD, , II

Signature of Treasurer HARDIN, HORD, , II [Electronically Filed] Date 04 / 13 / 2018

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
BERGMANFORCONGRESS

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|-----------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 145320.00 | 711992.20 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 3250.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 145320.00 | 708742.20 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 58674.50 | 493893.38 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 234.84 | 1302.65 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 58439.66 | 492590.73 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 307227.05 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 254000.00 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

BERGMANFORCONGRESS

Report Covering the Period: From: / / To: / /

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|----------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 54225.00 | 231035.00 |
| (ii) Unitemized | 6395.00 | 19172.66 |
| (iii) TOTAL of contributions from individuals | 60620.00 | 250207.66 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 84700.00 | 461784.54 |
| (d) The Candidate | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 145320.00 | 711992.20 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 28894.88 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 234.84 | 1302.65 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... | 145554.84 | 742189.73 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 86

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 58674.50 | 493893.38 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 10000.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 10000.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 1500.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 1750.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 3250.00 |
| 21. OTHER DISBURSEMENTS | 499.00 | 499.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 59173.50 | 507642.38 |

III. CASH SUMMARY

| | |
|---------------------------------------------------------------------------------------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 220845.71 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 145554.84 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 366400.55 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 59173.50 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 307227.05 |

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 5 OF 86 | |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
MCCOURT-DUFINA, MARY, F, ,

Mailing Address PO BOX 495

| | | |
|-------------------------|-------------|------------------------|
| City MACKINAC ISLAND | State MI | Zip Code 49757-0495 |
|-------------------------|-------------|------------------------|

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

| | |
|----------------------------------|-------------------------|
| Name of Employer BALSAM SHOPS | Occupation PRESIDENT |
|----------------------------------|-------------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2018

Transaction ID : **AE211DD4065AD472A9CB**

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 2215 N. LAKESHORE DR.

| | | |
|------------------------|-------------|------------------------|
| City HARBOR SPRINGS | State MI | Zip Code 49740-8987 |
|------------------------|-------------|------------------------|

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

| | |
|-----------------------------------------|---------------------|
| Name of Employer PANGBORN CONSULTING | Occupation OWNER |
|-----------------------------------------|---------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2018

Transaction ID : **A746437F137EE4ADD9A7**

Amount of Each Receipt this Period
1900.00

Memo Item

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

Mailing Address 620 DOCK DR

| | | |
|--------------------|-------------|------------------------|
| City BARRINGTON | State IL | Zip Code 60010-1518 |
|--------------------|-------------|------------------------|

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

| | |
|---------------------------|---------------------|
| Name of Employer CSLTD | Occupation OWNER |
|---------------------------|---------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
475.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2018

Transaction ID : **AB147039D8058401A96E**

Amount of Each Receipt this Period
100.00

Memo Item

| | |
|-------------------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 3000.00 |
| TOTAL This Period (last page this line number only)..... ▶ | |

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

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

FOR LINE NUMBER: PAGE 6 OF 86
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
MCGINLEY, MARIBETH, , ,
 Mailing Address 6512 BARNABY ST NW
 City WASHINGTON State DC Zip Code 20015-2316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNEMPLOYED Occupation UNEMPLOYED
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2018
Transaction ID : A590AC7CD22A449BC98A
 Amount of Each Receipt this Period
 2700.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
BAILEY, BRIAN, , ,
 Mailing Address PO BOX 1297
 City MACKINAC ISLAND State MI Zip Code 49757-1297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHIPPEWA HOTEL CO. INC. Occupation HOTEL MANAGER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2018
Transaction ID : A4FB83F92745848F3860
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
ZOLLINGER, JAY, B., ,
 Mailing Address 4232 WILLIAMSTON CT
 City WILLIAMSBURG State MI Zip Code 49690-8627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACME TOWNSHIP Occupation SUPERVISOR
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2018
Transaction ID : A9E3EE274936D454D927
 Amount of Each Receipt this Period
 100.00
 Memo Item

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

3800.00

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

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

FOR LINE NUMBER: PAGE 7 OF 86
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
GAGLIARDO, SEBASTIAN, J, ,
Mailing Address 38966 ASTER WAY

City: SELBYVILLE State: DE Zip Code: 19975-3753

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 5650.00

Date of Receipt: 03 / 27 / 2018
Transaction ID : A4032E4907F3F4888F4

Amount of Each Receipt this Period: 2450.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GAGLIARDO, SEBASTIAN, J, ,
Mailing Address 38966 ASTER WAY

City: SELBYVILLE State: DE Zip Code: 19975-3753

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 5650.00

Date of Receipt: 03 / 27 / 2018
Transaction ID : A2FB5C6781A1946D5A68

Amount of Each Receipt this Period: 2950.00

Memo Item
REFUND PENDING

C. Full Name (Last, First, Middle Initial)
PANGBORN, CYNTHIA, , ,
Mailing Address 2215 N LAKE SHORE DR

City: HARBOR SPRINGS State: MI Zip Code: 49740-8987

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 3100.00

Date of Receipt: 03 / 30 / 2018
Transaction ID : ABEE03B749DC046AE844

Amount of Each Receipt this Period: 400.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 5800.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 86
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
JOHNSON, CINDY, E., ,
Mailing Address 23 POLO DR

City COLORADO SPRINGS State CO Zip Code 80906-3139

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 08 2018

Transaction ID : **A2D1FF9FF333B4953AAB**

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DELAHAUT, BRIAN, , ,
Mailing Address 31 DEL TREVI

City IRVINE State CA Zip Code 92606-8866

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 30 2018

Transaction ID : **A9C0BCD5B6EA44B0B992**

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CALLEWAERT, JOSEPH, , ,
Mailing Address 1184 WEST MAPLE RIDGE

City ROCK State MI Zip Code 49880

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 11 2018

Transaction ID : **A06A2C06920CD460F93B**

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 86
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
FORD, DAVID, G, ,
 Mailing Address 742 WASHINGTON ST
 City TRVERSE CITY State MI Zip Code 49686-2648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : ACCEB965F3BF449E191B
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
COPHER, MICHAEL, , ,
 Mailing Address 4530 CHASE OAK COURT
 City ZIONSVILLE State IN Zip Code 46077-9652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2018
Transaction ID : A4CE32046EDC84686851
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
SMITH, SHELDON, B., ,
 Mailing Address 7212 SHISTOTO TRL
 City GAYLORD State MI Zip Code 49735-7928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SHELDON SMITH, INC. Occupation ACTOR
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2018
Transaction ID : A0787D92E94E843DA800
 Amount of Each Receipt this Period
 250.00
 Memo Item

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

1500.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 86
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
HARDING, DAVID, P, ,
Mailing Address 51 SUMMER ST

City WESTON State MA Zip Code 02493-2441

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2018

Transaction ID : **A5227478DA73D46F682F**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PESTKA, NORMAN, F., ,
Mailing Address 115 OLD NORWICH TRAIL

City ONTONAGON State MI Zip Code 49953-9687

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2018

Transaction ID : **ABCF3C302F7CC4D5CBF3**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
OSOLINIK, CAROLYN, , ,
Mailing Address 7834 HAMPDEN LANE

City BETHESDA State MD Zip Code 20814-1109

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

Name of Employer Occupation
CORREIA & OSOLINIK ATTORNEY

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2018

Transaction ID : **A5976A0C81C004F359D4**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 86
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
POWELL, GEORGE, M, ,
 Mailing Address 961 LAKE RIDGE DR, UNIT 23
 City TRAVERSE CITY State MI Zip Code 49684-4546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : AF5103092C5864B15BE1
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
MCGUIRE, TIMOTHY, K., ,
 Mailing Address 6310 LAKE DR
 City HASLETT State MI Zip Code 48840-8930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MCGUIRE FARHAT GROUP Occupation GOVERNMENT RELATIONS
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2018
Transaction ID : AF8D8A55E3BF94F45A63
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
MCALPIN, LOUISE, , ,
 Mailing Address 275 CATOB RD
 City HARBOR SPRINGS State MI Zip Code 49740-9335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation STUDENT, FREELANCE WRITER, ARTIST
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2018
Transaction ID : AE8C8B1773FBD4EABA75
 Amount of Each Receipt this Period
 250.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 12 OF 86
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
MCINTIRE, MARGARET, A, ,
 Mailing Address **W68 MACKINAC HEIGHTS DR**
 City **SAINT IGNACE** State **MI** Zip Code **49781-9618**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **IROQUOIS HOTEL** Occupation **GENERAL MANAGER**
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 08 / 2018
Transaction ID : A584DAF421FD5458A8FF
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
YELLEN, SHELDON, , ,
 Mailing Address **1981 LONG LAKE SHORES DR**
APT 4802
 City **BLOOMFIELD HILLS** State **MI** Zip Code **48302-1238**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **BELFER CORP** Occupation **CEO**
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 12 / 2018
Transaction ID : ABE5B9D4D3F294C3DB1F
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
LIEGHIO, ENZO, , ,
 Mailing Address **PO BOX 831**
 City **MACKINAW CITY** State **MI** Zip Code **49701-0831**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 08 / 2018
Transaction ID : A0E1ABC5D684430D901
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

2000.00

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
CHAMBERS, BRAD, , ,

Mailing Address PO BOX 1243

City MACKINAC ISLAND State MI Zip Code 49757-1243

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

Name of Employer MAKINAC ISLAND CARRIAGE TOURS Occupation OWNER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 02 / 2018

Transaction ID : **AB26CE752E33F4A70B32**

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address PO BOX 418

City MACKINAC ISLAND State MI Zip Code 49757-0418

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2018

Transaction ID : **A21C05E5FE51547FABE0**

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 113 NASH CREEK LN

City BOZEMAN State MT Zip Code 59715-7176

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2018

Transaction ID : **A7452696059BE452EAD2**

Amount of Each Receipt this Period
250.00

Memo Item

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

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

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

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
MAHER, JAY, , ,

Mailing Address 620 DOCK DR

City BARRINGTON State IL Zip Code 60010-1518

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

Name of Employer CSLTD Occupation OWNER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
575.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 28 / 2018

Transaction ID : **A4D6A4D2DC70D430A9AA**

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address PO BOX 158

City GRANDVILLE State MI Zip Code 49468-0158

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

Name of Employer BYKER & ASSOCIATES Occupation OWNER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2018

Transaction ID : **A071D07FA1E924CC2964**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BENSER, ROBERT, G, ,

Mailing Address PO BOX 481

City MACKINAC ISLAND State MI Zip Code 49757-0481

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 02 / 2018

Transaction ID : **AEE992A5D416B4F9F9C0**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 86
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 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
CALLEWAERT, TODD, V., ,
Mailing Address 71 LAKE SHORE DR

City GROSSE POINTE State MI Zip Code 48236

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2018

Transaction ID : **A884F97DD7CA846098B4**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FISHER, GARY, , ,
Mailing Address N3435 SYLVAN ISLE DR

City WATERSMEET State MI Zip Code 49969-9728

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 27 / 2018

Transaction ID : **A97E3F71A86DA4AB39F4**

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HANKINSON, KENNETH, , ,
Mailing Address PO BOX 255

