

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINT ▼Example: If typing, type
over the lines

Knollenberg for Congress Committee

ADDRESS (number and street)

31000 Telegraph Road, #110

☐Check if different
than previously
reported. (ACC)

Bingham Farms

MI

48025

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00266767

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

MI

9

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

07

20

2006

through

09

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Richard E. Mida

Signature of Treasurer

Electronically Filed by Richard E. Mida

Date

05

03

2007

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

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Knollenberg for Congress Committee

Report Covering the Period:

From:

M M
0 7D D
2 0Y Y Y Y
2 0 0 6

To:

M M
0 9D D
3 0Y Y Y Y
2 0 0 6

	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)).....	260761.98	2156412.74
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	425.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	260761.98	2155987.74
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	646880.27	2107524.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	146.55	10433.26
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	646733.72	2097091.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	455892.98	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

Knollenberg for Congress Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	2	0	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	6

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than
Political Committees

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

93209.00

1291106.84

(ii) Unitemized.....

11033.00

71202.13

(iii) TOTAL of contributions

104242.00

1362308.97

from individuals..... ▶

100.00

14198.00

(b) Political Party Committees.....

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

156419.98

779905.77

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

260761.98

2156412.74

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

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

0.00

0.00

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

146.55

10433.26

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

11261.55

37725.10

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

272170.08

2204571.10

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	646880.27	2107524.62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	425.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	425.00
21. OTHER DISBURSEMENTS.....	121553.00	166447.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	768433.27	2274396.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	952156.17
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	272170.08
25. SUBTOTAL (add Line 23 and Line 24).....	1224326.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	768433.27
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	455892.98

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

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

FOR LINE NUMBER: PAGE 5 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Waseem Alam		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 92 Millstone Road		Transaction ID: 100032298
City Troy	State MI	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer St. Joseph Mercy Hospital	Occupation Doctor	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Dennis Alberts		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 4055 Country Club Drive		Transaction ID: 100032397
City Bloomfield	State MI	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Ogne, Alberts & Stuart, PC	Occupation Attorney	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1375.00	

C. Full Name (Last, First, Middle Initial) Dennis Alberts		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 4055 Country Club Drive		Transaction ID: 100032355
City Bloomfield	State MI	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Ogne, Alberts & Stuart, PC	Occupation Attorney	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1475.00	

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Kent Anderson Mailing Address 46950 Six Mile Rd. City Northville State MI Zip Code 48167 FEC ID number of contributing federal political committee. C Name of Employer Hamilton Anderson Assoc. Occupation Landscape Architect Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 08 / 23 / 2006 Transaction ID: 100032273 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Nicola Antakli Mailing Address 246 Barden Road City Bloomfield Hills State MI Zip Code 48304-2708 FEC ID number of contributing federal political committee. C Name of Employer Intraco Corp Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt MM / DD / YYYY 08 / 23 / 2006 Transaction ID: 100032274 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Dominic Antonelli Mailing Address 1725 DeSales Street NW, #300 City Washington State DC Zip Code 20036-4436 FEC ID number of contributing federal political committee. C Name of Employer Antonelli Organization Occupation Chairman Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2100.00		Date of Receipt MM / DD / YYYY 09 / 22 / 2006 Transaction ID: 61009.C32470 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)**850.00****TOTAL** This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Ann Ashburn

Mailing Address 11655 Woodlea Drive

City State Zip Code
Waynesboro PA 17268

FEC ID number of contributing
federal political committee.

C

Name of Employer
AmeriDream

Occupation
Executive

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32566

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Ed Bagale

Mailing Address University of Michigan - Dearborn
4901 Evergreen Road, 1130 AB

City State Zip Code
Dearborn MI 48128-1491

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Michigan

Occupation
Government Relations

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 5 / 2 0 0 6

Transaction ID: 100032311

Amount of Each Receipt this Period

250.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Vartkess Balian

Mailing Address 1300 Crystal Drive, #1505

City State Zip Code
Arlington VA 22202-3234

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Builder

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 6

Transaction ID: 61009.C32523

Amount of Each Receipt this Period

250.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Clifford Bath Mailing Address 764 Satterlee Road City Bloomfield Hills State MI Zip Code 48304 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: 61009.C32445 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Nasser Beydoun Mailing Address 26155 Timber Trail City Dearborn Heights State MI Zip Code 48127 FEC ID number of contributing federal political committee. C Name of Employer Amer. Arab Chamber of Commerce Occupation Exec. V.P. Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 6 Transaction ID: 100032275 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Henry Bradley Mailing Address 406 Virginia Ave City Alexandria State VA Zip Code 22302 FEC ID number of contributing federal political committee. C Name of Employer Chad Bradley & Associates LLC Occupation Lobbyist Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6 Transaction ID: 61009.C32579 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)**2000.00****TOTAL** This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. James Butera

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
Butera & AndrewsOccupation
Partner

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 6

Transaction ID: 100032425

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Susan Cambon

Mailing Address 908 Croton Drive

City

State

Zip Code

Alexandria

VA

22308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: 60802.C32206

Amount of Each Receipt this Period

1500.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Stephen Carey

Mailing Address 1411 Russell Rd.

City

State

Zip Code

Alexandria

VA

22301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fabiani & CompanyOccupation
Legislative Counselor

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32569

Amount of Each Receipt this Period

500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) David Carmen Mailing Address 4450 Van Ness Street NW City Washington State DC Zip Code 20016 FEC ID number of contributing federal political committee. C Name of Employer The Carmen Group Occupation President & CEO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt MM / DD / YYYY 08 / 02 / 2006 Transaction ID: 60802.C32188 Amount of Each Receipt this Period 2100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) David Carmen Mailing Address 4450 Van Ness Street NW City Washington State DC Zip Code 20016 FEC ID number of contributing federal political committee. C Name of Employer The Carmen Group Occupation President & CEO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		Date of Receipt MM / DD / YYYY 08 / 02 / 2006 Transaction ID: 60802.C32189 Amount of Each Receipt this Period 2100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) William Chapin Mailing Address 277 Lincoln Road City Grosse Pointe State MI Zip Code 48230 FEC ID number of contributing federal political committee. C Name of Employer Chapin & Company Occupation Automotive Marketing Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 09 / 05 / 2006 Transaction ID: 100032313 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4450.00

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 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

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

Michael Chase

Mailing Address 153 Oak Hollow

City State Zip Code
 Williamsburg VA 23188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Michael Chase Associates

Occupation
Consultant

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 1 / 2 0 0 6

Transaction ID: 61009.C32531

Amount of Each Receipt this Period

250.00

Receipt

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

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

L. David Cherington

Mailing Address 7807 South Valley Drive

City State Zip Code
 Fairfax Station VA 22039

FEC ID number of contributing
federal political committee.

C

Name of Employer
Battelle

Occupation
Director of Gov. Relations

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

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

Transaction ID: 60804.C32226

Amount of Each Receipt this Period

500.00

Receipt

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

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

Paul Cohn

Mailing Address 1325 21st. St. NW

City State Zip Code
 Washington DC 20036-1503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capital Restaurants Conce-
pts

Occupation
Exec. V.P.

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1424.00

Date of Receipt

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

Transaction ID: 61009.C32597

Amount of Each Receipt this Period

1174.00

In-Kind

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

hosted fundraiser

SUBTOTAL of Receipts This Page (optional)

1924.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Gerson Cooper		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 1924 Sherwood Glen		Transaction ID: 61009.C32473
City Bloomfield Hills	State MI	Zip Code 48302-1772
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Botsford General Hospital	Occupation President & CEO	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Joseph Corradino		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 4055 NW 97th Avenue		Transaction ID: 100032276
City Miami	State FL	Zip Code 33178
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Corradino Group	Occupation Owner	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Paul Corrigan		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 26980 Crestwood Drive		Transaction ID: 100032359
City Franklin Village	State MI	Zip Code 48025-1378
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Corrigan Moving & Storage	Occupation President	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Paul Corrigan
Mailing Address 26980 Crestwood Drive

City State Zip Code
Franklin Village MI 48025-1378

FEC ID number of contributing
federal political committee.

C

Name of Employer
Corrigan Moving & Storage

Occupation
President

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 5 / 2 0 0 6

Transaction ID: 61009.C32451

Amount of Each Receipt this Period

300.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Julie Cummings
Mailing Address 111 Willits, #200

City State Zip Code
Birmingham MI 48009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Realtor

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60804.C32243

Amount of Each Receipt this Period

1100.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Peter Cummings
Mailing Address 111 Willits, #200

City State Zip Code
Birmingham MI 48009

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Fisher Group

Occupation
Executive

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60804.C32244

Amount of Each Receipt this Period

1100.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Michael Damone
Mailing Address 3418 Blossom Lane

City State Zip Code
Bloomfield Hills MI 48302-1305

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Damone Group

Occupation
Owner

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 9 / 2 0 0 6

Transaction ID: 100032361

Amount of Each Receipt this Period

500.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Chirpriya Dhabuwala
Mailing Address 342 Millington Blvd.

City State Zip Code
Bloomfield Hills MI 48304-1753

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
medical

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt

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

Transaction ID: 100032291

Amount of Each Receipt this Period

200.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Chirpriya Dhabuwala
Mailing Address 342 Millington Blvd.

City State Zip Code
Bloomfield Hills MI 48304-1753

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
medical

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 9 / 2 0 0 6

Transaction ID: 100032352

Amount of Each Receipt this Period

100.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Bradford Dockser
Mailing Address 8509 Seven Locks Road

City State Zip Code
Bethesda MD 20817

FEC ID number of contributing
federal political committee.

C

Name of Employer
Western Development

Occupation
Exec VP & COO

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: 60802.C32193

Amount of Each Receipt this Period

1000.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Flora Dunaian
Mailing Address 3375 E. Lombardy Road

City State Zip Code
Pasadena CA 91107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Western Medical Supply

Occupation
medical supplies

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32440

Amount of Each Receipt this Period

500.00

In-Kind

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

hosted fundraiser

C. Full Name (Last, First, Middle Initial)
Flora Dunaian
Mailing Address 3375 E. Lombardy Road

City State Zip Code
Pasadena CA 91107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Western Medical Supply

Occupation
medical supplies

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 3 / 2 0 0 6

Transaction ID: 100032326

Amount of Each Receipt this Period

250.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Mary Sue Everly
Mailing Address 30332 East Lincolnshire

City State Zip Code
Beverly Hills MI 48025-4748

FEC ID number of contributing
federal political committee.

C

Name of Employer
Everly Associations

Occupation
Manufacturers Rep.

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1125.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 3 / 2 0 0 6

Transaction ID: 61009.C32474

Amount of Each Receipt this Period

125.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Robert Farnette
Mailing Address 3835 Normanwood Cir.

City State Zip Code
West Bloomfield MI 48323-1633

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61009.C32546

Amount of Each Receipt this Period

125.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Bruce Fennie
Mailing Address 98 North Country Club Drive

City State Zip Code
Rochester NY 14618

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bruce Fennie & Associates

Occupation
Owner

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32570

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) David Fischer		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 5 / 2 0 0 6
Mailing Address 1250 W. Long Lake Road		Transaction ID: 60807.C32259
City Bloomfield Hills	State MI	Zip Code 48302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Suburban Olds.	Occupation Car Dealership Owner	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4100.00	

B. Full Name (Last, First, Middle Initial) David Fischer		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 5 / 2 0 0 6
Mailing Address 1250 W. Long Lake Road		Transaction ID: 60807.C32258
City Bloomfield Hills	State MI	Zip Code 48302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Suburban Olds.	Occupation Car Dealership Owner	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

C. Full Name (Last, First, Middle Initial) Jennifer Fischer		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 5 / 2 0 0 6
Mailing Address 1250 W. Long Lake Rd.		Transaction ID: 60807.C32260
City Bloomfield Hills	State MI	Zip Code 48302-1332
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

SUBTOTAL of Receipts This Page (optional)

4300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 18 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Jennifer Fischer

Mailing Address 1250 W. Long Lake Rd.

City State Zip Code
 Bloomfield Hills MI 48302-1332

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 5 / 2 0 0 6

Transaction ID: 60807.C32261

Amount of Each Receipt this Period

2100.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Phillip Fisher

Mailing Address 2 Towne Square, #900

City State Zip Code
 Southfield MI 48076-3761

FEC ID number of contributing federal political committee.

C

Name of Employer
Self Employed

Occupation

Investor

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 2 2 / 2 0 0 6

Transaction ID: 61009.C32496

Amount of Each Receipt this Period

1700.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Nancy J. Fletcher

Mailing Address 4125 Parkglan Court NW

City State Zip Code
 Washington DC 20007

FEC ID number of contributing federal political committee.

C

Name of Employer
OAAA

Occupation

President & CEO

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32584

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

4800.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Maha Freij
Mailing Address 23032 Windridge Lane

City State Zip Code
Novi MI 48374

FEC ID number of contributing federal political committee.

C

Name of Employer
AccessOccupation
CFO

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 3 / 2 0 0 6

Transaction ID: 100032277

Amount of Each Receipt this Period

1000.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Michael Galloway
Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
Cassidy & AssociatesOccupation
Executive

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60804.C32253

Amount of Each Receipt this Period

500.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Rita Gelman
Mailing Address 201 S. Main Street, #900

City State Zip Code
Ann Arbor MI 48104

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 100032265

Amount of Each Receipt this Period

2000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 20 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Iftikhar Ghouri		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 4 / 2 0 0 6	
Mailing Address 28268 Universal Drive		Transaction ID: 100032301	
City Warren	State MI	Zip Code 48092	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Information Requested	Occupation	Election Cycle-to-Date ▼ 500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Clifford Gibbons		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 6	
Mailing Address 1536 Poplar Place		Transaction ID: 100032431	
City Mc Lean	State VA	Zip Code 22101	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Gibbons & Company	Occupation Owner	Election Cycle-to-Date ▼ 500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Adnan Hammad		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 6	
Mailing Address 2382 Valleyview Drive		Transaction ID: 100032278	
City Troy	State MI	Zip Code 48098	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Access	Occupation Community Health Director	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Steven Hamp
Mailing Address 1520 Harding Rd.

City State Zip Code
Ann Arbor MI 48104-4538

FEC ID number of contributing federal political committee.

C

Name of Employer
Henry Ford MuseumOccupation
President

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 9 / 2 0 0 6

Transaction ID: 100032302

Amount of Each Receipt this Period

500.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Armen Hampar
Mailing Address 12 Toluca Estates Drive

City State Zip Code
Toluca Lake CA 91602

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 1 3 / 2 0 0 6

Transaction ID: 100032296

Amount of Each Receipt this Period

1000.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Jerry Harkey
Mailing Address 1807 E. Mohawk Ct.

City State Zip Code
Bloomfield Hills MI 48302-2257

FEC ID number of contributing federal political committee.

C

Name of Employer
Daimler ChryslerOccupation
Mechanical Engineer

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 2 1 / 2 0 0 6

Transaction ID: 61009.C32536

Amount of Each Receipt this Period

500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Gust Headbloom		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 1470 North Livernois		Transaction ID: 61009.C32510
City Rochester Hills	State MI	Zip Code 48306-4158
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 700.00	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Patrick Heaney		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 1824 Beryl Place		Transaction ID: 61009.C32572
City Newport Beach	State CA	Zip Code 92660
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Apollo Wood Recovery Inc. Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Election Cycle-to-Date ▼ 1000.00	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Leonard Herman		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address 6300 Drakeshire Ln.		Transaction ID: 100032367
City West Bloomfield	State MI	Zip Code 48322-2050
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self Employed Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Election Cycle-to-Date ▼ 550.00	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 184

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Curtis Hertel		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	3		2	0	0	6													
Mailing Address 1464 Blairmoor Court		Transaction ID: 100032281																				
City State Zip Code Grosse Pointe MI 48236		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																						
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer Detroit Port Authority	Occupation Executive Director																					
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">1250.00</td> </tr> </table>	1250.00																				
1250.00																						

B. Full Name (Last, First, Middle Initial) Dennis Hertel		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	2		2	0	0	6													
Mailing Address 9721 Locust Hill Dr.		Transaction ID: 60802.C32208																				
City State Zip Code Great Falls VA 22066		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																						
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer The Livingston Group		Occupation Attorney																				
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																				
2000.00																						

C. Full Name (Last, First, Middle Initial) Dennis Hertel		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	3		2	0	0	6													
Mailing Address 9721 Locust Hill Dr.		Transaction ID: 100032280																				
City State Zip Code Great Falls VA 22066		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																						
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer The Livingston Group		Occupation Attorney																				
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																				
2500.00																						

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Gary Hoitsma
Mailing Address 301 G Street SW, #713

City State Zip Code
Washington DC 20024

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Carmen Group

Occupation
Executive

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: 60804.C32230

Amount of Each Receipt this Period

250.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Blanche Howard
Mailing Address 1031 Oakridge Ave.

City State Zip Code
Royal Oak MI 48067-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 9 / 2 0 0 6

Transaction ID: 100032368

Amount of Each Receipt this Period

100.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Hassan Jaber
Mailing Address 335 Elmwood

City State Zip Code
Dearborn MI 48124

FEC ID number of contributing
federal political committee.

C

Name of Employer
Access

Occupation
COO

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 6

Transaction ID: 100032282

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

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

James Jacob

Mailing Address 26800 Irving

City State Zip Code
 Franklin MI 48025

FEC ID number of contributing federal political committee.

C

Name of Employer
AJAX PavingOccupation
President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 2 9 / 2 0 0 6

Transaction ID: 60731.C32176

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Joseph Jacobson

Mailing Address 885 Charrington

City State Zip Code
 Bloomfield Hills MI 48301-2108

FEC ID number of contributing federal political committee.

C

Name of Employer
Self EmployedOccupation
Real Estate Broker

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 100032340

Amount of Each Receipt this Period

500.00

Receipt

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

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

Charlene Drew Jarvis

Mailing Address 1789 Sycamore Street, N.W.

City State Zip Code
 Washington DC 20012

FEC ID number of contributing federal political committee.

C

Name of Employer
Southeastern UniversityOccupation
President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 60802.C32194

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Ernest Jarvis Mailing Address 1471 Roxanna Road, NW City Washington State DC Zip Code 20012-1225 FEC ID number of contributing federal political committee. C Name of Employer CB Richard Ellis Occupation Managing Director Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00			Date of Receipt MM / DD / YYYY 08 / 02 / 2006 Transaction ID: 60804.C32231 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Conway Jeffress Mailing Address 22760 Meadowbrook Rd. City Novi State MI Zip Code 48375-4367 FEC ID number of contributing federal political committee. C Name of Employer Schoolcraft College Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 450.00			Date of Receipt MM / DD / YYYY 07 / 27 / 2006 Transaction ID: 60802.C32185 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Conway Jeffress Mailing Address 22760 Meadowbrook Rd. City Novi State MI Zip Code 48375-4367 FEC ID number of contributing federal political committee. C Name of Employer Schoolcraft College Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 575.00			Date of Receipt MM / DD / YYYY 09 / 22 / 2006 Transaction ID: 61009.C32479 Amount of Each Receipt this Period 125.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)**825.00****TOTAL** This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Patsy Johnson
Mailing Address 3282 Angelus Drive

City State Zip Code
Waterford MI 48329-2512

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 6

Transaction ID: 100032369

Amount of Each Receipt this Period

275.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Thomas Jordan
Mailing Address 4139 Blue Bonnet Blvd.

City State Zip Code
Houston TX 77025-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bosworth Papers, Inc.

Occupation

Wholesale Distribution

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 3 / 2 0 0 6

Transaction ID: 61009.C32455

Amount of Each Receipt this Period

100.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Jerrold Jung
Mailing Address 4669 Ravine Drive

City State Zip Code
Bloomfield Hills MI 48301-3640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Michigan CAT

Occupation

President

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID: 100032283

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Roger Kaltz		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address 1218 Pembury Lane		Transaction ID: 100032370	
City Bloomfield Hills	State MI	Zip Code 48302-0937	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Matvest, Inc.	Occupation Executive		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

B. Full Name (Last, First, Middle Initial) Lisa Kalustian		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 6	
Mailing Address 15040 Plummer St., #109		Transaction ID: 100032328	
City North Hills	State CA	Zip Code 91343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer State of California	Occupation Public Affairs		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

C. Full Name (Last, First, Middle Initial) Donald Karcher		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 1 / 2 0 0 6	
Mailing Address 30435 Oakview Way		Transaction ID: 60802.C32186	
City Bingham Farms	State MI	Zip Code 48025-4631	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Karcher Agency	Occupation Insurance Agent		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00		
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

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

George Kay

Mailing Address P.O. Box 1300

City State Zip Code
 Sunset Beach CA 90742-1300

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 1 3 / 2 0 0 6

Transaction ID: 100032329

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Joyce Keller

Mailing Address Mr. Michael Walch
3567 Lakewood

City State Zip Code
 Waterford MI 48329

FEC ID number of contributing federal political committee.

C

Name of Employer JARC

Occupation

Executive Director

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 2 2 / 2 0 0 6

Transaction ID: 100032390

Amount of Each Receipt this Period

150.00

Receipt

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

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

Wally Kelly

Mailing Address 4340 N. 57th Place

City State Zip Code
 Phoenix AZ 85018-3224

FEC ID number of contributing federal political committee.

C

Name of Employer CBS Outdoor

Occupation

Executive

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32585

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 30 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Richard Keteyian
Mailing Address 24984 Field, #12

City State Zip Code
Flat Rock MI 48134-1349

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 6

Transaction ID: 100032371

Amount of Each Receipt this Period

100.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Corinne Khederian
Mailing Address 441 N. Glenhurst Dr.