City BURT LAKE State MI Zip Code 49717

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

Name of Employer KCH SERVICES Occupation CEO

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2018

Transaction ID : **AFB21BF4E2DD64F67948**

Amount of Each Receipt this Period
250.00

Memo Item

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

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

1550.00

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

Use separate schedule(s)
for each category of the
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 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
MOSKWA, PATTI, ANN, ,
Mailing Address PO BOX 904

City MACKINAC ISLAND State MI Zip Code 49757-0904

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2018

Transaction ID : **A02F97ACDE1404E86A4A**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MANTHEI, TERI, , ,
Mailing Address 5563 MANTHEI RD

City PETOSKEY State MI Zip Code 49770-9744

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

Name of Employer WILDWOOD FIREARMS TRAINING & RANGE Occupation TRAINER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 02 / 2018

Transaction ID : **A75A6381DFA0D45D7A6B**

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BLOTTER, ROBERT, , ,
Mailing Address 1116 ORTMAN

City MARQUETTE State MI Zip Code 49855-9333

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

Name of Employer ADVANCED CENTER FOR ORTHOPEDICS Occupation PHYSICIAN

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 17 / 2018

Transaction ID : **AD9715E8251FA445DB1B**

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00

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

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

Use separate schedule(s)
for each category of the
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
HOPKINS, DENNIS, , ,

Mailing Address 1375 17TH ROAD

City BARK RIVER State MI Zip Code 49897

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 28 / 2018

Transaction ID : **A5157F548A4544C5D8D2**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BALL, BRYAN, E, ,

Mailing Address 7 SUGAR MAPLE ROW

City CHESTER State NJ Zip Code 07930-3010

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

Name of Employer MALLINCKRODT PHARMACEUTICALS Occupation EXECUTIVE

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2018

Transaction ID : **AB8E3F2263D9942FFA5D**

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 400 POYDRAS ST
STE 2480

City NEW ORLEANS State LA Zip Code 70130-3218

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

Name of Employer BOLLINGER ENTERPRISES, LLC Occupation CHAIRMAN AND CEO

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 03 / 2018

Transaction ID : **A6E533E537F6642B4929**

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4950.00

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

**SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
for each category of the
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
MUSSER, DAN, , III
 Mailing Address PO BOX 286
 City MACKINAC ISLAND State MI Zip Code 49757-0286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GRAND HOTEL Occupation INNKEEPER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2018
Transaction ID : ADCB1465F5B0A4C1CBC1
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
DOUD, MARGARET, M., ,
 Mailing Address PO BOX 538
 City MACKINAC ISLAND State MI Zip Code 49757-0538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WINDERMERE HOTEL Occupation OWNER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2018
Transaction ID : A46FE0CCB917549D0A80
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
ATANASOFF, KRIST, D., ,
 Mailing Address 248 SUNSET SHORES RD
 City IRON RIVER State MI Zip Code 49935-8369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2018
Transaction ID : A4916E260EE074C30848
 Amount of Each Receipt this Period
 1500.00
 Memo Item

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

3500.00

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

Use separate schedule(s)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
LUTZ, ROBERT, , ,

Mailing Address 3966 PLEASANT LAKE

City ANN ARBOR State MI Zip Code 48103-9628

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2018

Transaction ID : **AA5141B1C6731492088A**

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 620 DOCK DR

City BARRINGTON State IL Zip Code 60010-1518

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

Name of Employer CSLTD Occupation OWNER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 01 / 2018

Transaction ID : **AB946ACDD81474A709D9**

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BALL, BRYAN, E, ,

Mailing Address 7 SUGAR MAPLE ROW

City CHESTER State NJ Zip Code 07930-3010

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

Name of Employer MALLINCKRODT PHARMACEUTICALS Occupation EXECUTIVE

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2018

Transaction ID : **A82BABB5C86F4BA3A87**

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3800.00

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
CALLEWAERT, JOSEPH, , ,

Mailing Address 1184 WEST MAPLE RIDGE

City: ROCK State: MI Zip Code: 49880

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 284.00

Date of Receipt: 02 / 01 / 2018

Transaction ID : AEB562DC9CF4149D19E1

Amount of Each Receipt this Period: 50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HAGGARD, JOHN, E, , SR.

Mailing Address PO BOX 35

City: CHARLEVOIX State: MI Zip Code: 49720-0035

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 01 / 28 / 2018

Transaction ID : AD83C3069A6184C57B93

Amount of Each Receipt this Period: 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PESTKA, NORMAN, F., ,

Mailing Address 115 OLD NORWICH TRAIL

City: ONTONAGON State: MI Zip Code: 49953-9687

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2800.00

Date of Receipt: 03 / 20 / 2018

Transaction ID : A9EA31100F7C94A8784B

Amount of Each Receipt this Period: 800.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00

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

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 21 OF 86 | |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
MCCANN, DAVE, , ,

Mailing Address 13317 S COVEY RUN

| | | |
|-----------------|-------------|------------------------|
| City SPOKANE | State WA | Zip Code 99224-8522 |
|-----------------|-------------|------------------------|

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

| | |
|-------------------------------|---------------------|
| Name of Employer MEDTRONIC | Occupation SALES |
|-------------------------------|---------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2018

Transaction ID : A5A9CB11D562E4160BE2

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SCHWIE, MICHAEL, J., MR.,

Mailing Address 1316 SUMMIT OAKS DR.

| | | |
|--------------------|-------------|------------------------|
| City BURNSVILLE | State MN | Zip Code 55337-4715 |
|--------------------|-------------|------------------------|

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

| | |
|-------------------------------------------|-------------------------------------|
| Name of Employer INFORMATION REQUESTED | Occupation INFORMATION REQUESTED |
|-------------------------------------------|-------------------------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2018

Transaction ID : A82741EF54AE046E2979

Amount of Each Receipt this Period
 _____ 300.00

Memo Item

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

Mailing Address 645 HARMONY CIR

| | | |
|-----------------|-------------|------------------------|
| City WAYZATA | State MN | Zip Code 55391-1105 |
|-----------------|-------------|------------------------|

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

| | |
|---------------------------------|---------------------|
| Name of Employer FOURSOME IN | Occupation OWNER |
|---------------------------------|---------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2018

Transaction ID : A52BAD6C61F62F4EB6965

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

| | |
|-------------------------------------------------------------------|--------------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | _____ 500.00 |
| TOTAL This Period (last page this line number only)..... ▶ | _____ |

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

Use separate schedule(s)
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
OSOLINIK, CAROLYN, , ,
 Mailing Address 7834 HAMPDEN LANE
 City: BETHESDA State: MD Zip Code: 20814-1109
 FEC ID number of contributing federal political committee: C
 Name of Employer: CORREIA & OSOLINIK Occupation: ATTORNEY
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1500.00

Date of Receipt: 02 / 11 / 2018
 Transaction ID : AE4FD33F30E2F42D39E1
 Amount of Each Receipt this Period: 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
NEBEL, CHARLES, E, ,
 Mailing Address PO BOX 664
 City: MUNISING State: MI Zip Code: 49862-0664
 FEC ID number of contributing federal political committee: C
 Name of Employer: NEBEL AND NEBEL Occupation: ATTORNEY
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt: 01 / 28 / 2018
 Transaction ID : AB226FFF8EB994ECAA38
 Amount of Each Receipt this Period: 250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
GOUDREAU, CATHY, E., ,
 Mailing Address 2275 MICHELLE CT
 City: BROOKFIELD State: WI Zip Code: 53045-5021
 FEC ID number of contributing federal political committee: C
 Name of Employer: NORTHERN WINGS Occupation: OWNER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt: 01 / 28 / 2018
 Transaction ID : AE9954D6D3A044B5A85C
 Amount of Each Receipt this Period: 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00
TOTAL This Period (last page this line number only) ▶

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

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

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

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
SECCHIA, PETER, , ,
 Mailing Address 220 LYON NW
 SUITE 510
 City GRAND RAPIDS State MI Zip Code 49503-2210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SIBSCO Occupation PRESIDENT
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2018
Transaction ID : AB8B312A50D7742148F8
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
VAN ETEN, JOHN, WILSON, MR., III
 Mailing Address 5480 HORTON CREEK DR.
 City CHARLEVOIX State MI Zip Code 49720-9108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NUTRACEUTICAL MFG Occupation OWNER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2018
Transaction ID : AB2EEF32F6AB54183919
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
DONAHUE, MICHAEL, J., ,
 Mailing Address 491 17TH AVE S
 City NAPLES State FL Zip Code 34102-7404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2018
Transaction ID : AB2546300C40E470FB6A
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

3000.00

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 24 OF 86 | |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
HYLANT, PATRICK, R, ,

Mailing Address 6174 LOWER SHORE DRIVE

| | | |
|------------------------|-------------|------------------------|
| City HARBOR SPRINGS | State MI | Zip Code 49740-8931 |
|------------------------|-------------|------------------------|

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

| | |
|----------------------------|-------------------------|
| Name of Employer HYLANT | Occupation INSURANCE |
|----------------------------|-------------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 16 / 2018

Transaction ID : AF4EE317688DE4C27AEF

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MYERS, ANNEKE, M, ,

Mailing Address PO BOX 156

| | | |
|-------------------------|-------------|------------------------|
| City MACKINAC ISLAND | State MI | Zip Code 49757-0156 |
|-------------------------|-------------|------------------------|

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

| | |
|-------------------------------------------|-------------------------------------|
| Name of Employer INFORMATION REQUESTED | Occupation INFORMATION REQUESTED |
|-------------------------------------------|-------------------------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2018

Transaction ID : AB43CDD7B976B4608954

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 30 ELDER DR

| | | |
|-------------------|-------------|------------------------|
| City MARQUETTE | State MI | Zip Code 49855-1631 |
|-------------------|-------------|------------------------|

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

| | |
|-------------------------------------------|-------------------------------------|
| Name of Employer INFORMATION REQUESTED | Occupation INFORMATION REQUESTED |
|-------------------------------------------|-------------------------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
208.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 24 / 2018

Transaction ID : A69C28F294A7B4577ABE

Amount of Each Receipt this Period
25.00

Memo Item

| | |
|------------------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1525.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 25 OF 86
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
MCALPIN, K. C., , ,
Mailing Address 275 CATOB RD

| | | |
|------------------------|-------------|------------------------|
| City HARBOR SPRINGS | State MI | Zip Code 49740-9335 |
|------------------------|-------------|------------------------|

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

| | |
|----------------------------|----------------------------------|
| Name of Employer US INC | Occupation NON-PROFIT MANAGER |
|----------------------------|----------------------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 07 / 2018

Transaction ID : **A2DEE6E6D733C4645816**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
YOCUM, RONALD, H, ,
Mailing Address 9587 PALAESTRUM RD

| | | |
|----------------------|-------------|------------------------|
| City WILLIAMSBURG | State MI | Zip Code 49690-9374 |
|----------------------|-------------|------------------------|

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

| | |
|--------------------------|-----------------------|
| Name of Employer NONE | Occupation RETIRED |
|--------------------------|-----------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 12 / 2018