City State Zip Code
Bloomfield Village MI 48301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 6

Transaction ID: 100032305

Amount of Each Receipt this Period

500.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Peter Kizer
Mailing Address 1902 Pine Ridge Court

City State Zip Code
Bloomfield Hills MI 48302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 0 6

Transaction ID: 100032372

Amount of Each Receipt this Period

125.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

725.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Ken Klein		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 10315 Folk Street		Transaction ID: 100032306
City Silver Spring	State MD	Zip Code 20902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer OAAA	Occupation Exec VP, Govt Affiars	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Ken Klein		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 10315 Folk Street		Transaction ID: 61009.C32586
City Silver Spring	State MD	Zip Code 20902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer OAAA	Occupation Exec VP, Govt Affiars	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Raffi Krikorian		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 16501 Ventura Blvd, #448		Transaction ID: 61009.C32573
City Encino	State CA	Zip Code 91436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Krikorian Investment Services	Occupation Real Estate Investment	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Ralph Kummier

Mailing Address 4726 Surfwood Drive

City State Zip Code
Commerce Township MI 48382-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wayne State University

Occupation
Dean of Engineering

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 6

Transaction ID: 61009.C32483

Amount of Each Receipt this Period

75.00

Receipt

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

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

Mailing Address 29635 Nova Woods Drive

City State Zip Code
Farmington Hills MI 48331-1975

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 9 / 2 0 0 6

Transaction ID: 100032373

Amount of Each Receipt this Period

50.00

Receipt

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

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

Mailing Address 3901 N 44th Street

City State Zip Code
Mc Lean VA 22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Clydes Restaurant Group

Occupation
Corporate Administrative Assis

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2000.00

Date of Receipt

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

Transaction ID: 60802.C32195

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1125.00

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
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Yale Levin		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 32276 Olde Franklin Drive		Transaction ID: 100032267
City Farmington Hills	State MI	Zip Code 48334
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Soave Enterprises	Occupation Executive Vice President	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4100.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Yale Levin		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 32276 Olde Franklin Drive		Transaction ID: 100032268
City Farmington Hills	State MI	Zip Code 48334
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Soave Enterprises	Occupation Executive Vice President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Edward Levy		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 9 / 2 0 0 6
Mailing Address 711 S. Bates Street		Transaction ID: 60731.C32175
City Birmingham	State MI	Zip Code 48009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Edward C. Levy Company	Occupation Executive/Transportation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3200.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Richard H. Levy		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 1321 1/2 Wisconsin Avenue		Transaction ID: 100032330
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Levy Group Limited	Occupation Owner	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Arthur Liebler		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 6
Mailing Address 1099 Orchard Ridge		Transaction ID: 100032284
City Bloomfield Hills	State MI	Zip Code 48304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Robert Liggett		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 8 / 2 0 0 6
Mailing Address 625 Lake Shore Road		Transaction ID: 60728.C32173
City Grosse Pointe Shor	State MI	Zip Code 48236
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Liggett Broadcast Group	Occupation Chairman	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1900.00	

SUBTOTAL of Receipts This Page (optional)

1650.00

TOTAL This Period (last page this line number only)

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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Robert Liggett
Mailing Address 625 Lake Shore Road

City State Zip Code
Grosse Pointe Shor MI 48236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Liggett Broadcast Group

Occupation
Chairman

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 6

Transaction ID: 60731.C32174

Amount of Each Receipt this Period

600.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Bob Livingston
Mailing Address 7703 Northdown Road

City State Zip Code
Alexandria VA 22308

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Livingston Group

Occupation
Partner

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: 60804.C32227

Amount of Each Receipt this Period

500.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Brian Lopina
Mailing Address 3305 Bywater Ct.

City State Zip Code
Oak Hill VA 20171-3938

FEC ID number of contributing
federal political committee.

C

Name of Employer
Patton Boggs, LLP

Occupation
Chief Counsel

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32568

Amount of Each Receipt this Period

500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

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

Bruce MacDonald

Mailing Address 948 Fairfax

City State Zip Code
 Birmingham MI 48009-1237

FEC ID number of contributing
federal political committee.

C

Name of Employer
MacDonald Communications

Occupation
Owner

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 525.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 9 / 2 0 0 6

Transaction ID: 100032374

Amount of Each Receipt this Period

275.00

Receipt

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

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

Asad Malik

Mailing Address 1130 Square Lake Road

City State Zip Code
 Bloomfield Hills MI 48304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 350.00

Date of Receipt

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

Transaction ID: 100032307

Amount of Each Receipt this Period

100.00

Receipt

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

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

Benjamin Miller

Mailing Address 1054 31st Street NW, #410

City State Zip Code
 Washington DC 20007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Western Development

Occupation
Executive

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

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

Transaction ID: 60804.C32234

Amount of Each Receipt this Period

500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

875.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Charles Miller		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 6
Mailing Address 1223 Honan Drive		Transaction ID: 100032285
City South Bend	State IN	Zip Code 46614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Herbert Miller		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address 3249 N Street, NW		Transaction ID: 60802.C32192
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Western Development	Occupation Chairman & President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Barton Mitchell		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address P.O. Box 1247		Transaction ID: 61009.C32516
City Brooklandville	State MD	Zip Code 21022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer E. Stewart Mitchell Inc.	Occupation Chairman	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Luis Mola		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address 2509 Castilla Isle		Transaction ID: 100032435
City Fort Lauderdale	State FL	Zip Code 33301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Monument Strategies	Occupation Executive	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

B. Full Name (Last, First, Middle Initial) A. Sandy Munro		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 1749 Northwood Drive		Transaction ID: 100032376
City Troy	State MI	Zip Code 48084-5524
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Munro & Associates	Occupation President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2200.00	

C. Full Name (Last, First, Middle Initial) A. Sandy Munro		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address 1749 Northwood Drive		Transaction ID: 61009.C32552
City Troy	State MI	Zip Code 48084-5524
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Munro & Associates	Occupation President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Richard Mushegian
Mailing Address 14281 Whittram Ave.

City State Zip Code
Fontana CA 92335

FEC ID number of contributing federal political committee.

C

Name of Employer
Self EmployedOccupation
property investor

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1760.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32441

Amount of Each Receipt this Period

1760.00

In-Kind

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

hosted fundraiser

B. Full Name (Last, First, Middle Initial)
Nancy Negohosian
Mailing Address 6730 Whiting

City State Zip Code
Troy MI 48098

FEC ID number of contributing federal political committee.

C

Name of Employer
HMS ProductsOccupation
Owner

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 6

Transaction ID: 100032412

Amount of Each Receipt this Period

100.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Ann Newman
Mailing Address 1762 St. Johns Court

City State Zip Code
Bloomfield Hills MI 48302

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61009.C32554

Amount of Each Receipt this Period

250.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

2110.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

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

Dave Nona

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
N & Y Properties Develop-
ment

Occupation
Partner

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 0 6

Transaction ID: 61009.C32503

Amount of Each Receipt this Period

500.00

Receipt

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

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

Lori Nusbaum

Mailing Address 26580 Scenic Drive

City

State

Zip Code

Franklin

MI

48025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 6

Transaction ID: 61009.C32555

Amount of Each Receipt this Period

500.00

Receipt

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

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

Ken ORear

Mailing Address 22589 Brook Forest

City

State

Zip Code

Novi

MI

48375-4423

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 2 / 2 0 0 6

Transaction ID: 61009.C32484

Amount of Each Receipt this Period

125.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 41 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Valerie Osborne
Mailing Address 12505 Ridgeway Drive

City State Zip Code
Herndon VA 20170-2571

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Group

Occupation
Partner

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 6

Transaction ID: 100032333

Amount of Each Receipt this Period

250.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Richard Pearson
Mailing Address 20216 Woodbend Drive

City State Zip Code
Northville MI 48167-3004

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Center Man. Scie-
nces

Occupation
President

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4050.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61009.C32557

Amount of Each Receipt this Period

75.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Patrick Petty
Mailing Address 10301 Chapel road

City State Zip Code
Potomac MD 20854

FEC ID number of contributing
federal political committee.

C

Name of Employer
Williams & Jensen PLLC

Occupation
Principal

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32591

Amount of Each Receipt this Period

250.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

575.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 42 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
James Pruitt
Mailing Address 10101 Mill Wheel Lane

City State Zip Code
Vienna VA 22182

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Livingston Group

Occupation
Executive

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

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

Transaction ID: 60804.C32224

Amount of Each Receipt this Period

500.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Zohra Rao
Mailing Address 43488 Castlewood

City State Zip Code
Novi MI 48375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: 100032309

Amount of Each Receipt this Period

500.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Rusty Rathburn
Mailing Address 3471 Sandhill Lane

City State Zip Code
Portage MI 49024-5515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rathco Safety

Occupation
Owner

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 0 6

Transaction ID: 60804.C32237

Amount of Each Receipt this Period

250.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 43 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Karl Reinlein		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address 7 Doubletree Lane		Transaction ID: 61009.C32558	
City Des Peres	State MO	Amount of Each Receipt this Period 500.00	
Zip Code 63131		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Maurcine Reuss		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address 691 South Hills Road		Transaction ID: 100032377	
City Bloomfield Hills	State MI	Amount of Each Receipt this Period 500.00	
Zip Code 48302		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00		

C. Full Name (Last, First, Middle Initial) James Ridgway		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 6	
Mailing Address 1231 Buckingham Road		Transaction ID: 100032286	
City Grosse Pointe	State MI	Amount of Each Receipt this Period 250.00	
Zip Code 48230		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer SOS Services	Occupation Engineer		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 44 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Mary Ringstad
Mailing Address 24441 South Cromwell

City State Zip Code
Franklin MI 48025-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 9 / 2 0 0 6

Transaction ID: 100032379

Amount of Each Receipt this Period

50.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Richard Ronzi
Mailing Address 1141 Norminster End

City State Zip Code
Bloomfield Hills MI 48302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 2 / 2 0 0 6

Transaction ID: 61009.C32462

Amount of Each Receipt this Period

200.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Mark Saffer
Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 6

Transaction ID: 100032287

Amount of Each Receipt this Period

500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 45 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

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

Daniel Sahakian

Mailing Address P.O. Box 649

City State Zip Code
 State College PA 16804-0649

FEC ID number of contributing
federal political committee.

C

Name of Employer
HFL Corp.

Occupation
President

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 450.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 1 / 2 0 0 6

Transaction ID: 61009.C32485

Amount of Each Receipt this Period

250.00

Receipt

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

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

Don Schiemann

Mailing Address 110 Baldwin Road

City State Zip Code
 Birmingham MI 48009-1356

FEC ID number of contributing
federal political committee.

C

Name of Employer
TK Holdings Inc.

Occupation
Attorney

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60804.C32246

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Kathleen Schwartz

Mailing Address 582 Henrietta Street

City State Zip Code
 Birmingham MI 48009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 6 / 2 0 0 6

Transaction ID: 100032417

Amount of Each Receipt this Period

500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 46 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Thomas Sellers

Mailing Address 7315 Greenwich Dr.

City State Zip Code
 Bloomfield Hills MI 48301-3919

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dean Sellers

Occupation
Auto Dealer

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 9 / 2 0 0 6

Transaction ID: 100032342

Amount of Each Receipt this Period

200.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Manesh Shah

Mailing Address 4819 W. Wickford

City State Zip Code
 Bloomfield Twp. MI 48302

FEC ID number of contributing
federal political committee.

C

Name of Employer
General Chemical

Occupation
CEO

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 5 / 2 0 0 6

Transaction ID: 100032396

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Kamal Shouhayib

Mailing Address 4909 Beach Road

City State Zip Code
 Troy MI 48098

FEC ID number of contributing
federal political committee.

C

Name of Employer
Choice Group

Occupation
Realtor/Owner

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 950.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 6

Transaction ID: 100032288

Amount of Each Receipt this Period

200.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 47 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Arthur Silverman

Mailing Address c/o The Dutko Group
412 First Street, SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Dutko Group

Occupation
Partner & General Counsel

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C32520

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. E. Del Smith

Mailing Address 4712 N. 32nd. Street

City State Zip Code
Arlington VA 22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
E. Del Smith & Co. Inc.

Occupation
Owner

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32593

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Sheldon Smith

Mailing Address 1505 Crystal Drive, #305

City State Zip Code
Arlington VA 22202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sheldon Smith Inc.

Occupation
actor

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 0 6

Transaction ID: 100032292

Amount of Each Receipt this Period

500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 48 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Anthony Soave

Mailing Address 423 Lakeshore Drive

City State Zip Code
 Grosse Pointe MI 48236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Soave Enterprises

Occupation
President & CEO

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 4200.00

Date of Receipt

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

Transaction ID: 100032269

Amount of Each Receipt this Period

1700.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Gerard Staeger

Mailing Address 2573 Covington Place

City State Zip Code
 Bloomfield Hills MI 48301-2662

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fenner, Melstrom & Dooung

Occupation
CPA

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 225.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32521

Amount of Each Receipt this Period

75.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Jarvis Stewart

Mailing Address 1333 H Street NW

City State Zip Code
 Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stewart Partners LLC

Occupation
Managing Partner

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

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

Transaction ID: 60802.C32196

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

2775.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 49 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Marjorie Stoller
Mailing Address 3075 Woodcreek Way, N.

City State Zip Code
Bloomfield Hills MI 48304-1864

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 0 6

Transaction ID: 61009.C32486

Amount of Each Receipt this Period

250.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Shahid Tahir
Mailing Address 5201 Park Ridge Drive

City State Zip Code
West Bloomfield MI 48323

FEC ID number of contributing
federal political committee.

C

Name of Employer
At Home Network Care

Occupation
Physical Therapist

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: 100032300

Amount of Each Receipt this Period

500.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Ely Tama
Mailing Address 30038 Mayfair Rd.

City State Zip Code
Farmington MI 48331-2154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tama, Budaj & Raab, P.C.

Occupation
CPA

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 9 / 2 0 0 6

Transaction ID: 100032345

Amount of Each Receipt this Period

250.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 50 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Muhammad S. Tariq
Mailing Address 6701 Stonebridge Court

City State Zip Code
West Bloomfield MI 48322

FEC ID number of contributing
federal political committee.

C

Name of Employer
At Home Network Care

Occupation
Physical Therapist

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 100032310

Amount of Each Receipt this Period

500.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Frances Thomas
Mailing Address 29139 Summerwood Court

City State Zip Code
Farmington Hills MI 48334

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 9 / 2 0 0 6

Transaction ID: 100032383

Amount of Each Receipt this Period

200.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Rashida Tlaib
Mailing Address 10465 Tireman Avenue

City State Zip Code
Dearborn MI 48126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Access

Occupation
Advocacy Coordinator

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 6

Transaction ID: 100032289

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Duke Tortt		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 158 Lake Park Drive		Transaction ID: 60802.C32203
City Birmingham	State MI	Zip Code 48009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation Student	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Kathleen Trott		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 158 Lake Park Drive		Transaction ID: 60802.C32201
City Birmingham	State MI	Zip Code 48009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1800.00
Name of Employer	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

C. Full Name (Last, First, Middle Initial) Kathleen Trott		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 158 Lake Park Drive		Transaction ID: 60802.C32202
City Birmingham	State MI	Zip Code 48009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

SUBTOTAL of Receipts This Page (optional)

4200.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

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

Savey Tufenkian

Mailing Address 1465 Sunshine Drive

City State Zip Code
 Glendale CA 91208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 3 / 2 0 0 6

Transaction ID: 100032297

Amount of Each Receipt this Period

500.00

Receipt

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

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

Patricia Turpanjian

Mailing Address 580 Silver Spur

City State Zip Code
 Rancho Palos Verde CA 90275

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Business Owner

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 3 / 2 0 0 6

Transaction ID: 100032334

Amount of Each Receipt this Period

2100.00

Receipt

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

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

Claudia Barker Valente

Mailing Address 7055 Leestone Street

City State Zip Code
 Springfield VA 22151

FEC ID number of contributing
federal political committee.

C

Name of Employer
Valente Lake Lopatin & Sc-
hultz

Occupation

Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60804.C32225

Amount of Each Receipt this Period

500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Claudia Barker Valente

Mailing Address 7055 Leestone Street

City State Zip Code
 Springfield VA 22151

FEC ID number of contributing
federal political committee.

C

Name of Employer
Valente Lake Lopatin & Sc-
hultz

Occupation
Attorney

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61009.C32491

Amount of Each Receipt this Period

500.00

Receipt

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

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

Mailing Address 1769 Woodgrove

City State Zip Code
 Bloomfield MI 48302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Page Toyota

Occupation
Auto Dealer

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 1 / 2 0 0 6

Transaction ID: 100032348

Amount of Each Receipt this Period

500.00

Receipt

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

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

Mailing Address 26625 Captains Lane

City State Zip Code
 Franklin MI 48025-1055

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 100032385

Amount of Each Receipt this Period

200.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 54 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

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

Mark Year

Mailing Address 525 Atlantic

City State Zip Code
 Milford MI 48381

FEC ID number of contributing federal political committee.

C

Name of Employer
Marine Insurance ServicesOccupation
Insurance Broker

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 100032419

Amount of Each Receipt this Period

250.00

Receipt

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

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

Donald C. Jr. Young

Mailing Address 43775 West Nine Mile Road

City State Zip Code
 Northville MI 48167-9781

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 1 9 / 2 0 0 6

Transaction ID: 100032387

Amount of Each Receipt this Period

75.00

Receipt

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

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

Thane Young

Mailing Address 1954 Baltimore Annapolis Blvd.

City State Zip Code
 Annapolis MD 21409

FEC ID number of contributing federal political committee.

C

Name of Employer
Van Scoyoc Associates, In-
c.Occupation
Vice President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60804.C32228

Amount of Each Receipt this Period

500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

825.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) William Zelif		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address 6 Thorn Mountain Road Box 487		Transaction ID: 60802.C32207
City Jackson	State NH	Zip Code 03846
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Livingston Group	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Russell Zielesch		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 37852 Thames Drive		Transaction ID: 100032388
City Farmington Hills	State MI	Zip Code 48331-1721
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Russell Zielesch		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 37852 Thames Drive		Transaction ID: 61009.C32543
City Farmington Hills	State MI	Zip Code 48331-1721
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1300.00

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)

Knollenberg for Congress Committee

A.

Full Name (Last, First, Middle Initial)

Antranik Zorayan

Mailing Address 1831 W. Lincoln Ave.

City

Anaheim

State

CA

Zip Code

92801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Real Estate Developer

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 6

Transaction ID: 100032335

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

93209.00

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)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Doyce Boesch		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address Brown Rudnick Federal PAC 1201 Pennsylvania Ave NW, #325		Transaction ID: 61009.C32580
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Dr. Sarkis J. Kechejian		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address Armenian American PAC 421 E. Airport Freeway, #201		Transaction ID: 61009.C32564
City Irving State TX Zip Code 75062	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation Treasurer	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

C. Full Name (Last, First, Middle Initial) Gary Miller		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address Gary Miller for Congress 721 S. Brea Canyon Road, #7		Transaction ID: 61009.C32515
City Diamond Bar State CA Zip Code 91789	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Gov. Mitt Romney		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6	
Mailing Address Commonwealth PAC 45 School Street, Fl. 2		Transaction ID: 60802.C32199	
City Boston	State MA	Amount of Each Receipt this Period 2500.00	
Zip Code 02108-3206		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C		Election Cycle-to-Date ▼ 2500.00	
Name of Employer		Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2500.00	

B. Full Name (Last, First, Middle Initial) Gov. Mitt Romney		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 4 / 2 0 0 6	
Mailing Address Commonwealth PAC 45 School Street, Fl. 2		Transaction ID: 100032264	
City Boston	State MA	Amount of Each Receipt this Period 2500.00	
Zip Code 02108-3206		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C		Election Cycle-to-Date ▼ 5000.00	
Name of Employer		Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Heidi Biggs Brock		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6	
Mailing Address Weyerhaeuser PAC P.O. Box 9777 - CH1M31		Transaction ID: 60802.C32214	
City Federal Way	State WA	Amount of Each Receipt this Period 2000.00	
Zip Code 98063		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C C00007948		Election Cycle-to-Date ▼ 4000.00	
Name of Employer		Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Hon. Dave Camp		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address CAMPAC 5915 Eastman Ave., #100		Transaction ID: 61009.C32567
City Midland State MI Zip Code 48640	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Jamie Gregory		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address Realtors PAC 430 N. Michigan Avenue		Transaction ID: 61009.C32527
City Chicago State IL Zip Code 60611	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

C. Full Name (Last, First, Middle Initial) Lee Culpepper		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address Wal-Mart Stores, Inc. PAC 702 SW 8th Street		Transaction ID: 100032272
City Bentonville State AR Zip Code 72716-0150	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 7000.00	

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)
or each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Lee Culpepper		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6	
Mailing Address Wal-Mart Stores, Inc. PAC 702 SW 8th Street		Transaction ID: 61009.C32577	
City Bentonville	State AR	Zip Code 72716-0150	Amount of Each Receipt this Period 3000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00		
B. Full Name (Last, First, Middle Initial) Lindsay MacMeans		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6	
Mailing Address National Restaurant Association PA 1200 Seventeenth Street NW		Transaction ID: 60804.C32248	
City Washington	State DC	Zip Code 20036	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation Manager, Political Affairs		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		
C. Full Name (Last, First, Middle Initial) Misty Redman		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6	
Mailing Address Sears Holdings Corp. PAC 3333 Beverly Rd, B6-326B		Transaction ID: 61009.C32575	
City Hoffman Estates	State IL	Zip Code 60179	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00038612		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation Treasurer		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

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)
or each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. A. Peter Kezirian, Jr. Mailing Address Cooperative of Amer Physicians Mutual Protection Trust CAP-MPT P City Los Angeles State CA Zip Code 90071 FEC ID number of contributing federal political committee. C C00161604 Name of Employer _____ Occupation _____ Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right; border: 1px solid black; padding: 2px;">1500.00</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y 0 9 / 1 3 / 2 0 0 6</div> Transaction ID: 100032325 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1500.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mr. Ben Jarratt Mailing Address National Franchisee Association PA 1201 Roberts Blvd., #100 City Kennesaw State GA Zip Code 30144 FEC ID number of contributing federal political committee. C _____ Name of Employer _____ Occupation Chairman, Govt Relations Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right; border: 1px solid black; padding: 2px;">1000.00</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6</div> Transaction ID: 61009.C32553 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mr. Bill Lane Mailing Address Caterpillar Employees PAC 100 NE Adams Street City Peoria State IL Zip Code 61629-1430 FEC ID number of contributing federal political committee. C _____ Name of Employer _____ Occupation _____ Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right; border: 1px solid black; padding: 2px;">2000.00</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 6</div> Transaction ID: 100032426 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">2000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Bill Thore		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 5 / 2 0 0 6
Mailing Address American Medical PAC 1101 Vermont Avenue, NW		Transaction ID: 60802.C32182
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) Mr. Brendan Kelsay		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address Clear Channel Communications PAC 200 E. Basse Road		Transaction ID: 61009.C32581
City San Antonio State TX Zip Code 78209-8328	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Mr. Brian Cooney		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Manufactured Housing Institute PAC 2101 Wilson Blvd. #610		Transaction ID: 60802.C32212
City Arlington State VA Zip Code 22201-3062	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation Vice President Govt Affairs	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Bruce Charendoff		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6	
Mailing Address Sabre Inc. PAC 1101 17th Street NW, #602		Transaction ID: 61009.C32594	
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00325811		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		
B. Full Name (Last, First, Middle Initial) Mr. Christopher Heinz		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6	
Mailing Address Carpenters Legislative Imp. Com. 101 Constitution Ave. NW, 10th Flr		Transaction ID: 61009.C32524	
City Washington State DC Zip Code 20001	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		
C. Full Name (Last, First, Middle Initial) Mr. Christopher Pearce		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 6	
Mailing Address S.C. Johnson & Son, Inc. PAC 1133 Connecticut Ave. NW, #650		Transaction ID: 100032439	
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation Chairman		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Christopher Seeger

Mailing Address United Services Automobile Assoc.
1455 F Street, NW, #420

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00164145

Name of Employer

Occupation

Vice-President

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 8 / 2 0 0 6

Transaction ID: 100032420

Amount of Each Receipt this Period

1000.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)

Mr. Dan Brouillette

Mailing Address Ford Motor Co. Civic Action Fund
1350 I Street NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00046474

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

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

Transaction ID: 60802.C32184

Amount of Each Receipt this Period

2500.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)

Mr. Dan Jaffe

Mailing Address Professionals in Advertising PAC
1203 19th Street NW, 4th Flr.