Transaction ID : **ACEACD0E7A1E0481FB62**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BRIAN, TIMOTHY, , MR.,
Mailing Address 9659 ECHO VALLEY DR.

| | | |
|-----------------------|-------------|------------------------|
| City TRAVERSE CITY | State MI | Zip Code 49685-9708 |
|-----------------------|-------------|------------------------|

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

| | |
|-------------------------------------------|-------------------------------------|
| Name of Employer INFORMATION REQUESTED | Occupation INFORMATION REQUESTED |
|-------------------------------------------|-------------------------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2018

Transaction ID : **A8FABD776BD754B66813**

Amount of Each Receipt this Period
250.00

Memo Item

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

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

1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| | | | |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE 26 OF 86 | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
VANDERSLIK, DAVID, J., ,

Mailing Address 4950 4TH AVE SW

| | | |
|--------------------|-------------|------------------------|
| City GRANDVILLE | State MI | Zip Code 49418-9403 |
|--------------------|-------------|------------------------|

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

| | |
|-------------------------------------------|-------------------------------------|
| Name of Employer INFORMATION REQUESTED | Occupation INFORMATION REQUESTED |
|-------------------------------------------|-------------------------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2018

Transaction ID : A38A8076EBD7647CAB48

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 2215 N LAKE SHORE DR

| | | |
|------------------------|-------------|------------------------|
| City HARBOR SPRINGS | State MI | Zip Code 49740-8987 |
|------------------------|-------------|------------------------|

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

| | |
|--------------------------|-----------------------|
| Name of Employer NONE | Occupation RETIRED |
|--------------------------|-----------------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2018

Transaction ID : AE6BD01AFE9B74069A4E

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|------------------------------------------------------------------|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3700.00 |
| TOTAL This Period (last page this line number only).....▶ | 54225.00 |

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

| | | | | |
|-------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 27 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
CENTENE CORPORATION PAC (CENTENE PAC)

Mailing Address **CENTENE PLAZA 7700 FORSYTH BLVD**

| | | |
|----------------------------|--------------------|--------------------------|
| City SAINT LOUIS | State MO | Zip Code 63105 |
|----------------------------|--------------------|--------------------------|

FEC ID number of contributing federal political committee. **C C00397851**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2018

Transaction ID : A4E60C953ECFB4DD591B

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address **600 14TH STREET, NW
SUITE 800**

| | | |
|---------------------------|--------------------|--------------------------|
| City WASHINGTON | State DC | Zip Code 20005 |
|---------------------------|--------------------|--------------------------|

FEC ID number of contributing federal political committee. **C C00236489**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2018

Transaction ID : A105601C73DB342FA8F7

Amount of Each Receipt this Period
 _____ 3000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL FEDERATION OF INDEPENDENT BUSINESS/ SAVE AMERICAS FREE ENTERPRISE TRUST

Mailing Address **1201 F ST. NW
SUITE 200**

| | | |
|---------------------------|--------------------|--------------------------|
| City WASHINGTON | State DC | Zip Code 20004 |
|---------------------------|--------------------|--------------------------|

FEC ID number of contributing federal political committee. **C C00101105**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2018

Transaction ID : A3C9F52B8C0C44F2AA61

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

| | |
|------------------------------------------------------------------|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | _____ 5000.00 |
| TOTAL This Period (last page this line number only).....▶ | _____ |

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

| | | | | |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 28 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
THE FREEDOM PROJECT

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2018

Transaction ID : **AEB7DCCB6C1534383ACC**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CHEVRON EMPLOYEES PAC - CHEVRON CORPORATION

Mailing Address 6001 BOLLINGER CANYON RD
RM G1264

City SAN RAMON State CA Zip Code 94583-2324

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2018

Transaction ID : **A8F17893EF11C43B08BC**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GREGG HARPER FOR CONGRESS

Mailing Address PO BOX 54344

City PEARL State MS Zip Code 39288-4344

FEC ID number of contributing federal political committee. **C** C00441295

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2018

Transaction ID : **A0C3373EDFC55445A839**

Amount of Each Receipt this Period
1000.00

Memo Item

| | |
|-------------------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 3000.00 |
| TOTAL This Period (last page this line number only)..... ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | | | |
|-------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 29 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
JOE WILSON FOR CONGRESS

Mailing Address PO BOX 2145

| | | |
|-----------------------|-------------|-------------------|
| City WEST COLUMBIA | State SC | Zip Code 29171 |
|-----------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00368522

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____, _____, _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2018

Transaction ID : ADB2045AD6ACC498081F

Amount of Each Receipt this Period
 _____, _____, _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GUTHRIE FOR CONGRESS

Mailing Address PO BOX 9639

| | | |
|-----------------------|-------------|-------------------|
| City BOWLING GREEN | State KY | Zip Code 42102 |
|-----------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00445023

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____, _____, _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2018

Transaction ID : A9996496C8C90406693B

Amount of Each Receipt this Period
 _____, _____, _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DYKEMA GOSSETT FEDERAL PAC

Mailing Address 201 TOWNSEND STREET
SUITE 900

| | | |
|-----------------|-------------|-------------------|
| City LANSING | State MI | Zip Code 48933 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00342113

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____, _____, _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2018

Transaction ID : A2B6ADAA676CE45ADAF0

Amount of Each Receipt this Period
 _____, _____, _____ 1000.00

Memo Item

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

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

_____ , _____ , _____ 3000.00

_____ , _____ , _____

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

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

FOR LINE NUMBER: PAGE 30 OF 86
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
WEYERHAEUSER COMPANY PAC
Mailing Address 220 OCCIDENTAL AVE S
City SEATTLE State WA Zip Code 98104-3120
FEC ID number of contributing federal political committee. **C** C00007948
Name of Employer Occupation
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2018
Transaction ID : **A4F65E3FEFE494B6FBFD**
Amount of Each Receipt this Period
2000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
DEEDS NOT WORDS PAC
Mailing Address 332 W LEE HWY STE 303
City WARRENTON State VA Zip Code 20186-2428
FEC ID number of contributing federal political committee. **C** C00569293
Name of Employer Occupation
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2018
Transaction ID : **ACAE57221EA994692A61**
Amount of Each Receipt this Period
1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICA'S FIRST PAC
Mailing Address 8401 EXCELSIOR DR STE 103
City MADISON State WI Zip Code 53717-2908
FEC ID number of contributing federal political committee. **C** C00524314
Name of Employer Occupation
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2018
Transaction ID : **A824F4B1D97114461BC2**
Amount of Each Receipt this Period
5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 8000.00
TOTAL This Period (last page this line number only) ▶

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

| | | | | |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 31 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
ITC HOLDINGS CORP. PAC (ITC PAC)

Mailing Address 201 TOWNSEND ST
STE 900

| | | |
|-----------------|-------------|------------------------|
| City LANSING | State MI | Zip Code 48933-1529 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00388462

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 26 / 2018 |

Transaction ID : AEF5246CD8BE64B7EA12

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PARAGRAPH TWO PAC

Mailing Address 2631 WILLOW LAKE DR

| | | |
|-------------------|-------------|------------------------|
| City GREENWOOD | State IN | Zip Code 46143-9333 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00562256

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2018 |

Transaction ID : A2166D966C343421D8C8

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 2150 RIVER PLAZA DR. #150

| | | |
|--------------------|-------------|-------------------|
| City SACRAMENTO | State CA | Zip Code 95833 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00489112

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2018 |

Transaction ID : A105A862F5DE944B1907

Amount of Each Receipt this Period
2000.00

Memo Item

| | |
|------------------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 8000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 32 OF 86
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
SOUTHWEST AIRLINES PILOTS' ASSOCIATION PAC (SWAPA PAC)
 Mailing Address 1450 EMPIRE CENTRAL DR
 STE 737
 City DALLAS State TX Zip Code 75247-4081
 FEC ID number of contributing federal political committee. **C** C00360669
 Name of Employer Occupation
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2018
Transaction ID : A0F638DAFF2CC4C859F9
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)
 Mailing Address 208 S. AKARD STREET
 SUITE 1812
 City DALLAS State TX Zip Code 75202
 FEC ID number of contributing federal political committee. **C** C00109017
 Name of Employer Occupation
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 9000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2018
Transaction ID : A760249658EB84223829
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
QUICKEN LOANS INC PAC
 Mailing Address 101 S WASHINGTON SQ
 STE 620
 City LANSING State MI Zip Code 48933-1708
 FEC ID number of contributing federal political committee. **C** C00388827
 Name of Employer Occupation
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 9500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : ADA1A077A16AF401B93E
 Amount of Each Receipt this Period
 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 4500.00
TOTAL This Period (last page this line number only) ▶

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

| | | | | |
|-------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 33 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
MCGUIREWOODS FEDERAL PAC

Mailing Address 800 E CANAL ST
GATEWAY PLAZA

| | | |
|------------------|-------------|------------------------|
| City RICHMOND | State VA | Zip Code 23219-3956 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00225342

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2018

Transaction ID : AD8E080C02DB04ED9BA5

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HARDWOOD FEDERATION-PAC INC

Mailing Address 1101 K ST NW
STE 700

| | | |
|--------------------|-------------|------------------------|
| City WASHINGTON | State DC | Zip Code 20005-7033 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00396671

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2018

Transaction ID : AAF8C862CA0E34C6BA39

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

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

Mailing Address 824 S MILLEDGE AVE
STE 101

| | | |
|----------------|-------------|------------------------|
| City ATHENS | State GA | Zip Code 30605-1332 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00657262

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2018

Transaction ID : AE08CCD28D8F845A9A3E

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

| | |
|------------------------------------------------------------------|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | _____ 3000.00 |
| TOTAL This Period (last page this line number only).....▶ | _____ |

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

| | | | | |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 34 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Mailing Address 7575 E FULTON ROAD
ATTN: SCOTT SMOES 56-3S

| | | |
|-------------|-------------|-------------------|
| City ADA | State MI | Zip Code 49355 |
|-------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00034884

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2018

Transaction ID : ADE39F12C91B5426CA44

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

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

Mailing Address 131 MADEIRA AVE

| | | |
|----------------------|-------------|------------------------|
| City CORAL GABLES | State FL | Zip Code 33134-4515 |
|----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00583153

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2018

Transaction ID : AD25656E9904F4FAA9A7

Amount of Each Receipt this Period
 _____ 5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION PAC

Mailing Address 1101 KING ST
STE 600

| | | |
|--------------------|-------------|------------------------|
| City ALEXANDRIA | State VA | Zip Code 22314-2965 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00144766

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2018

Transaction ID : AF35D19B4BDA541538D0

Amount of Each Receipt this Period
 _____ 1500.00

Memo Item

| | |
|-------------------------------------------------------------------|---------------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | _____ 7500.00 |
| TOTAL This Period (last page this line number only)..... ▶ | _____ |

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

| | | | | |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 35 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN HOTEL AND LODGING ASSOCIATION PAC ('HOTELPAC')

Mailing Address 1250 I ST NW
STE 1100

| | | |
|--------------------|-------------|------------------------|
| City WASHINGTON | State DC | Zip Code 20005-5904 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00001198