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32592

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Don Foreman		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6	
Mailing Address RJ Reynolds PAC 1201 F Street, #1000		Transaction ID: 100032438	
City Washington	State DC	Zip Code 20004	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00042002		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00		
B. Full Name (Last, First, Middle Initial) Mr. Doug Ritter		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address General Dynamics PAC 2941 Fairview Park Dr., #100		Transaction ID: 100032315	
City Falls Church	State VA	Zip Code 22042-4513	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00078451		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation V.P. Govt Relations		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00		
C. Full Name (Last, First, Middle Initial) Mr. Doug Ritter		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address General Dynamics PAC 2941 Fairview Park Dr., #100		Transaction ID: 61009.C32494	
City Falls Church	State VA	Zip Code 22042-4513	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00078451		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation V.P. Govt Relations		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 11000.00		

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Harold Devis		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Delta PAC P.O. Box 20706		Transaction ID: 60802.C32197
City Atlanta	State GA	Zip Code 30320-6001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Receipt

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

B. Full Name (Last, First, Middle Initial) Mr. Hector Alcalde		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address International Council of Cruise Lines PAC		Transaction ID: 60731.C32178
City Arlington	State VA	Zip Code 22201-3001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Receipt

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

C. Full Name (Last, First, Middle Initial) Mr. Hrant Jamgochian		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address American Pharmacists Assoc PAC 1100 15th Street NW, #400		Transaction ID: 100032263
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Receipt

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

SUBTOTAL of Receipts This Page (optional)

3000.00

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Mr. James A. Rosen

Mailing Address Penske Truck Leasing PAC
Rt. 10 Green Hills/P.O. Box 563

City State Zip Code
Reading PA 19603-0563

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Treasurer

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32574

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Mr. James McIntire

Mailing Address KELLYPAC
999 W. Big Beaver

City State Zip Code
Troy MI 48084

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Treasurer

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32512

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Mr. Jim Johnson

Mailing Address MINN-DAK Farmers Co-Op PAC
7525 Red River Rd.

City State Zip Code
Wahpeton ND 58075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Treasurer

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 8 / 2 0 0 6

Transaction ID: 100032434

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

4000.00

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

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Jimmy Williams		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address Wine & Spirits Wholesalers of America PAC		Transaction ID: 100032422
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Receipt

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

B. Full Name (Last, First, Middle Initial) Mr. Joe Boessen		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address PMA Group PAC 1755 Jefferson Davis Hwy, #1107		Transaction ID: 100032437
City Arlington	State VA	Zip Code 22202-3509
FEC ID number of contributing federal political committee. C C00280321		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Receipt

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

C. Full Name (Last, First, Middle Initial) Mr. Joel Rubin		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address Conkling, Fiskum & McCornick PAC 1100 SW 6th Avenue, #1425		Transaction ID: 100032427
City Portland	State OR	Zip Code 97204
FEC ID number of contributing federal political committee. C C00396218		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Receipt

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

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. John D Lacopo		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	2		2	0	0	6													
Mailing Address EDS PAC 1331 Pennsylvania Ave, NW,		Transaction ID: 60802.C32223																				
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>		1000.00																			
1000.00																						
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer	Occupation																					
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>		1000.00																			
1000.00																						

B. Full Name (Last, First, Middle Initial) Mr. John Gage		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	3		2	0	0	6													
Mailing Address American Federation Govt. Emps. PA 80 F Street NW		Transaction ID: 100032323																				
City Washington State DC Zip Code 20001	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>		1000.00																			
1000.00																						
FEC ID number of contributing federal political committee. C C00009936		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer	Occupation President																					
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">4000.00</td> </tr> </table>		4000.00																			
4000.00																						

C. Full Name (Last, First, Middle Initial) Mr. Keith Istre		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	9		2	0	0	6													
Mailing Address LamarPAC P.O. Box 66338		Transaction ID: 61009.C32587																				
City Baton Rouge State LA Zip Code 70896	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>		1000.00																			
1000.00																						
FEC ID number of contributing federal political committee. C C00174599		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Name of Employer	Occupation																					
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>		1000.00																			
1000.00																						

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Kevin McMahon		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address TRW Auto Acquisition Good Govt Fu 1100 Wilson Blvd., #1225		Transaction ID: 61009.C32595
City Arlington State VA Zip Code 22209	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Director of Gov. Relations	Election Cycle-to-Date ▼ 2000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Mr. Kevin McMahon		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address Nelson Mullins Riley & Scarborough 101 Constitution Ave. NW, #900		Transaction ID: 61009.C32589
City Washington State DC Zip Code 20001	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 5000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Mr. Larry Cohen		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address CWA COPE PAC of Communications Workers of America		Transaction ID: 60804.C32229
City Washington State DC Zip Code 20001	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 500.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 184

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Mark Cook Mailing Address Blue Cross & Blue Shield of MI PAC 602 West Ionia St. - B102 City Lansing State MI Zip Code 48933 FEC ID number of contributing federal political committee. C Name of Employer _____ Occupation V.P. Government Affairs Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 Transaction ID: 60804.C32241 Amount of Each Receipt this Period 2000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mr. Mark Cook Mailing Address Blue Cross & Blue Shield of MI PAC 602 West Ionia St. - B102 City Lansing State MI Zip Code 48933 FEC ID number of contributing federal political committee. C Name of Employer _____ Occupation V.P. Government Affairs Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5500.00	Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 Transaction ID: 60804.C32242 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mr. Michael Kerley Mailing Address National Association of Insurance & Financial Advisors PAC City Falls Church State VA Zip Code 22042 FEC ID number of contributing federal political committee. C Name of Employer _____ Occupation Sen. Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6 Transaction ID: 60802.C32213 Amount of Each Receipt this Period 5000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Paul Mattera		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6
Mailing Address Liberty Mutual Insurance PAC 175 Berkeley Street		Transaction ID: 100032317
City Boston State MA Zip Code 02117	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Mr. Paul Swartz		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address National Rural Letter Carriers PAC 1630 Duke Street, 4th Floor		Transaction ID: 100032436
City Alexandria State VA Zip Code 22314-3465	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

C. Full Name (Last, First, Middle Initial) Mr. Peter Begans		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address Medco Health PAC 601 Pennsylvania Ave. NW, #700		Transaction ID: 61009.C32504
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Phil Thevenet		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address The GlaxoSmithKline PAC Five Moore Drive		Transaction ID: 100032327
City Research Triangle	State NC	Zip Code 27709
Amount of Each Receipt this Period 1000.00		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C C00199703		
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Mr. Philip Kaplan		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 9 / 2 0 0 6
Mailing Address BASF Corp. Employees PAC 100 Campus Drive		Transaction ID: 60731.C32177
City Florham Park	State NJ	Zip Code 07932
Amount of Each Receipt this Period 1000.00		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C C00340075		
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

C. Full Name (Last, First, Middle Initial) Mr. Philip Kaplan		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address BASF Corp. Employees PAC 100 Campus Drive		Transaction ID: 60804.C32247
City Florham Park	State NJ	Zip Code 07932
Amount of Each Receipt this Period 2000.00		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C C00340075		
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 74 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Rich Morin		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Build PAC, National Association of Home Builders		Transaction ID: 60802.C32205
City Washington State DC Zip Code 20005-2800	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00000901		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Chairman Election Cycle-to-Date ▼ 10000.00	

B. Full Name (Last, First, Middle Initial) Mr. Rod Nofziger		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Owner Operator Independent Drivers Assoc. Inc. PAC		Transaction ID: 60802.C32211
City Washington State DC Zip Code 20007	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Mr. Stephen Marlo		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Shaw Group-Stone & Webster PAC 1725 Duke Street, #400		Transaction ID: 60802.C32209
City Alexandria State VA Zip Code 22314-3470	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00104885		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Chairman Election Cycle-to-Date ▼ 5000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Stephen Marlo		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address Shaw Group-Stone & Webster PAC 1725 Duke Street, #400		Transaction ID: 61009.C32576
City Alexandria State VA Zip Code 22314-3470	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00104885	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Chairman	Election Cycle-to-Date ▼ 6000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Mr. Stephen Ruhlen		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address J.P. Morgan Chase & Co. PAC 401 9th Street NW		Transaction ID: 60804.C32250
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00128512	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Mr. Stephen Zimmerman		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Dykema Gossett Federal PAC 1300 I Street, NW, #300 West		Transaction ID: 60802.C32216
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 6500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 184

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. Steve Purser Mailing Address Natl Beer Wholesalers Assn. PAC 1100 King St., #600 City Alexandria State VA Zip Code 22314 FEC ID number of contributing federal political committee. C C00144766 Name of Employer _____ Occupation Treasurer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 7500.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 8 / 2 0 0 6 Transaction ID: 100032318 Amount of Each Receipt this Period 5000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mr. Ted Bornstein Mailing Address Foley & Lardner PAC 3000 K St. NW, #500 City Washington State DC Zip Code 20007 FEC ID number of contributing federal political committee. C C00105338 Name of Employer _____ Occupation Treasurer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 6 Transaction ID: 100032430 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mr. Tom Beddow Mailing Address 3M PAC 3 M Center City Saint Paul State MN Zip Code 55144 FEC ID number of contributing federal political committee. C Name of Employer _____ Occupation _____ Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 6 Transaction ID: 100032423 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)**7000.00****TOTAL** This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 184

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Mr. William Daoulas		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address AM General PAC 1600 Wilson Blvd., #1008		Transaction ID: 60802.C32198
City Arlington	State VA	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00282210		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation Director of Government Affairs	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) Mr. William H. Schweitzer		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address Baker & Hostetler PAC 1050 Connecticut Ave., NW, #1100		Transaction ID: 61009.C32565
City Washington	State DC	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation Treasurer	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Ms. Anita Peduzzi		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address American Chemistry Council AmeriChem PAC		Transaction ID: 61009.C32522
City Arlington	State VA	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation Treasurer	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Ms. Beth Rossman

Mailing Address Honeywell International PAC
101 Constitution Ave. NW, #500 W

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer

Occupation

Treasurer

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 6

Transaction ID: 100032432

Amount of Each Receipt this Period

5000.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Ms. Catherine Connor

Mailing Address Parsons Brinckerhoff Inc. PAC
1401 K St. NW, #701

City State Zip Code
Washington DC 20005

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

Name of Employer

Occupation

Sen. Vice President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: 60802.C32215

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Ms. Catherine McDaniel

Mailing Address Outdoor Advertising Assoc of Amer
1850 M Street NW, #1040

City State Zip Code
Washington DC 20036

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

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32590

Amount of Each Receipt this Period

5000.00

Receipt

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

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Ms. Christine Corcoran		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 6	
Mailing Address Aircraft Owners & Pilots PAC 601 Pennsylvania Ave., NW, #875-S		Transaction ID: 100032424	
City Washington State DC Zip Code 20004		Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. C C00131185		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 10000.00	
B. Full Name (Last, First, Middle Initial) Ms. Colleen Rivera		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 5 / 2 0 0 6	
Mailing Address Dealers Election Action Com of NAD 1900 West Big Beaver Road		Transaction ID: 60807.C32257	
City Troy State MI Zip Code 48084-3536		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer NADA Occupation			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5000.00	
C. Full Name (Last, First, Middle Initial) Ms. Colleen Rivera		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 1 / 2 0 0 6	
Mailing Address Dealers Election Action Com of NAD 1900 West Big Beaver Road		Transaction ID: 61009.C32493	
City Troy State MI Zip Code 48084-3536		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer NADA Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 7500.00	

SUBTOTAL of Receipts This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Ms. Cynthia Albert		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 6 Transaction ID: 100032428
Mailing Address DaimlerChrysler Political Support 1401 H. Street, NW, #700 City Washington State DC Zip Code 20005		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation PAC Administrator Election Cycle-to-Date ▼ 6000.00	
B. Full Name (Last, First, Middle Initial) Ms. Cynthia Hilton		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 6 Transaction ID: 100032433
Mailing Address Institute of Makers of Explosives 1120 19th. Street, NW, #310 City Washington State DC Zip Code 20036-3605		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00135590		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Executive Vice President Election Cycle-to-Date ▼ 3000.00	
C. Full Name (Last, First, Middle Initial) Ms. Cynthia Stinger		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 6 Transaction ID: 100032421
Mailing Address Washington Group International PAC 2345 Crystal Drive, #708 City Arlington State VA Zip Code 22202		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Chairman Election Cycle-to-Date ▼ 6000.00	