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2018

Transaction ID : AE98B278A190044718A0

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
UNITED AIRLINES, INC. PAC (UAPAC)

Mailing Address 233 S WACKER DR
HDQGV

| | | |
|-----------------|-------------|------------------------|
| City CHICAGO | State IL | Zip Code 60606-7147 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00101766

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

Transaction ID : AFA7C46A43CF74246A82

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE DOW CHEMICAL COMPANY EMPLOYEES PAC (DOWPAC)

Mailing Address 2030 DOW CTR

| | | |
|-----------------|-------------|------------------------|
| City MIDLAND | State MI | Zip Code 48674-1500 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00074096

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 12 / 2018

Transaction ID : A0BFB13E06CBF4AFD8D6

Amount of Each Receipt this Period
1000.00

Memo Item

| | |
|------------------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 4500.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 36 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
FRIENDS OF SNOWMOBILING PAC

Mailing Address 1640 HASLETT ROAD, SUITE 170

| | | |
|-----------------|-------------|-------------------|
| City HASLETT | State MI | Zip Code 48840 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00380196

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2018

Transaction ID : A270F5F91530449A48FA

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE ('BSC PAC')

Mailing Address 300 BOSTON SCIENTIFIC WAY

| | | |
|---------------------|-------------|-------------------|
| City MARLBOROUGH | State MA | Zip Code 01752 |
|---------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00357863

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 10 / 2018

Transaction ID : A5E31DC511B834386BE0

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SOUTHWEST AIRLINES PILOTS' ASSOCIATION PAC (SWAPA PAC)

Mailing Address 1450 EMPIRE CENTRAL DR
STE 737

| | | |
|----------------|-------------|------------------------|
| City DALLAS | State TX | Zip Code 75247-4081 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00360669

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2018

Transaction ID : ACD0CBBA75D1640FE99C

Amount of Each Receipt this Period
4000.00

Memo Item

| | |
|-------------------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 5500.00 |
| TOTAL This Period (last page this line number only)..... ▶ | |

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

| | | | | |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 37 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
DEFENDING AND INVESTING IN AMERICA'S NEW ENDEAVORS PAC (DIANE PAC)

Mailing Address PO BOX 1437

| | | |
|------------------|-------------|------------------------|
| City GALLATIN | State TN | Zip Code 37066-1437 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00499996

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2018

Transaction ID : ABC35626B8F1A4206936

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BUILD OUR FUTURE PAC

Mailing Address 610 S BOULEVARD

| | | |
|---------------|-------------|------------------------|
| City TAMPA | State FL | Zip Code 33606-2647 |
|---------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00625947

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2018

Transaction ID : A66D105FAFBDF4A619C7

Amount of Each Receipt this Period
 _____ 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 MASSACHUSETTS AVE NW

| | | |
|--------------------|-------------|------------------------|
| City WASHINGTON | State DC | Zip Code 20036-2212 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00035451

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2018

Transaction ID : AC51CBBEAE5114CB0AA0

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

| | |
|-------------------------------------------------------------------|---------------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | _____ 4700.00 |
| TOTAL This Period (last page this line number only)..... ▶ | _____ |

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

| | | | | |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 38 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
ELBIT SYSTEMS OF AMERICA LLC PAC

Mailing Address 4700 MARINE CREEK PKWY

| | | |
|--------------------|-------------|------------------------|
| City FORT WORTH | State TX | Zip Code 76179-3505 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00437566

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2018

Transaction ID : AC843B06DFC7547FE902

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES PAC

Mailing Address 2121 CRYSTAL DR
STE 100

| | | |
|-------------------|-------------|------------------------|
| City ARLINGTON | State VA | Zip Code 22202-3706 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00303024

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2018

Transaction ID : ACCDF6ADB5D774AB1A96

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MIDNIGHT SUN PAC

Mailing Address PO BOX 27814

| | | |
|--------------------|-------------|------------------------|
| City WASHINGTON | State DC | Zip Code 20038-7814 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00345199

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2018

Transaction ID : A79BF4E2F59A34AD69EF

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

| | |
|-------------------------------------------------------------------|---------------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | _____ 2500.00 |
| TOTAL This Period (last page this line number only)..... ▶ | _____ |

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

| | | | | |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 39 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN BOLTON PAC

Mailing Address 1730 M STREET NW
SUITE 611

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00542431

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2018

Transaction ID : **A295FF017819F4532944**

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES PAC

Mailing Address 2121 CRYSTAL DR
STE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
9000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2018

Transaction ID : **AC9B54AFC62A44FD0A8A**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CMS ENERGY CORPORATION EMPLOYEES FOR BETTER GOVT

Mailing Address 1 ENERGY PLAZA DR

City JACKSON State MI Zip Code 49201-2357

FEC ID number of contributing federal political committee. **C** C00075473

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
15000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2018

Transaction ID : **AA6AE75DA599F483B885**

Amount of Each Receipt this Period
5000.00

Memo Item

| | |
|-------------------------------------------------------------------|----------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 11000.00 |
| TOTAL This Period (last page this line number only)..... ▶ | |

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

| | | | | |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 40 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
JUMP INTO ACTION FOR CONSERVATIVES TO KEEP OUR IDEAS ELEVATED PAC

Mailing Address PO BOX 26141

| | | |
|--------------------|-------------|------------------------|
| City ALEXANDRIA | State VA | Zip Code 22313-6141 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00582726

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2018

Transaction ID : ADA1B10B8A3644423A7E

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 208 S. AKARD STREET
SUITE 1812

| | | |
|----------------|-------------|-------------------|
| City DALLAS | State TX | Zip Code 75202 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00109017

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
9000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2018

Transaction ID : AA122122342BE4F07983

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DTE ENERGY CO. PAC - FEDERAL

Mailing Address ONE ENERGY PLAZA
ROOM 1583 WCB

| | | |
|-----------------|-------------|-------------------|
| City DETROIT | State MI | Zip Code 48226 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00081547

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2018

Transaction ID : A8A45A2E7DD494EEAB47

Amount of Each Receipt this Period
2500.00

Memo Item

| | |
|------------------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 6000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 41 OF 86 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
DTE ENERGY CO. PAC - FEDERAL

Mailing Address **ONE ENERGY PLAZA
ROOM 1583 WCB**

| | | |
|------------------------|--------------------|--------------------------|
| City DETROIT | State MI | Zip Code 48226 |
|------------------------|--------------------|--------------------------|

FEC ID number of contributing federal political committee. **C C00081547**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2018 |

Transaction ID : A7DA3BFDC574C4B16905

Amount of Each Receipt this Period

| |
|---------|
| 2500.00 |
|---------|

Memo Item

B. Full Name (Last, First, Middle Initial)
DR. BRIAN BABIN FOR CONGRESS

Mailing Address **PO BOX 159**

| | | |
|--------------------------|--------------------|-------------------------------|
| City WOODVILLE | State TX | Zip Code 75979-0159 |
|--------------------------|--------------------|-------------------------------|

FEC ID number of contributing federal political committee. **C C00553859**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2018 |

Transaction ID : AF43F5F76065243649CE

Amount of Each Receipt this Period

| |
|---------|
| 1000.00 |
|---------|

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN BOLTON PAC

Mailing Address **1730 M STREET NW
SUITE 611**

| | | |
|---------------------------|--------------------|--------------------------|
| City WASHINGTON | State DC | Zip Code 20036 |
|---------------------------|--------------------|--------------------------|

FEC ID number of contributing federal political committee. **C C00542431**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2018 |

Transaction ID : A5113709C2D2E413D9D7

Amount of Each Receipt this Period

| |
|---------|
| 5000.00 |
|---------|

Memo Item

| | |
|------------------------------------------------------------------|-----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 8500.00 |
| TOTAL This Period (last page this line number only).....▶ | 84700.00 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| | | | |
|--------------------------------------|-------------------------------------|-------------------------------------|-----------------------------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE 42 OF 86 | |
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input checked="" type="checkbox"/> 11d 14 |
| | | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. Full Name (Last, First, Middle Initial)
CONGRESSIONAL INSTITUTE

Mailing Address 1700 DIAGONAL ROAD. #730

| | | |
|--------------------|-------------|------------------------|
| City ALEXANDRIA | State VA | Zip Code 22314-2843 |
|--------------------|-------------|------------------------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.84

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 13 / 2018

Transaction ID : ADDC206AD85FE486FBD2

Amount of Each Receipt this Period
234.84

Memo Item
CONFERENCE FEES

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

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|------------------------------------------------------------------|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 234.84 |
| TOTAL This Period (last page this line number only).....▶ | 234.84 |

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 43 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. THE WESTIN | | Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2018 |
| Mailing Address 1 STARPOINT | | FEC Identification Number C |
| City STAMFORD | State CT | Zip Code 06902 |
| Purpose of Disbursement LODGING | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 251.94 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : BDF9B71D2D73C4DE28D3 <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. HERTZ | | Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2018 |
| Mailing Address 14501 HERTZ QUAIL SPRINGS PARKWAY | | FEC Identification Number C |
| City MOUNTAIN VIEW | State CA | Zip Code 94043 |
| Purpose of Disbursement CAR RENTAL | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 300.73 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : BC3E5E7D5255E45D2BFA <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. PROFESSIONAL DATA SERVICES | | Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2018 |
| Mailing Address 824 S MILLEDGE AVE STE 101 | | FEC Identification Number C |
| City ATHENS | State GA | Zip Code 30605-1332 |
| Purpose of Disbursement COMPLIANCE CONSULTING | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 3000.00 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B98596AC8D75B4FC2BE9 <input type="checkbox"/> Memo Item | |