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Ms. Cynthia Stinger

Mailing Address Washington Group International PAC
2345 Crystal Drive, #708

City State Zip Code
Arlington VA 22202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Chairman

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32578

Amount of Each Receipt this Period

4000.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Ms. Danielle Morris James

Mailing Address Property Casualty Insurers Assoc.
of America PAC

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Sr. VP, Gov. Relations

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 60802.C32222

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Ms. Debbie Shannon

Mailing Address American Bankers Assoc. PAC
1120 Connecticut Ave NW, #85

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: 60802.C32221

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Heather Kennedy

Mailing Address Home Depot Better Govt PAC
101 Constitution Avenue NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Manager, Govt. Relations

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 0 6

Transaction ID: 100032303

Amount of Each Receipt this Period

1000.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)

Ms. Janet Boyd

Mailing Address Dow Chemical Employees PAC
1776 Eye Street NW, #1050

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

VP, Federal & State Govt

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60804.C32249

Amount of Each Receipt this Period

2000.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)

Ms. Janet Boyd

Mailing Address Dow Chemical Employees PAC
1776 Eye Street NW, #1050

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

VP, Federal & State Govt

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 6

Transaction ID: 100032429

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Ms. Katie W. Maness

Mailing Address Union Pacific PAC
600 Thirteenth St., NW, 3340

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Asst. Treasurer

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61009.C32490

Amount of Each Receipt this Period

2000.00

Receipt

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

B. Full Name (Last, First, Middle Initial)
Ms. Kristine Kilbride

Mailing Address Genworth Financial Inc. PAC
701 13th Street, NW, #710

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C32571

Amount of Each Receipt this Period

1000.00

Receipt

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

C. Full Name (Last, First, Middle Initial)
Ms. Linda Van Arsdale

Mailing Address NATSO PAC Representing
Americas Travel Plazas & Trucksto

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C C00097865

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32588

Amount of Each Receipt this Period

2000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

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

Ms. Lisa Canada

Mailing Address Operating Engineers Local 324 PAC
37450 Schoolcraft Road

City Livonia State MI Zip Code 48150

FEC ID number of contributing federal political committee.

C C00093989

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 100032270

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Ms. Lou Ann Counihan

Mailing Address Key Plastics PAC
21700 Haggerty Rd., #100N

City Northville State MI Zip Code 48167

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3419.98

Date of Receipt

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

Transaction ID: 60802.C32204

Amount of Each Receipt this Period

2419.98

Receipt

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

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

Ms. Mary Dreape Hanagan

Mailing Address Automotive Free Intl Trade PAC
1625 Prince Street, #225

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61009.C32563

Amount of Each Receipt this Period

2500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

5919.98

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Ms. Mary Phillips		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address American Trucking PAC 430 First Street, SE		Transaction ID: 100032322
City Washington State DC Zip Code 20003	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Senior Legislative Rep. Election Cycle-to-Date ▼ 6000.00	

B. Full Name (Last, First, Middle Initial) Ms. Mary Phillips		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address American Trucking PAC 430 First Street, SE		Transaction ID: 61009.C32489
City Washington State DC Zip Code 20003	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Senior Legislative Rep. Election Cycle-to-Date ▼ 7000.00	

C. Full Name (Last, First, Middle Initial) Ms. Patricia Murphy		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address BNSF Railway PAC 500 New Jersey Ave., NW, 5th Flr		Transaction ID: 60802.C32218
City Washington State DC Zip Code 20001	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00235739	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)

7000.00

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Ms. Renee Rappaport		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Mortgage Bankers Assoc. PAC 1919 Pennsylvania Ave., NW, 8th. F		Transaction ID: 60802.C32217
City Washington State DC Zip Code 20006-3404	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00004812	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Director of Government Affairs	Election Cycle-to-Date ▼ 5000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Ms. Sara Hope Murphy		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Wine Institute PAC 601 13th Street NW, #330 South		Transaction ID: 60802.C32220
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 2000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Sarah Knakmuhs		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Altria Group Inc. PAC 101 Constitution Ave. NW		Transaction ID: 60802.C32210
City Washington State DC Zip Code 20001	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Director of Government Affairs	Election Cycle-to-Date ▼ 2000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)

5000.00

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Ms. Sharon Spigelmyer		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address Accenture PAC 800 Connecticut Ave., NW, #600		Transaction ID: 60804.C32252
City Washington State DC Zip Code 20006	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

B. Full Name (Last, First, Middle Initial) Reagan Anderson		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Fannie Mae PAC 3900 Wisconsin Avenue NW		Transaction ID: 60802.C32219
City Washington State DC Zip Code 20016	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

C. Full Name (Last, First, Middle Initial) Reagan Anderson		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Fannie Mae PAC 3900 Wisconsin Avenue NW		Transaction ID: 60802.C32200
City Washington State DC Zip Code 20016	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

156419.98

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

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

FOR LINE NUMBER: PAGE 88 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial)
Republican National Com.

Mailing Address Member Senate Fund
8801 Lehman

City State Zip Code
Montague MI 49437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 7 / 2 0 0 6

Transaction ID: 100032271

Amount of Each Receipt this Period

100.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 184

(check only one)

<input 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 checked="" type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

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

Bloomfield Republican Womens Club

Mailing Address c/o Joyce MacLeish
650 E. big Beaver

City	State	Zip Code
Troy	MI	48083-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

23.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	6	

Transaction ID: 100032338

Amount of Each Receipt this Period

23.00

Offsets to Operating Expe-
nditu☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

23.00

TOTAL This Period (last page this line number only)

23.00

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

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

FOR LINE NUMBER: PAGE 90 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) The Private Bank		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 7 / 2 0 0 6	
Mailing Address 38505 Woodward Ave., #1300		Transaction ID: 60807.C32262	
City Bloomfield Hills	State MI	Zip Code 48304-	Amount of Each Receipt this Period 8805.14
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 35268.69		
B. Full Name (Last, First, Middle Initial) The Private Bank		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 6	
Mailing Address 38505 Woodward Ave., #1300		Transaction ID: 61009.C32596	
City Bloomfield Hills	State MI	Zip Code 48304-	Amount of Each Receipt this Period 2456.41
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 37725.10		

SUBTOTAL of Receipts This Page (optional)

11261.55

TOTAL This Period (last page this line number only)

11261.55

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

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. AAA Financial

Mailing Address P.O. Box 15287

City
WilmingtonState
DEZip Code
19886-5287Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12886

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	6

Amount of Each Disbursement this Period

787.92

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 1072 S. Latson Road

City
HowellState
MIZip Code
48843-Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12940

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	6

Amount of Each Disbursement this Period

787.92

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

C. AAMSMailing Address 75 - BRSH
1231 Durrett LaneCity
LouisvilleState
KYZip Code
40213-Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60726.E12510

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	6

Amount of Each Disbursement this Period

8.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MERCHANT FEES

SUBTOTAL of Disbursements This Page (optional)

796.87

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. AAMS

Mailing Address 75 - BRSH
1231 Durrett Lane

City Louisville State KY Zip Code 40213-

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60807.E12632

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MERCHANT FEES

Full Name (Last, First, Middle Initial)

B. AAMS

Mailing Address 75 - BRSH
1231 Durrett Lane

City Louisville State KY Zip Code 40213-

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61013.E12805

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MERCHANT FEES

Full Name (Last, First, Middle Initial)

C. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City Novi State MI Zip Code 48375-

Purpose of Disbursement
PAYROLL SERVICE: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60726.E12557

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL SERVICE: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

1537.34

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)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City State Zip Code
Novi MI 48375-

Purpose of Disbursement
TAXES & SERVICE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60726.E12560

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

207.74

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TAXES & SERVICE FEE

Full Name (Last, First, Middle Initial)

B. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City State Zip Code
Howell MI 48843-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60726.E12566

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

C. Ali Shaye

Mailing Address 6552 Colgate Avenue

City State Zip Code
Los Angeles CA 90048-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60726.E12563

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

557.69

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

0.00

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)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City State Zip Code
Novi MI 48375-

Purpose of Disbursement
PAYROLL SERVICE: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12581

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1515.43

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL SERVICE: SEE BELOW

Full Name (Last, First, Middle Initial)

B. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City State Zip Code
Novi MI 48375-

Purpose of Disbursement
TAXES & SERVICE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12582

Date of Disbursement

/ /

Amount of Each Disbursement this Period

207.74

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TAXES & SERVICE FEE

Full Name (Last, First, Middle Initial)

C. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City State Zip Code
Howell MI 48843-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12584

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1515.43

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Ali Shaye

Mailing Address 6552 Colgate Avenue

City
Los AngelesState
CAZip Code
90048-Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12583

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	8	/	2	0	0	6

Amount of Each Disbursement this Period

557.69

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

B. ADP Total ResourcesMailing Address Attn: Kristie Negro
42400 Grand River Ave.City
NoviState
MIZip Code
48375-Purpose of Disbursement
PAYROLL SERVICE: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12627

Date of Disbursement

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

Amount of Each Disbursement this Period

1515.43

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL SERVICE: SEE BELOW

Full Name (Last, First, Middle Initial)

C. ADP Total ResourcesMailing Address Attn: Kristie Negro
42400 Grand River Ave.City
NoviState
MIZip Code
48375-Purpose of Disbursement
TAXES & SERVICE FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12628

Date of Disbursement

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

Amount of Each Disbursement this Period

207.74

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: TAXES & SERVICE FEE

SUBTOTAL of Disbursements This Page (optional)

1515.43

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 PageFOR LINE NUMBER:
(check only one)

PAGE 96 / 184

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City
HowellState
MIZip Code
48843-Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12630

Date of Disbursement

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

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

B. Ali Shaye

Mailing Address 6552 Colgate Avenue

City
Los AngelesState
CAZip Code
90048-Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12629

Date of Disbursement

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

Amount of Each Disbursement this Period

557.69

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

C. ADP Total ResourcesMailing Address Attn: Kristie Negro
42400 Grand River Ave.City
NoviState
MIZip Code
48375-Purpose of Disbursement
PAYROLL SERVICE: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12696

Date of Disbursement

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

Amount of Each Disbursement this Period

1515.43

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL SERVICE: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

1515.43

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City State Zip Code
Novi MI 48375-

Purpose of Disbursement
TAXES & SERVICE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12706

Date of Disbursement

08 / 11 / 2006

Amount of Each Disbursement this Period

207.74

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TAXES & SERVICE FEE

Full Name (Last, First, Middle Initial)

B. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City State Zip Code
Howell MI 48843-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12727

Date of Disbursement

08 / 11 / 2006

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

C. Ali Shaye

Mailing Address 6552 Colgate Avenue

City State Zip Code
Los Angeles CA 90048-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12716

Date of Disbursement

08 / 11 / 2006

Amount of Each Disbursement this Period

557.69

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

0.00

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)

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City State Zip Code
Novi MI 48375-

Purpose of Disbursement
PAYROLL SERVICE: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12697

Date of Disbursement

08 / 18 / 2006

Amount of Each Disbursement this Period

1515.43

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL SERVICE: SEE BELOW

Full Name (Last, First, Middle Initial)

B. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City State Zip Code
Novi MI 48375-

Purpose of Disbursement
TAXES & SERVICE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12707

Date of Disbursement

08 / 18 / 2006

Amount of Each Disbursement this Period

207.74

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TAXES & SERVICE FEE

Full Name (Last, First, Middle Initial)

C. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City State Zip Code
Howell MI 48843-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12728

Date of Disbursement

08 / 18 / 2006

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1515.43

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)