| | |
|------------------------------------------------------------------|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 3552.67 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 44 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. FIRST COMMUNITY BANK | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2018 | | |
| Mailing Address 200 E MAIN STREET | | | FEC Identification Number C | | |
| City HARBOR SPRINGS | State MI | Zip Code 49740 | Amount of Each Disbursement this Period 25.00 | | |
| Purpose of Disbursement BANK FEES | | Category/ Type 001 | Transaction ID : B9BA35A3FFF6C4555891 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. GODADDY.COM | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2018 | | |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | | FEC Identification Number C | | |
| City SCOTTSDALE | State AZ | Zip Code 85260 | Amount of Each Disbursement this Period 4.99 | | |
| Purpose of Disbursement EMAIL SERVICES | | Category/ Type 001 | Transaction ID : BD775B4868B3C49759A6 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. CONGRESSIONAL INSTITUTE | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2018 | | |
| Mailing Address 1700 DIAGONAL ROAD. #730 | | | FEC Identification Number C | | |
| City ALEXANDRIA | State VA | Zip Code 22314-2843 | Amount of Each Disbursement this Period 1549.68 | | |
| Purpose of Disbursement CONFERENCE FEES | | Category/ Type 001 | Transaction ID : B9A7EE7263BF44B488DE | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | |
|------------------------------------------------------------------|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1579.67 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 45 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. DELTA AIR LINES | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2018 | | |
| Mailing Address 1030 DELTA BOULEVARD | | | FEC Identification Number C | | |
| City ATLANTA | State GA | Zip Code 30354 | Amount of Each Disbursement this Period 127.30 | | |
| Purpose of Disbursement AIRFARE | | Category/ Type 001 | Transaction ID : B500B849BAB5E4602B7C | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. SPEEDWAY | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2018 | | |
| Mailing Address 308 S JAMES ST | | | FEC Identification Number C | | |
| City GRAYLING | State MI | Zip Code 49738 | Amount of Each Disbursement this Period 35.24 | | |
| Purpose of Disbursement FUEL | | Category/ Type 001 | Transaction ID : BA7571BEACBB14CA9AB0 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. TRANSAXT | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2018 | | |
| Mailing Address 190 MONROE AVE. NW STE 500 | | | FEC Identification Number C | | |
| City GRAND RAPIDS | State MI | Zip Code 49503 | Amount of Each Disbursement this Period 100.13 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : BFB4834C8D7444F3292C | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | |
|------------------------------------------------------------------|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 262.67 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 46 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. THE WESTIN | | Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2018 |
| Mailing Address 1 STARPOINT | | FEC Identification Number C |
| City STAMFORD | State CT | Zip Code 06902 |
| Purpose of Disbursement LODGING | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 251.94 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B65D509EAB9AD434699F <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. MAIN ST INN | | Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2018 |
| Mailing Address 7408 MAIN ST #202 | | FEC Identification Number C |
| City MACKINAC ISLAND | State MI | Zip Code 49757 |
| Purpose of Disbursement LODGING | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 1577.60 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B80A1E058131E45CDB9C <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. GODADDY.COM | | Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2018 |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | FEC Identification Number C |
| City SCOTTSDALE | State AZ | Zip Code 85260 |
| Purpose of Disbursement EMAIL SERVICES | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 4.99 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : BB197E7A7A3DC48D38C1 <input type="checkbox"/> Memo Item | |

| | |
|------------------------------------------------------------------|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1834.53 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 47 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. USHR LONGWORTH | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2018 |
| Mailing Address B209 LONGWORTH HOUSE OFFICE BLDG | | FEC Identification Number C |
| City WASHINGTON | State DC | Zip Code 20515-0001 |
| Purpose of Disbursement EVENT CATERING | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 144.50 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B2C11BECFA83C4D56B0B <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. GODADDY.COM | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2018 |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | FEC Identification Number C |
| City SCOTTSDALE | State AZ | Zip Code 85260 |
| Purpose of Disbursement EMAIL SERVICES | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 4.99 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : BCD510178DBEA477AAD7 <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. USHR LONGWORTH | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2018 |
| Mailing Address B209 LONGWORTH HOUSE OFFICE BLDG | | FEC Identification Number C |
| City WASHINGTON | State DC | Zip Code 20515-0001 |
| Purpose of Disbursement EVENT CATERING | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 145.50 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B2A0307D979E84D82AE9 <input type="checkbox"/> Memo Item | |

| | |
|------------------------------------------------------------------|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 294.99 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 48 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. TRANSAXT | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2018 | | |
| Mailing Address 190 MONROE AVE. NW STE 500 | | | FEC Identification Number C | | |
| City GRAND RAPIDS | State MI | Zip Code 49503 | Amount of Each Disbursement this Period 45.90 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : B47C6567793C748CFAE5 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. DRUCKER LAWHON LLP | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2018 | | |
| Mailing Address 317 15TH ST., NE | | | FEC Identification Number C | | |
| City WASHINGTON | State DC | Zip Code 20002 | Amount of Each Disbursement this Period 18439.13 | | |
| Purpose of Disbursement FUNDRAISING CONSULTING | | Category/ Type 001 | Transaction ID : B7841A91C098B4A5D8F4 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. TOPFUNDRAISING.COM | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2018 | | |
| Mailing Address 7545 SHAGWOOD ST SE | | | FEC Identification Number C | | |
| City CALEDONIA | State MI | Zip Code 49316-7969 | Amount of Each Disbursement this Period 2250.00 | | |
| Purpose of Disbursement FUNDRAISING CONSULTING | | Category/ Type 001 | Transaction ID : B361AE31E319D439BB0F | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | |
|------------------------------------------------------------------|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 20735.03 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | | | |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 49 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. KWIK PRINT | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2018 | |
| Mailing Address 515 S GARFIELD AVE | | | FEC Identification Number C | |
| City TRAVERSE CITY | State MI | Zip Code 49686 | Amount of Each Disbursement this Period 1825.78 | |
| Purpose of Disbursement PRINTING | | Category/ Type 001 | Transaction ID : B7EC6CE304F3A4351B3B | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. APPLEWOOD EATERY | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2018 | |
| Mailing Address 1307 LUDINGTON ST | | | FEC Identification Number C | |
| City ESCANABA | State MI | Zip Code 49829-2835 | Amount of Each Disbursement this Period 614.80 | |
| Purpose of Disbursement EVENT CATERING | | Category/ Type 001 | Transaction ID : B8744758CC03A43C282E | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. GODADDY.COM | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2018 | |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | | FEC Identification Number C | |
| City SCOTTSDALE | State AZ | Zip Code 85260 | Amount of Each Disbursement this Period 4.99 | |
| Purpose of Disbursement EMAIL SERVICES | | Category/ Type 001 | Transaction ID : B0D7A8D358F0441F6949 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|------------------------------------------------------------------|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2445.57 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 50 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. GODADDY.COM | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2018 | | |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | | FEC Identification Number C | | |
| City SCOTTSDALE | State AZ | Zip Code 85260 | Amount of Each Disbursement this Period 14.97 | | |
| Purpose of Disbursement EMAIL SERVICES | | Category/ Type 001 | Transaction ID : BA0FEE17A14464B55925 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. TRANSAXT | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2018 | | |
| Mailing Address 190 MONROE AVE. NW STE 500 | | | FEC Identification Number C | | |
| City GRAND RAPIDS | State MI | Zip Code 49503 | Amount of Each Disbursement this Period 47.26 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : B5CE183D26F0C4FE3B09 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2018 | | |
| Mailing Address 1 VERIZON WAY | | | FEC Identification Number C | | |
| City BASKING RIDGE | State NJ | Zip Code 07920 | Amount of Each Disbursement this Period 237.98 | | |
| Purpose of Disbursement CELL PHONE | | Category/ Type 001 | Transaction ID : B5654C0E9964641E1A5B | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|------------------------------------------------------------------|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 300.21 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 51 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. SHELL OIL COMPANY | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2018 | | |
| Mailing Address 809 N CEDAR ST | | | FEC Identification Number C | | |
| City KALKASKA | State MI | Zip Code 49646 | Amount of Each Disbursement this Period 40.60 | | |
| Purpose of Disbursement FUEL | | Category/ Type 001 | Transaction ID : BC2392586262A4FEAAAC | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2018 | | |
| Mailing Address 4333 AMON CARTER BOULEVARD | | | FEC Identification Number C | | |
| City FORT WORTH | State TX | Zip Code 76155 | Amount of Each Disbursement this Period 120.30 | | |
| Purpose of Disbursement AIRFARE | | Category/ Type 001 | Transaction ID : BF8E10E16CF8549359D4 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2018 | | |
| Mailing Address 4333 AMON CARTER BOULEVARD | | | FEC Identification Number C | | |
| City FORT WORTH | State TX | Zip Code 76155 | Amount of Each Disbursement this Period 100.30 | | |
| Purpose of Disbursement AIRFARE | | Category/ Type 001 | Transaction ID : B41F24853B6D1469E8C9 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|------------------------------------------------------------------|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 261.20 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 52 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. THE STREETERS CENTER | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2018 | | |
| Mailing Address 1669 S GARFIELD AVE | | | FEC Identification Number C | | |
| City TRAVERSE CITY | State MI | Zip Code 49686 | Amount of Each Disbursement this Period 1093.72 | | |
| Purpose of Disbursement EVENT CATERING | | Category/ Type 001 | Transaction ID : BC94338DFC8934908B5C | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2018 | | |
| Mailing Address 1 VERIZON WAY | | | FEC Identification Number C | | |
| City BASKING RIDGE | State NJ | Zip Code 07920 | Amount of Each Disbursement this Period 70.82 | | |
| Purpose of Disbursement CELL PHONE | | Category/ Type 001 | Transaction ID : BE5A9F110E4294EBDAA5 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. WALMART | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2018 | | |
| Mailing Address 702 S.W. 8TH ST | | | FEC Identification Number C | | |
| City BENTONVILLE | State AR | Zip Code 72716 | Amount of Each Disbursement this Period 5.89 | | |
| Purpose of Disbursement EVENT SUPPLIES | | Category/ Type 001 | Transaction ID : BC36B509DD8DE4FEF97C | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 1170.43 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 53 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

A. STRIPE

Full Name (Last, First, Middle Initial)
Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement CC TRANSACTION FEES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 01 / 31 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 66.00

Transaction ID : B9045A0F8263547C2AF3

Memo Item

B. KWIK PRINT

Full Name (Last, First, Middle Initial)
Mailing Address 515 S GARFIELD AVE

City TRAVERSE CITY State MI Zip Code 49686

Purpose of Disbursement PRINTING Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 01 / 31 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 21.20

Transaction ID : B7AC14A806F9D4A75BAD

Memo Item

C. TRANSAXT

Full Name (Last, First, Middle Initial)
Mailing Address 190 MONROE AVE. NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement CC TRANSACTION FEES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 02 / 02 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 45.00

Transaction ID : B49204C2134704532AF9

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 132.20

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

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 54 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. DELTA AIR LINES | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2018 | | |
| Mailing Address 1030 DELTA BOULEVARD | | | FEC Identification Number C | | |
| City ATLANTA | State GA | Zip Code 30354 | Amount of Each Disbursement this Period 581.30 | | |
| Purpose of Disbursement AIRFARE | | Category/ Type 001 | Transaction ID : B4A33F00F6A4D4C0299C | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. FIRST COMMUNITY BANK | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2018 | | |
| Mailing Address 200 E MAIN STREET | | | FEC Identification Number C | | |
| City HARBOR SPRINGS | State MI | Zip Code 49740 | Amount of Each Disbursement this Period 25.00 | | |
| Purpose of Disbursement BANK FEES | | Category/ Type 001 | Transaction ID : B8833507841A742FB948 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2018 | | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 12.62 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : BB5C6AD51208241FF9D0 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 618.92 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 55 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. PROFESSIONAL DATA SERVICES | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2018 | | |
| Mailing Address 824 S MILLEDGE AVE STE 101 | | | FEC Identification Number C | | |
| City ATHENS | State GA | Zip Code 30605-1332 | Amount of Each Disbursement this Period 1504.45 | | |
| Purpose of Disbursement COMPLIANCE CONSULTING | | Category/ Type 001 | Transaction ID : B9124BA54548241C287B | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. TRANSAXT | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2018 | | |
| Mailing Address 190 MONROE AVE. NW STE 500 | | | FEC Identification Number C | | |
| City GRAND RAPIDS | State MI | Zip Code 49503 | Amount of Each Disbursement this Period 46.13 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : BFBA61C9248254308854 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. FIRST COMMUNITY BANK | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2018 | | |
| Mailing Address 200 E MAIN STREET | | | FEC Identification Number C | | |
| City HARBOR SPRINGS | State MI | Zip Code 49740 | Amount of Each Disbursement this Period 40.00 | | |
| Purpose of Disbursement BANK FEES | | Category/ Type 001 | Transaction ID : B30F4486DABA2418EBB5 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 1590.58 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 56 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. DELTA AIR LINES | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2018 | | |
| Mailing Address 1030 DELTA BOULEVARD | | | FEC Identification Number C | | |
| City ATLANTA | State GA | Zip Code 30354 | Amount of Each Disbursement this Period 585.80 | | |
| Purpose of Disbursement AIRFARE | | Category/ Type 001 | Transaction ID : BEC432556302E4D069BF | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. SHELL OIL COMPANY | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2018 | | |
| Mailing Address 809 N CEDAR ST | | | FEC Identification Number C | | |
| City KALKASKA | State MI | Zip Code 49646 | Amount of Each Disbursement this Period 30.15 | | |
| Purpose of Disbursement FUEL | | Category/ Type 001 | Transaction ID : B28CD28516C3640A3AB6 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. GODADDY.COM | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2018 | | |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | | FEC Identification Number C | | |
| City SCOTTSDALE | State AZ | Zip Code 85260 | Amount of Each Disbursement this Period 4.99 | | |
| Purpose of Disbursement EMAIL SERVICES | | Category/ Type 001 | Transaction ID : BD78321F4B7EC492B85D | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 620.94 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 57 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. GODADDY.COM | | Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2018 |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | FEC Identification Number C |
| City SCOTTSDALE | State AZ | Zip Code 85260 |
| Purpose of Disbursement EMAIL SERVICES | Category/Type 001 | |
| Candidate Name | Amount of Each Disbursement this Period 4.99 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B89BCF42AB8864861B00 | |
| | | <input type="checkbox"/> Memo Item |

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|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. SHELL OIL COMPANY | | Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2018 |
| Mailing Address 809 N CEDAR ST | | FEC Identification Number C |
| City KALKASKA | State MI | Zip Code 49646 |
| Purpose of Disbursement FUEL | Category/Type 001 | |
| Candidate Name | Amount of Each Disbursement this Period 23.36 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B794519191F4A49F89FA | |
| | | <input type="checkbox"/> Memo Item |

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| Full Name (Last, First, Middle Initial) C. KWIK PRINT | | Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2018 |
| Mailing Address 515 S GARFIELD AVE | | FEC Identification Number C |
| City TRAVERSE CITY | State MI | Zip Code 49686 |
| Purpose of Disbursement PRINTING | Category/Type 001 | |
| Candidate Name | Amount of Each Disbursement this Period 198.22 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B82700DDEC4B8468C817 | |
| | | <input type="checkbox"/> Memo Item |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 226.57 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 58 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. WALMART | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2018 | |
| Mailing Address 702 S.W. 8TH ST | | | FEC Identification Number C | |
| City BENTONVILLE | State AR | Zip Code 72716 | Amount of Each Disbursement this Period 19.32 | |
| Purpose of Disbursement OFFICE SUPPLIES | | Category/ Type 001 | Transaction ID : BA11C288DC0DC451DB00 | |
| Candidate Name | | | <input type="checkbox"/> Memo Item | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. GODADDY.COM | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018 | |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | | FEC Identification Number C | |
| City SCOTTSDALE | State AZ | Zip Code 85260 | Amount of Each Disbursement this Period 4.99 | |
| Purpose of Disbursement EMAIL SERVICES | | Category/ Type 001 | Transaction ID : BF63C3B935DD8468F982 | |
| Candidate Name | | | <input type="checkbox"/> Memo Item | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. LIS, ANTHONY, , , | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018 | |
| Mailing Address 3585 BUNKER HILL RD #434 | | | FEC Identification Number C | |
| City ACME | State MI | Zip Code 49610-5004 | Amount of Each Disbursement this Period 500.00 | |
| Purpose of Disbursement STRATEGY CONSULTING | | Category/ Type 001 | Transaction ID : BE8C6A8C32A2649679A9 | |
| Candidate Name | | | <input type="checkbox"/> Memo Item | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 524.31 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 59 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. THE RITZ CARLTON | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018 | |
| Mailing Address 4445 WILLARD AVE#800 | | | FEC Identification Number C | |
| City CHEVY CHASE | State MD | Zip Code 20815-3699 | Amount of Each Disbursement this Period 278.43 | |
| Purpose of Disbursement LODGING | | Category/ Type 001 | Transaction ID : BE2188327AF2545B88D3 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018 | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 26.72 | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : B7D0A1C7A673141A88C4 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. TRIG'S FOODS | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018 | |
| Mailing Address 925 E WALL ST | | | FEC Identification Number C | |
| City EAGLE RIVER | State WI | Zip Code 54521-8720 | Amount of Each Disbursement this Period 879.34 | |
| Purpose of Disbursement EVENT CATERING | | Category/ Type 001 | Transaction ID : B5746280688ED4D83937 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|------------------------------------------------------------------|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1184.49 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 60 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. DRUCKER LAWHON LLP | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018 | | |
| Mailing Address 317 15TH ST., NE | | | FEC Identification Number C | | |
| City WASHINGTON | State DC | Zip Code 20002 | Amount of Each Disbursement this Period 3592.90 | | |
| Purpose of Disbursement FUNDRAISING CONSULTING | | Category/ Type 001 | Transaction ID : B5BF17E1C18CC47EFA44 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. TRIG'S FOODS | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018 | | |
| Mailing Address 925 E WALL ST | | | FEC Identification Number C | | |
| City EAGLE RIVER | State WI | Zip Code 54521-8720 | Amount of Each Disbursement this Period 133.33 | | |
| Purpose of Disbursement EVENT CATERING | | Category/ Type 001 | Transaction ID : B3365916037C34EAEAF5 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. ARISTOTLE INTERNATIONAL INC. | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018 | | |
| Mailing Address 205 PENNSYLVANIA AVE SE | | | FEC Identification Number C | | |
| City WASHINGTON | State DC | Zip Code 20003-1164 | Amount of Each Disbursement this Period 1800.00 | | |
| Purpose of Disbursement SOFTWARE | | Category/ Type 001 | Transaction ID : B0B1AFA2D12854F778B5 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 5526.23 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 61 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. GODADDY.COM | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018 | | |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | | FEC Identification Number C | | |
| City SCOTTSDALE | State AZ | Zip Code 85260 | Amount of Each Disbursement this Period 9.98 | | |
| Purpose of Disbursement EMAIL SERVICES | | Category/ Type 001 | Transaction ID : BA1A099C0CD8E4896A65 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. NORTHWAY DESIGN CO | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018 | | |
| Mailing Address 117 E 5TH ST | | | FEC Identification Number C | | |
| City GAYLORD | State MI | Zip Code 49735-1225 | Amount of Each Disbursement this Period 340.00 | | |
| Purpose of Disbursement GRAPHIC DESIGN | | Category/ Type 001 | Transaction ID : BAD78404ED2BE4221AEE | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018 | | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 0.50 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : BD09A333D36CB40D78D6 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 350.48 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 62 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. STRIPE | | Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2018 |
| Mailing Address 3180 18TH ST | | FEC Identification Number C |
| City SAN FRANCISCO | State CA | Zip Code 94110 |
| Purpose of Disbursement CC TRANSACTION FEES | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 1.30 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B928EF6489B1A480C971 <input type="checkbox"/> Memo Item | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. STRIPE | | Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2018 |
| Mailing Address 3180 18TH ST | | FEC Identification Number C |
| City SAN FRANCISCO | State CA | Zip Code 94110 |
| Purpose of Disbursement CC TRANSACTION FEES | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 5.22 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : BB2BB44BA81A84EE5BD1 <input type="checkbox"/> Memo Item | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. BP | | Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018 |
| Mailing Address 501 WESTLAKE PARK BLVD | | FEC Identification Number C |
| City HOUSTON | State TX | Zip Code 77079 |
| Purpose of Disbursement FUEL | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 59.00 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B37C9451B98AF423684B <input type="checkbox"/> Memo Item | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 65.52 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 63 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. TRIG'S FOODS | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018 | | |
| Mailing Address 925 E WALL ST | | | FEC Identification Number C | | |
| City EAGLE RIVER | State WI | Zip Code 54521-8720 | Amount of Each Disbursement this Period 314.39 | | |
| Purpose of Disbursement EVENT CATERING | | Category/ Type 001 | Transaction ID : B1F6D3030A9E24B9C923 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. BP | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018 | | |
| Mailing Address 501 WESTLAKE PARK BLVD | | | FEC Identification Number C | | |
| City HOUSTON | State TX | Zip Code 77079 | Amount of Each Disbursement this Period 96.00 | | |
| Purpose of Disbursement FUEL | | Category/ Type 001 | Transaction ID : B94D2559957FC4C2FB6E | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. GATEWAY LODGE | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018 | | |
| Mailing Address 4103 COUNTY RD B | | | FEC Identification Number C | | |
| City LAND O LAKES | State WI | Zip Code 54540-9636 | Amount of Each Disbursement this Period 269.21 | | |
| Purpose of Disbursement LODGING | | Category/ Type 001 | Transaction ID : B9244BB35853641DB93F | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 679.60 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 64 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018 | | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 7.94 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : B5F63F154CFD74EB382A | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. EXXON MOBIL | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018 | | |
| Mailing Address 101 S BRADLEY HWY | | | FEC Identification Number C | | |
| City ROGERS CITY | State MI | Zip Code 49779 | Amount of Each Disbursement this Period 50.12 | | |
| Purpose of Disbursement FUEL | | Category/ Type 001 | Transaction ID : BF8860B1683094202B1A | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. ROOT CELLAR LODGING | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018 | | |
| Mailing Address N11071 E SHORE RD | | | FEC Identification Number C | | |
| City MARENISCO | State MI | Zip Code 49947-9737 | Amount of Each Disbursement this Period 234.67 | | |
| Purpose of Disbursement LODGING | | Category/ Type 001 | Transaction ID : BC2AA18D9CC2D4BEEBF3 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|------------------------------------------------------------------|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 292.73 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 65 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2018 | | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 18.80 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : BDBE20DA250A04D6DBD4 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. USPS | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018 | | |
| Mailing Address 600 PENNSYLVANIA AVE SE #2 | | | FEC Identification Number C | | |
| City WASHINGTON | State DC | Zip Code 20003 | Amount of Each Disbursement this Period 14.25 | | |
| Purpose of Disbursement POSTAGE | | Category/ Type 001 | Transaction ID : BB7537D9653424C9EAB9 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. HERTZ | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018 | | |
| Mailing Address 14501 HERTZ QUAIL SPRINGS PARKWAY | | | FEC Identification Number C | | |
| City MOUNTAIN VIEW | State CA | Zip Code 94043 | Amount of Each Disbursement this Period 718.92 | | |
| Purpose of Disbursement CAR RENTAL | | Category/ Type 001 | Transaction ID : BF8F881C920D7428DBC4 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 751.97 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 66 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018 | | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 4.29 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : B0CB0939F6731415BB8C | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2018 | | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 0.50 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : BD83F8B24A9C146998FA | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. KWIK PRINT | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2018 | | |
| Mailing Address 515 S GARFIELD AVE | | | FEC Identification Number C | | |
| City TRAVERSE CITY | State MI | Zip Code 49686 | Amount of Each Disbursement this Period 42.40 | | |
| Purpose of Disbursement PRINTING | | Category/ Type 001 | Transaction ID : B84DBD513766A4D18838 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|------------------------------------------------------------------|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 47.19 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 67 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. KWIK PRINT | | Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2018 |
| Mailing Address 515 S GARFIELD AVE | | FEC Identification Number C |
| City TRAVERSE CITY | State MI | Zip Code 49686 |
| Purpose of Disbursement PRINTING | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 308.46 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. FIRST COMMUNITY BANK | | Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2018 |
| Mailing Address 200 E MAIN STREET | | FEC Identification Number C |
| City HARBOR SPRINGS | State MI | Zip Code 49740 |
| Purpose of Disbursement BANK FEES | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 25.00 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. USPS | | Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2018 |
| Mailing Address 600 PENNSYLVANIA AVE SE #2 | | FEC Identification Number C |
| City WASHINGTON | State DC | Zip Code 20003 |
| Purpose of Disbursement POSTAGE | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 27.50 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 360.96 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 68 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. NORTHWAY DESIGN CO | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2018 | |
| Mailing Address 117 E 5TH ST | | | FEC Identification Number C | |
| City GAYLORD | State MI | Zip Code 49735-1225 | Amount of Each Disbursement this Period 1125.00 | |
| Purpose of Disbursement GRAPHIC DESIGN | | Category/ Type 001 | Transaction ID : BBB97B34137DE4AADA55 | |
| Candidate Name | | | <input type="checkbox"/> Memo Item | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2018 | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 0.84 | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : BD577074B709D452D9B4 | |
| Candidate Name | | | <input type="checkbox"/> Memo Item | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. DRUCKER LAWHON LLP | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2018 | |
| Mailing Address 317 15TH ST., NE | | | FEC Identification Number C | |
| City WASHINGTON | State DC | Zip Code 20002 | Amount of Each Disbursement this Period 1813.26 | |
| Purpose of Disbursement FUNDRAISING CONSULTING | | Category/ Type 001 | Transaction ID : BB99DF9F0807B4C2CA34 | |
| Candidate Name | | | <input type="checkbox"/> Memo Item | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 2939.10 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 69 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. PROFESSIONAL DATA SERVICES | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2018 | | |
| Mailing Address 824 S MILLEDGE AVE STE 101 | | | FEC Identification Number C | | |
| City ATHENS | State GA | Zip Code 30605-1332 | Amount of Each Disbursement this Period 1701.43 | | |
| Purpose of Disbursement COMPLIANCE CONSULTING | | Category/ Type 001 | Transaction ID : B9A29193744CB4E16A32 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. BULLFEATHERS | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2018 | | |
| Mailing Address 410 FIRST ST SE | | | FEC Identification Number C | | |
| City WASHINGTON | State DC | Zip Code 20003 | Amount of Each Disbursement this Period 183.25 | | |
| Purpose of Disbursement MEETING EXPENSE | | Category/ Type 001 | Transaction ID : BD340BB7E5A0A49A9B8A | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. HYATT PLACE | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2018 | | |
| Mailing Address 2401 SHOWTIME DR | | | FEC Identification Number C | | |
| City LANSING | State MI | Zip Code 48912-5636 | Amount of Each Disbursement this Period 92.47 | | |
| Purpose of Disbursement LODGING | | Category/ Type 001 | Transaction ID : B151EF87A572D46219EE | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 1977.15 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 70 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. GODADDY.COM | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2018 | | |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | | FEC Identification Number C | | |
| City SCOTTSDALE | State AZ | Zip Code 85260 | Amount of Each Disbursement this Period 4.99 | | |
| Purpose of Disbursement EMAIL SERVICES | | Category/ Type 001 | Transaction ID : B74798FB4FE2F49F9A82 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. DETROIT REGIONAL CHAMBER | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2018 | | |
| Mailing Address P.O. BOX 33840 | | | FEC Identification Number C | | |
| City DETROIT | State MI | Zip Code 48232-5840 | Amount of Each Disbursement this Period 750.00 | | |
| Purpose of Disbursement CONFERENCE REGISTRATION | | Category/ Type 001 | Transaction ID : B4FE672A565804D42935 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2018 | | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 5.94 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : BEBA22E260CB845F9AD9 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 760.93 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 71 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. STRIPE | | Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2018 |
| Mailing Address 3180 18TH ST | | FEC Identification Number C |
| City SAN FRANCISCO | State CA | Zip Code 94110 |
| Purpose of Disbursement CC TRANSACTION FEES | | 001 |
| Candidate Name | | Amount of Each Disbursement this Period 0.50 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : BB33D6B6D5308404A8E0 |
| State: District: | | <input type="checkbox"/> Memo Item |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. GODADDY.COM | | Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2018 |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | FEC Identification Number C |
| City SCOTTSDALE | State AZ | Zip Code 85260 |
| Purpose of Disbursement EMAIL SERVICES | | 001 |
| Candidate Name | | Amount of Each Disbursement this Period 4.99 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : B4EA4E611165F44E0B38 |
| State: District: | | <input type="checkbox"/> Memo Item |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. TRANSAXT | | Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2018 |
| Mailing Address 190 MONROE AVE. NW STE 500 | | FEC Identification Number C |
| City GRAND RAPIDS | State MI | Zip Code 49503 |
| Purpose of Disbursement CC TRANSACTION FEES | | 001 |
| Candidate Name | | Amount of Each Disbursement this Period 101.70 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : B4727F6FAC5CE4824864 |
| State: District: | | <input type="checkbox"/> Memo Item |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 107.19 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 72 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. UNITED AIRLINES | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2018 | | |
| Mailing Address 233 S WACKER DR | | | FEC Identification Number C | | |
| City CHICAGO | State IL | Zip Code 60606-7147 | Amount of Each Disbursement this Period 485.30 | | |
| Purpose of Disbursement AIRFARE | | Category/ Type 001 | Transaction ID : B005DB15E076E4F3C98E | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. GODADDY.COM | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2018 | | |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | | FEC Identification Number C | | |
| City SCOTTSDALE | State AZ | Zip Code 85260 | Amount of Each Disbursement this Period 4.99 | | |
| Purpose of Disbursement EMAIL SERVICES | | Category/ Type 001 | Transaction ID : B885EABC9F9C443B9978 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2018 | | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 0.34 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : B2C3218CB33EE4D95B71 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | |
|------------------------------------------------------------------|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 490.63 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 73 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. KWIK PRINT | | Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2018 |
| Mailing Address 515 S GARFIELD AVE | | FEC Identification Number C |
| City TRAVERSE CITY | State MI | Zip Code 49686 |
| Purpose of Disbursement PRINTING | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 22.79 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B3F45858B79CD44F99D9 <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. KWIK PRINT | | Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2018 |
| Mailing Address 515 S GARFIELD AVE | | FEC Identification Number C |
| City TRAVERSE CITY | State MI | Zip Code 49686 |
| Purpose of Disbursement PRINTING | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 2.50 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : BC42B2F8A510F4552964 <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. GODADDY.COM | | Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2018 |
| Mailing Address 14455 N HAYDEN RD. STE 226 | | FEC Identification Number C |
| City SCOTTSDALE | State AZ | Zip Code 85260 |
| Purpose of Disbursement EMAIL SERVICES | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 9.98 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : B4566B079423143F3B56 <input type="checkbox"/> Memo Item | |