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NAME OF COMMITTEE (In Full)
Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) Ali Shaye		Transaction ID: 61013.E12717 Date of Disbursement <div> <div>08</div> <div>18</div> <div>2006</div> </div>	
Mailing Address 6552 Colgate Avenue		Amount of Each Disbursement this Period <div>557.69</div>	
City Los Angeles State CA Zip Code 90048-	Purpose of Disbursement PAYROLL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/ Type	[MEMO ITEM] MEMO: PAYROLL	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) ADP Total Resources		Transaction ID: 61013.E12698 Date of Disbursement <div> <div>08</div> <div>25</div> <div>2006</div> </div>	
Mailing Address Attn: Kristie Negro 42400 Grand River Ave.		Amount of Each Disbursement this Period <div>1455.20</div>	
City Novi State MI Zip Code 48375-	Purpose of Disbursement PAYROLL SERVICE: SEE BELOW	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/ Type	PAYROLL SERVICE: SEE BELOW	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) ADP Total Resources		Transaction ID: 61013.E12708 Date of Disbursement <div> <div>08</div> <div>25</div> <div>2006</div> </div>	
Mailing Address Attn: Kristie Negro 42400 Grand River Ave.		Amount of Each Disbursement this Period <div>230.20</div>	
City Novi State MI Zip Code 48375-	Purpose of Disbursement TAXES & SERVICE FEE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/ Type	[MEMO ITEM] MEMO: TAXES & SERVICE FEE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

1455.20

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
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FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Alexis Kiriluk

Mailing Address 1347 Villa

City
Birmingham

State
MI

Zip Code
48009-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12719

Date of Disbursement

/ /

Amount of Each Disbursement this Period

475.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

B. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City
Howell

State
MI

Zip Code
48843-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12729

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

C. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City
Novi

State
MI

Zip Code
48375-

Purpose of Disbursement
PAYROLL SERVICE: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12699

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2075.68

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL SERVICE: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

2075.68

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)

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City State Zip Code
Novi MI 48375-

Purpose of Disbursement
TAXES & SERVICE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12709

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

326.06

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TAXES & SERVICE FEE

Full Name (Last, First, Middle Initial)

B. Alexis Kiriluk

Mailing Address 1347 Villa

City State Zip Code
Birmingham MI 48009-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12720

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

665.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

C. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City State Zip Code
Howell MI 48843-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12730

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

0.00

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:
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Ali Shaye

Mailing Address 6552 Colgate Avenue

City Los Angeles State CA Zip Code 90048-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12718

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

334.62

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

B. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City Novi State MI Zip Code 48375-

Purpose of Disbursement
PAYROLL SERVICE: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12700

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

1455.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL SERVICE: SEE BELOW

Full Name (Last, First, Middle Initial)

C. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City Novi State MI Zip Code 48375-

Purpose of Disbursement
TAXES & SERVICE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12710

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

230.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TAXES & SERVICE FEE

SUBTOTAL of Disbursements This Page (optional)

1455.20

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Alexis Kiriluk

Mailing Address 1347 Villa

City
Birmingham

State
MI

Zip Code
48009-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12721

Date of Disbursement

/ /

Amount of Each Disbursement this Period

475.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

B. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City
Howell

State
MI

Zip Code
48843-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12731

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

C. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City
Novi

State
MI

Zip Code
48375-

Purpose of Disbursement
PAYROLL SERVICE: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12701

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1455.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL SERVICE: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

1455.20

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)

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City State Zip Code
Novi MI 48375-

Purpose of Disbursement
TAXES & SERVICE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12711

Date of Disbursement

/ /

Amount of Each Disbursement this Period

230.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TAXES & SERVICE FEE

Full Name (Last, First, Middle Initial)

B. Alexis Kiriluk

Mailing Address 1347 Villa

City State Zip Code
Birmingham MI 48009-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12722

Date of Disbursement

/ /

Amount of Each Disbursement this Period

475.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

C. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City State Zip Code
Howell MI 48843-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12732

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

0.00

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:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City State Zip Code
Novi MI 48375-

Purpose of Disbursement
PAYROLL SERVICE: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12702

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1455.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL SERVICE: SEE BELOW

Full Name (Last, First, Middle Initial)

B. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City State Zip Code
Novi MI 48375-

Purpose of Disbursement
TAXES & SERVICE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12712

Date of Disbursement

/ /

Amount of Each Disbursement this Period

230.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TAXES & SERVICE FEE

Full Name (Last, First, Middle Initial)

C. Alexis Kiriluk

Mailing Address 1347 Villa

City State Zip Code
Birmingham MI 48009-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12723

Date of Disbursement

/ /

Amount of Each Disbursement this Period

475.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1455.20

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)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City
Howell

State
MI

Zip Code
48843-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12733

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

B. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City
Novi

State
MI

Zip Code
48375-

Purpose of Disbursement
PAYROLL SERVICE: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12703

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1455.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL SERVICE: SEE BELOW

Full Name (Last, First, Middle Initial)

C. ADP Total Resources

Mailing Address Attn: Kristie Negro
42400 Grand River Ave.

City
Novi

State
MI

Zip Code
48375-

Purpose of Disbursement
TAXES & SERVICE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12713

Date of Disbursement

/ /

Amount of Each Disbursement this Period

230.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TAXES & SERVICE FEE

SUBTOTAL of Disbursements This Page (optional)

1455.20

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)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Alexis Kiriluk

Mailing Address 1347 Villa

City
Birmingham

State
MI

Zip Code
48009-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12724

Date of Disbursement

/ /

Amount of Each Disbursement this Period

475.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

B. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City
Howell

State
MI

Zip Code
48843-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12734

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PAYROLL

Full Name (Last, First, Middle Initial)

C. American Community Insurance

Mailing Address 39201 Seven Mile Road

City
Livonia

State
MI

Zip Code
48152-

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12623

Date of Disbursement

/ /

Amount of Each Disbursement this Period

171.64

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

HEALTH INSURANCE

SUBTOTAL of Disbursements This Page (optional)

171.64

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. American Community Insurance

Mailing Address 39201 Seven Mile Road

City
Livonia

State
MI

Zip Code
48152-

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12622

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

202.13

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

HEALTH INSURANCE

Full Name (Last, First, Middle Initial)

B. American Community Insurance

Mailing Address 39201 Seven Mile Road

City
Livonia

State
MI

Zip Code
48152-

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12742

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

121.31

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

HEALTH INSURANCE

Full Name (Last, First, Middle Initial)

C. American Thermographers

Mailing Address Attn: Kerry
291 E. 12 Mile Road

City
Madison Heights

State
MI

Zip Code
48071-

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012690

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

174.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PRINTING

SUBTOTAL of Disbursements This Page (optional)

497.44

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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Arena Communications

Mailing Address 1142 West 2320 South
Suite D

City Salt Lake City State UT Zip Code 84119-

Purpose of Disbursement
POLITICAL MAILING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12588

Date of Disbursement

/ /

Amount of Each Disbursement this Period

65708.02

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POLITICAL MAILING

Full Name (Last, First, Middle Initial)

B. Arena Communications

Mailing Address 1142 West 2320 South
Suite D

City Salt Lake City State UT Zip Code 84119-

Purpose of Disbursement
POLITICAL MAILING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012672

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4668.24

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POLITICAL MAILING

Full Name (Last, First, Middle Initial)

C. Arena Communications

Mailing Address 1142 West 2320 South
Suite D

City Salt Lake City State UT Zip Code 84119-

Purpose of Disbursement
POLITICAL MAILINGS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12634

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6092.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POLITICAL MAILINGS

SUBTOTAL of Disbursements This Page (optional)

76468.56

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

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Arena Communications

Mailing Address 1142 West 2320 South
Suite D

City Salt Lake City State UT Zip Code 84119-

Purpose of Disbursement
GOTV PHONE CALLS FOR J. KNOLLENBERG

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012683

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2612.35

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

GOTV PHONE CALLS FOR J.
KNOLLENBERG

Full Name (Last, First, Middle Initial)

B. Arena Communications

Mailing Address 1142 West 2320 South
Suite D

City Salt Lake City State UT Zip Code 84119-

Purpose of Disbursement
POLITICAL MAILINGS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12760

Date of Disbursement

/ /

Amount of Each Disbursement this Period

17108.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POLITICAL MAILINGS

Full Name (Last, First, Middle Initial)

C. Arena Communications

Mailing Address 1142 West 2320 South
Suite D

City Salt Lake City State UT Zip Code 84119-

Purpose of Disbursement
POLITICAL MAILINGS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12761

Date of Disbursement

/ /

Amount of Each Disbursement this Period

13347.87

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POLITICAL MAILINGS

SUBTOTAL of Disbursements This Page (optional)

33068.97

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Arena Communications

Mailing Address 1142 West 2320 South
Suite D

City Salt Lake City State UT Zip Code 84119-

Purpose of Disbursement
POLITICAL MAILINGS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12762

Date of Disbursement

/ /

Amount of Each Disbursement this Period

22186.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POLITICAL MAILINGS

Full Name (Last, First, Middle Initial)

B. Aristotle Industries

Mailing Address 205 Pennsylvania Avenue, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
MAINTENANCE AGREEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012684

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2750.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MAINTENANCE AGREEMENT

Full Name (Last, First, Middle Initial)

C. Aristotle Industries

Mailing Address 205 Pennsylvania Avenue, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
CREDIT CARD DONATION PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12748

Date of Disbursement

/ /

Amount of Each Disbursement this Period

72.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD DONATION PROC-
ESSING FEE

SUBTOTAL of Disbursements This Page (optional)

25009.30

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Aristotle Industries

Mailing Address 205 Pennsylvania Avenue, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
CREDIT CARD DONATION PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12797

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

**CREDIT CARD DONATION PROC-
ESSING FEE**

Full Name (Last, First, Middle Initial)

B. AT&T Phone Company

Mailing Address Bill Payment Center

City Saginaw State MI Zip Code 48663-

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12598

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE BILL

Full Name (Last, First, Middle Initial)

C. AT&T Phone Company

Mailing Address Bill Payment Center

City Saginaw State MI Zip Code 48663-

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12599

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE BILL

SUBTOTAL of Disbursements This Page (optional)

505.56

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. AT&T Phone Company

Mailing Address Bill Payment Center

City State Zip Code
Saginaw MI 48663-

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12741

Date of Disbursement

/ /

Amount of Each Disbursement this Period

34.66

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE BILL

Full Name (Last, First, Middle Initial)

B. AT&T Phone Company

Mailing Address Bill Payment Center

City State Zip Code
Saginaw MI 48663-

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012694

Date of Disbursement

/ /

Amount of Each Disbursement this Period

376.55

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE BILL

Full Name (Last, First, Middle Initial)

C. Brownfield & Associates

Mailing Address 1250 Marymar Lane

City State Zip Code
Bloomfield Hills MI 48302-

Purpose of Disbursement
WEBSITE UPDATE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12807

Date of Disbursement

/ /

Amount of Each Disbursement this Period

825.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

WEBSITE UPDATE

SUBTOTAL of Disbursements This Page (optional)

1236.21

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 300 First Street, S.E.