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|------------------------------------------------------------------|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 35.27 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 74 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. DRUCKER LAWHON LLP | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2018 | | |
| Mailing Address 317 15TH ST., NE | | | | | |
| City WASHINGTON | State DC | Zip Code 20002 | FEC Identification Number C | | |
| Purpose of Disbursement FUNDRAISING CONSULTING | | Category/ Type 001 | Amount of Each Disbursement this Period 2528.02 | | |
| Candidate Name | | Transaction ID : B487F567F26E04E8EA72 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2018 | | |
| Mailing Address 3180 18TH ST | | | | | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | FEC Identification Number C | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Amount of Each Disbursement this Period 1.80 | | |
| Candidate Name | | Transaction ID : B79E91FD3041A499C96D | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. TRANSAXT | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2018 | | |
| Mailing Address 190 MONROE AVE. NW STE 500 | | | | | |
| City GRAND RAPIDS | State MI | Zip Code 49503 | FEC Identification Number C | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Amount of Each Disbursement this Period 127.13 | | |
| Candidate Name | | Transaction ID : B1E91933FE45948DD94E | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 2656.95 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 75 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. KWIK PRINT | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2018 | |
| Mailing Address 515 S GARFIELD AVE | | | FEC Identification Number C | |
| City TRAVERSE CITY | State MI | Zip Code 49686 | Amount of Each Disbursement this Period 23.85 | |
| Purpose of Disbursement PRINTING | | Category/ Type 001 | Transaction ID : B1718BA003F924E26AF7 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2018 | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 19.84 | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : B325B5C9ABC2F4F2DB81 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2018 | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 8.20 | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : BE767084B6D0648EABCD | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 51.89 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 76 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. KWIK PRINT | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2018 | | |
| Mailing Address 515 S GARFIELD AVE | | | FEC Identification Number C | | |
| City TRAVERSE CITY | State MI | Zip Code 49686 | Amount of Each Disbursement this Period 45.05 | | |
| Purpose of Disbursement PRINTING | | Category/ Type 001 | Transaction ID : B8AC60DCCA7F34CE2876 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. STRIPE | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2018 | | |
| Mailing Address 3180 18TH ST | | | FEC Identification Number C | | |
| City SAN FRANCISCO | State CA | Zip Code 94110 | Amount of Each Disbursement this Period 210.20 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : B9CA3EC7AD6474A35A28 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. TRANSAXT | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2018 | | |
| Mailing Address 190 MONROE AVE. NW STE 500 | | | FEC Identification Number C | | |
| City GRAND RAPIDS | State MI | Zip Code 49503 | Amount of Each Disbursement this Period 509.63 | | |
| Purpose of Disbursement CC TRANSACTION FEES | | Category/ Type 001 | Transaction ID : B710EDAB455354028AC2 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 764.88 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 77 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. STRIPE | | Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2018 |
| Mailing Address 3180 18TH ST | | FEC Identification Number C |
| City SAN FRANCISCO | State CA | Zip Code 94110 |
| Purpose of Disbursement CC TRANSACTION FEES | | 001 |
| Candidate Name | | Amount of Each Disbursement this Period 11.84 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : B2147E4EB2A3441848C5 |
| State: District: | | <input type="checkbox"/> Memo Item |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. CITI CARD | | Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2018 |
| Mailing Address PO BOX 78045 | | FEC Identification Number C |
| City PHOENIX | State AZ | Zip Code 85062 |
| Purpose of Disbursement SEE MEMO ENTRIES | | 001 |
| Candidate Name | | Amount of Each Disbursement this Period 399.39 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : B203F5995663840759BE |
| State: District: | | <input type="checkbox"/> Memo Item |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. FACEBOOK | | Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2018 |
| Mailing Address 1 HACKER WAY | | FEC Identification Number C |
| City MENLO PARK | State CA | Zip Code 94025 |
| Purpose of Disbursement DIGITAL ADVERTISING | | 001 |
| Candidate Name | | Amount of Each Disbursement this Period 39.85 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : B5E7B9D2155AF45EFB6C |
| State: District: | | <input checked="" type="checkbox"/> Memo Item |

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|------------------------------------------------------------------|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 411.23 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 78 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS | | Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2018 |
| Mailing Address 1 VERIZON WAY | | FEC Identification Number C |
| City BASKING RIDGE | State NJ | Zip Code 07920 |
| Purpose of Disbursement PHONE SERVICES | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 329.54 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input checked="" type="checkbox"/> Memo Item | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. CITI CARD | | Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2018 |
| Mailing Address PO BOX 78045 | | FEC Identification Number C |
| City PHOENIX | State AZ | Zip Code 85062 |
| Purpose of Disbursement SEE MEMO ENTRIES | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 808.63 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS | | Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2018 |
| Mailing Address 1 VERIZON WAY | | FEC Identification Number C |
| City BASKING RIDGE | State NJ | Zip Code 07920 |
| Purpose of Disbursement PHONE SERVICES | Category/ Type 001 | |
| Candidate Name | | Amount of Each Disbursement this Period 364.89 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input checked="" type="checkbox"/> Memo Item | |

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|------------------------------------------------------------------|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 808.63 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 79 OF 86 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. NATIONBUILDER | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2018 | |
| Mailing Address 520 S GRAND AVE 2ND FLOOR | | | FEC Identification Number C | |
| City LOS ANGELES | State CA | Zip Code 90071 | Amount of Each Disbursement this Period 199.00 | |
| Purpose of Disbursement SOFTWARE | | Category/ Type 001 | Transaction ID : B6952B5746AF541FCA9B | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. FACEBOOK | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2018 | |
| Mailing Address 1 HACKER WAY | | | FEC Identification Number C | |
| City MENLO PARK | State CA | Zip Code 94025 | Amount of Each Disbursement this Period 115.00 | |
| Purpose of Disbursement DIGITAL ADVERTISING | | Category/ Type 001 | Transaction ID : BE2D639BFC97B483F93C | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. CITI CARD | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2018 | |
| Mailing Address PO BOX 78045 | | | FEC Identification Number C | |
| City PHOENIX | State AZ | Zip Code 85062 | Amount of Each Disbursement this Period 655.67 | |
| Purpose of Disbursement SEE MEMO ENTRIES | | Category/ Type 001 | Transaction ID : B2062A9BA6C8044A093D | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 655.67 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 80 OF 86 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. NATIONBUILDER | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2018 | |
| Mailing Address 520 S GRAND AVE 2ND FLOOR | | | FEC Identification Number C | |
| City LOS ANGELES | State CA | Zip Code 90071 | Amount of Each Disbursement this Period 199.00 | |
| Purpose of Disbursement SOFTWARE | | Category/ Type 001 | Transaction ID : B9A7C5E6E60BB41278E8 | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2018 | |
| Mailing Address 1 VERIZON WAY | | | FEC Identification Number C | |
| City BASKING RIDGE | State NJ | Zip Code 07920 | Amount of Each Disbursement this Period 409.15 | |
| Purpose of Disbursement PHONE SERVICES | | Category/ Type 001 | Transaction ID : B8D07F0EBFD934E0B8AD | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. FACEBOOK | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2018 | |
| Mailing Address 1 HACKER WAY | | | FEC Identification Number C | |
| City MENLO PARK | State CA | Zip Code 94025 | Amount of Each Disbursement this Period 17.52 | |
| Purpose of Disbursement DIGITAL ADVERTISING | | Category/ Type 001 | Transaction ID : B8541BF8267734510B5E | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | |
|------------------------------------------------------------------|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | 57069.18 |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 81 OF 86 |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BERGMANFORCONGRESS

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. JUSTICE FOR MICHIGAN | | Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018 |
| Mailing Address 106 W ALLEGAN ST STE 200 | | FEC Identification Number C |
| City LANSING | State MI | Zip Code 48933-1720 |
| Purpose of Disbursement STATE/LOCAL COMMITTEE | Category/Type 011 | |
| Candidate Name | | Amount of Each Disbursement this Period 499.00 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | FEC Identification Number C |
| City | State | Zip Code |
| Purpose of Disbursement | Category/Type | |
| Candidate Name | | Amount of Each Disbursement this Period |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | FEC Identification Number C |
| City | State | Zip Code |
| Purpose of Disbursement | Category/Type | |
| Candidate Name | | Amount of Each Disbursement this Period |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | |
|------------------------------------------------------------------|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 499.00 |
| TOTAL This Period (last page this line number only).....▶ | 499.00 |

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **BERGMANFORCONGRESS** Transaction ID : **C55C78A25007F4B07B7E**

| | | | |
|-----------------------------------------------------------------------------------------|-------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| LOAN SOURCE Full Name (Last, First, Middle Initial) BERGMAN, JOHN, , , | | <input type="checkbox"/> Memo Item | Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address N3465 SYLVAN ISLE DRIVE | | | |
| City WATERSMEET | State MI | ZIP Code 49969-9728 | <input checked="" type="checkbox"/> Personal Funds of the Candidate |

| | | |
|------------------------------------|------------------------------------|--------------------------------------------------------|
| Original Amount of Loan 4000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 4000.00 |
|------------------------------------|------------------------------------|--------------------------------------------------------|

| | | | | |
|--------------|---------------------------------------|--------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------|
| TERMS | Date Incurred M 08 / D 05 / Y 2016 | Date Due M M / D D / Y NONE | Interest Rate (If none, enter 0) 0.00 % (apr) | Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--------------|---------------------------------------|--------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------|

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

| | |
|--------------------------------------------|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---------------------------------------------------------------|---------|
| SUBTOTALS This Period This Page (optional).....▶ | 4000.00 |
| TOTALS This Period (last page in this line only).....▶ | |

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **BERGMANFORCONGRESS** Transaction ID : **C613C4030EB72412DBB1**

| | | | |
|-----------------------------------------------------------------------------------------|-------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| LOAN SOURCE Full Name (Last, First, Middle Initial) BERGMAN, JOHN, , , | | <input type="checkbox"/> Memo Item | Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address N3465 SYLVAN ISLE DRIVE | | | |
| City WATERSMEET | State MI | ZIP Code 49969-9728 | <input checked="" type="checkbox"/> Personal Funds of the Candidate |

| | | |
|--------------------------------------|------------------------------------|----------------------------------------------------------|
| Original Amount of Loan 150000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 150000.00 |
|--------------------------------------|------------------------------------|----------------------------------------------------------|

| | | | | |
|--------------|---------------------------------------|--------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------|
| TERMS | Date Incurred M 06 / D 30 / Y 2016 | Date Due M M / D D / Y NONE | Interest Rate (If none, enter 0) 0.00 % (apr) | Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--------------|---------------------------------------|--------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------|

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

| | |
|--------------------------------------------|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---------------------------------------------------------------|-----------|
| SUBTOTALS This Period This Page (optional).....▶ | 150000.00 |
| TOTALS This Period (last page in this line only).....▶ | |

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **BERGMANFORCONGRESS** Transaction ID : **C71B1C3C00F2349C8AE9**

| | | | |
|-----------------------------------------------------------------------------------------|-------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| LOAN SOURCE Full Name (Last, First, Middle Initial) BERGMAN, JOHN, , , | | <input type="checkbox"/> Memo Item | Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address N3465 SYLVAN ISLE DRIVE | | | |
| City WATERSMEET | State MI | ZIP Code 49969-9728 | <input checked="" type="checkbox"/> Personal Funds of the Candidate |

| | | |
|-------------------------------------|------------------------------------|---------------------------------------------------------|
| Original Amount of Loan 35000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 35000.00 |
|-------------------------------------|------------------------------------|---------------------------------------------------------|

| | | | | |
|--------------|---------------------------------------|--------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------|
| TERMS | Date Incurred M 07 / D 21 / Y 2016 | Date Due M M / D D / Y NONE | Interest Rate (If none, enter 0) 0.00 % (apr) | Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--------------|---------------------------------------|--------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------|

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

| | |
|--------------------------------------------|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---------------------------------------------------------------|----------|
| SUBTOTALS This Period This Page (optional).....▶ | 35000.00 |
| TOTALS This Period (last page in this line only).....▶ | |

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **BERGMANFORCONGRESS** Transaction ID : **C8CACEC4B6FB5411A91B**

| | | | |
|----------------------------------------------------------------------------------|-------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| LOAN SOURCE Full Name (Last, First, Middle Initial) BERGMAN, JOHN, , , | | <input type="checkbox"/> Memo Item | Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address N3465 SYLVAN ISLE DRIVE | | | |
| City WATERSMEET | State MI | ZIP Code 49969-9728 | <input checked="" type="checkbox"/> Personal Funds of the Candidate |

| | | |
|-------------------------------------|------------------------------------|---------------------------------------------------------|
| Original Amount of Loan 60000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 45000.00 |
|-------------------------------------|------------------------------------|---------------------------------------------------------|

| | | | | |
|--------------|---------------------------------------|--------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------|
| TERMS | Date Incurred M 06 / D 27 / Y 2016 | Date Due M M / D D / Y NONE | Interest Rate (If none, enter 0) 0.00 % (apr) | Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--------------|---------------------------------------|--------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------|

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

| | |
|--------------------------------------------|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---------------------------------------------------------------|----------|
| SUBTOTALS This Period This Page (optional).....▶ | 45000.00 |
| TOTALS This Period (last page in this line only).....▶ | |

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **BERGMANFORCONGRESS** Transaction ID : **CAA9A479D7B5B4657B09**

| | | | |
|----------------------------------------------------------------------------------|-------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| LOAN SOURCE Full Name (Last, First, Middle Initial) BERGMAN, JOHN, , , | | <input type="checkbox"/> Memo Item | Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address N3465 SYLVAN ISLE DRIVE | | | |
| City WATERSMEET | State MI | ZIP Code 49969-9728 | <input checked="" type="checkbox"/> Personal Funds of the Candidate |

| | | |
|-------------------------------------|----------------------------------------|---------------------------------------------------------|
| Original Amount of Loan 30000.00 | Cumulative Payment To Date 10000.00 | Balance Outstanding at Close of This Period 20000.00 |
|-------------------------------------|----------------------------------------|---------------------------------------------------------|

| | | | | |
|--------------|---------------------------------------|--------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------|
| TERMS | Date Incurred M 03 / D 15 / Y 2016 | Date Due M M / D D / Y NONE | Interest Rate (If none, enter 0) 0.00 % (apr) | Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--------------|---------------------------------------|--------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------|

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

| | |
|--------------------------------------------|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|---------------------------------------------------------------|-----------|
| SUBTOTALS This Period This Page (optional).....▶ | 20000.00 |
| TOTALS This Period (last page in this line only).....▶ | 254000.00 |

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