City
Washington

State
DC

Zip Code
20003-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012688

Date of Disbursement

/ /

Amount of Each Disbursement this Period

419.78

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEALS

Full Name (Last, First, Middle Initial)

B. Cardmember Service

Mailing Address P.O. Box 94014

City
Palatine

State
IL

Zip Code
60094-4014

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12644

Date of Disbursement

/ /

Amount of Each Disbursement this Period

192.35

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

C. America on Line

Mailing Address P.O. Box 28640

City
Jacksonville

State
FL

Zip Code
32226-8640

Purpose of Disbursement
INTERNET SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12646

Date of Disbursement

/ /

Amount of Each Disbursement this Period

51.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: INTERNET SERVICE

SUBTOTAL of Disbursements This Page (optional)

612.13

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Knollenberg for Congress Committee

A. Full Name (Last, First, Middle Initial) FTD.COM Mailing Address Downers Grove, Illinois City State Zip Code - Purpose of Disbursement FLORAL ARRANGEMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		Transaction ID: 60807.E12648 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 6 Amount of Each Disbursement this Period 70.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: FLORAL ARRANGEMENT
B. Full Name (Last, First, Middle Initial) Oakland Press Mailing Address P.O. Box 436009 City Pontiac State MI Zip Code 48343- Purpose of Disbursement NEWSPAPERS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		Transaction ID: 60807.E12649 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 6 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: NEWSPAPERS
C. Full Name (Last, First, Middle Initial) Cardmember Service Mailing Address P.O. Box 94014 City Palatine State IL Zip Code 60094-4014 Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		Transaction ID: 60728.E12607 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 6 Amount of Each Disbursement this Period 762.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD: SEE BELOW
SUBTOTAL of Disbursements This Page (optional) ▶		762.18
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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Andiamo Italia West

Mailing Address 6676 Telegraph Road

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12608

Date of Disbursement

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

Amount of Each Disbursement this Period

82.11

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Carroll Travel

Mailing Address 201 Massachusetts Ave., NE

City Washington State DC Zip Code 20002-

Purpose of Disbursement
TRAVEL AGENT FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12610

Date of Disbursement

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

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: TRAVEL AGENT FEE

Full Name (Last, First, Middle Initial)

C. The Grand Hotel

Mailing Address Mackinac Island

City Mackinac Island State MI Zip Code 49757-

Purpose of Disbursement
LODGING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12609

Date of Disbursement

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

Amount of Each Disbursement this Period

385.77

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: LODGING

SUBTOTAL of Disbursements This Page (optional)

0.00

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address

City
Washington

State
DC

Zip Code
20001-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12611

Date of Disbursement

/ /

Amount of Each Disbursement this Period

264.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Cardmember Service

Mailing Address P.O. Box 94014

City
Palatine

State
IL

Zip Code
60094-4014

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12839

Date of Disbursement

/ /

Amount of Each Disbursement this Period

407.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Carroll Travel

Mailing Address 201 Massachusetts Ave., NE

City
Washington

State
DC

Zip Code
20002-

Purpose of Disbursement
TRAVEL AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12841

Date of Disbursement

/ /

Amount of Each Disbursement this Period

60.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL AGENT FEE

SUBTOTAL of Disbursements This Page (optional)

407.20

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

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Northwest Airlines

Mailing Address 5101 Northwest Drive
Department A5200

City State Zip Code
St. Paul MN 55111-3034

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12840

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

347.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Cardmember Service

Mailing Address P.O. Box 94014

City State Zip Code
Palatine IL 60094-4014

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12842

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

146.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Cardmember Service

Mailing Address P.O. Box 94014

City State Zip Code
Palatine IL 60094-4014

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12844

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

243.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

390.75

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. America on Line

Mailing Address P.O. Box 28640

City
Jacksonville

State
FL

Zip Code
32226-8640

Purpose of Disbursement
INTERNET SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12845

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

51.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: INTERNET SERVICE

Full Name (Last, First, Middle Initial)

B. Harry & David

Mailing Address P.O. Box 712

City
Medford

State
OR

Zip Code
97501-

Purpose of Disbursement
GET WELL GIFT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12847

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

98.85

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GET WELL GIFT

Full Name (Last, First, Middle Initial)

C. Cardmember Service

Mailing Address P.O. Box 94014

City
Palatine

State
IL

Zip Code
60094-4014

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12895

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

1193.83

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

1193.83

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:
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Baileys Pub & Grille

Mailing Address 1965 W. Maple

City Troy State MI Zip Code 48084-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12898

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

179.65

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Carroll Travel

Mailing Address 201 Massachusetts Ave., NE

City Washington State DC Zip Code 20002-

Purpose of Disbursement
TRAVEL AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12897

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

60.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL AGENT FEE

Full Name (Last, First, Middle Initial)

C. Northwest Airlines

Mailing Address 5101 Northwest Drive
Department A5200

City St. Paul State MN Zip Code 55111-3034

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12896

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

897.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Cardmember Service

Mailing Address P.O. Box 94014

City
PalatineState
ILZip Code
60094-4014Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12892

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	6

Amount of Each Disbursement this Period

77.27

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

B. America on Line

Mailing Address P.O. Box 28640

City
JacksonvilleState
FLZip Code
32226-8640Purpose of Disbursement
INTERNET SERVICE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12893

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	6

Amount of Each Disbursement this Period

51.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: INTERNET SERVICE

Full Name (Last, First, Middle Initial)

C. Cardmember Service

Mailing Address P.O. Box 94014

City
PalatineState
ILZip Code
60094-4014Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12888

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	6

Amount of Each Disbursement this Period

1087.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

1164.47

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Carroll Travel

Mailing Address 201 Massachusetts Ave., NE

City Washington State DC Zip Code 20002-

Purpose of Disbursement
TRAVEL AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12890

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

60.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL AGENT FEE

Full Name (Last, First, Middle Initial)

B. Northwest Airlines

Mailing Address 5101 Northwest Drive
Department A5200

City St. Paul State MN Zip Code 55111-3034

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12889

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

987.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Paul Cohn

Mailing Address 1325 21st. St. NW

City Washington State DC Zip Code 20036-1503

Purpose of Disbursement
HOSTED FUNDRAISER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.C32597IK

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

1174.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

IN KIND: HOSTED FUNDRAISER

SUBTOTAL of Disbursements This Page (optional)

1174.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Comcast

Mailing Address P.O. Box 827554

City Philadelphia State PA Zip Code 19182-7554

Purpose of Disbursement
CABLE SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 200012692

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CABLE SERVICE

Full Name (Last, First, Middle Initial)

B. Comcast

Mailing Address P.O. Box 827554

City Philadelphia State PA Zip Code 19182-7554

Purpose of Disbursement
INTERNET SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 200012693

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

INTERNET SERVICE

Full Name (Last, First, Middle Initial)

C. Comcast

Mailing Address P.O. Box 827554

City Philadelphia State PA Zip Code 19182-7554

Purpose of Disbursement
CABLE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61013.E12814

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CABLE BILL

SUBTOTAL of Disbursements This Page (optional)

335.54

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Comcast

Mailing Address P.O. Box 827554

City
Philadelphia

State
PA

Zip Code
19182-7554

Purpose of Disbursement
INTERNET SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12815

Date of Disbursement

/ /

Amount of Each Disbursement this Period

153.23

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

INTERNET SERVICE

Full Name (Last, First, Middle Initial)

B. Conference Call. Com

Mailing Address P.O. Box 409573

City
Atlanta

State
GA

Zip Code
30384-9573

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012686

Date of Disbursement

/ /

Amount of Each Disbursement this Period

26.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE BILL

Full Name (Last, First, Middle Initial)

C. Conference Call. Com

Mailing Address P.O. Box 409573

City
Atlanta

State
GA

Zip Code
30384-9573

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12812

Date of Disbursement

/ /

Amount of Each Disbursement this Period

33.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE BILL

SUBTOTAL of Disbursements This Page (optional)

213.05

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Flora Dunaians

Mailing Address 3375 E. Lombardy Road

City Pasadena State CA Zip Code 91107-

Purpose of Disbursement
HOSTED FUNDRAISER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.C32440IK

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

IN KIND: HOSTED FUNDRAISER

Full Name (Last, First, Middle Initial)

B. Farmington Hills Police Benevolent Assoc

Mailing Address c/o 31655 11 Mile Road

City Farmington Hills State MI Zip Code 48336-

Purpose of Disbursement
SPONSORSHIP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12605

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SPONSORSHIP

Full Name (Last, First, Middle Initial)

C. Farmington - Farmington Hills

Mailing Address Chamber of Commerce
27555 Executive Drive, #145

City Farmington Hills State MI Zip Code 48331-

Purpose of Disbursement
TICKET

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12620

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TICKET

SUBTOTAL of Disbursements This Page (optional)

760.00

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Federal Express CorporationMailing Address P.O. Box 1140
Dept. A

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement
PACKAGE DELIVERY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12597

Date of Disbursement

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

Amount of Each Disbursement this Period

219.73

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PACKAGE DELIVERY

Full Name (Last, First, Middle Initial)

B. Federal Express CorporationMailing Address P.O. Box 1140
Dept. A

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement
PACKAGE DELIVERY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012685

Date of Disbursement

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

Amount of Each Disbursement this Period

247.54

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PACKAGE DELIVERY

Full Name (Last, First, Middle Initial)

C. Jeffery Goff

Mailing Address 2102 Paul Edwin Terrace, #103

City Falls Church State VA Zip Code 22043-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012678

Date of Disbursement

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

Amount of Each Disbursement this Period

869.89

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

1337.16

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:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Courtyard by Marriot Farmington Hills

Mailing Address 31525 W. 12 Mile Road

City
Farmington Hills

State
MI

Zip Code
48334-

Purpose of Disbursement
LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012679

Date of Disbursement

/ /

Amount of Each Disbursement this Period

806.82

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: LODGING

Full Name (Last, First, Middle Initial)

B. Gordon Advertising & Promotions

Mailing Address 6177 Lochmore Drive
Attn: Nick Gordon

City
Commerce Township

State
MI

Zip Code
48382-

Purpose of Disbursement
BANNERS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12601

Date of Disbursement

/ /

Amount of Each Disbursement this Period

337.02

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BANNERS

Full Name (Last, First, Middle Initial)

C. Gordon Advertising & Promotions

Mailing Address 6177 Lochmore Drive
Attn: Nick Gordon

City
Commerce Township

State
MI

Zip Code
48382-

Purpose of Disbursement
LAWN SIGNS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012687

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3896.62

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

LAWN SIGNS

SUBTOTAL of Disbursements This Page (optional)

4233.64

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Gordon Advertising & Promotions

Mailing Address 6177 Lochmore Drive
Attn: Nick Gordon

City Commerce Township State MI Zip Code 48382-

Purpose of Disbursement
BUMPER STICKERS & LAPEL STICKERS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12808

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

542.33

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BUMPER STICKERS & LAPEL
STICKERS

Full Name (Last, First, Middle Initial)

B. Greater W.Bloomfield Chamber of Commerce

Mailing Address 6668 Orchard Lake Road, #207

City West Bloomfield State MI Zip Code 48322-

Purpose of Disbursement
TICKET

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12746

Date of Disbursement

08 / 25 / 2006

Amount of Each Disbursement this Period

10.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TICKET

Full Name (Last, First, Middle Initial)

C. Jamestowne Properties, LLC

Mailing Address 6640 Reliable Parkway

City Chicago State IL Zip Code 60686-

Purpose of Disbursement
HQ RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12614

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

2400.16

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

HQ RENT

SUBTOTAL of Disbursements This Page (optional)

2952.49

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Jamestowne Properties, LLC

Mailing Address 6640 Reliable Parkway

City
Chicago

State
IL

Zip Code
60686-

Purpose of Disbursement
HQ RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12758

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2400.10

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

HQ RENT

Full Name (Last, First, Middle Initial)

B. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City
Howell

State
MI

Zip Code
48843-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12816

Date of Disbursement

/ /

Amount of Each Disbursement this Period

48.29

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Baja Fresh Mexican Grill

Mailing Address 28644 Telegraph Road

City
Southfield

State
MI

Zip Code
48034-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12817

Date of Disbursement

/ /

Amount of Each Disbursement this Period

48.29

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

2448.39

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Debra Lee Joslin Kling

Mailing Address 416 E. Sibley

City
HowellState
MIZip Code
48843-Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12926

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Amount of Each Disbursement this Period

40.85

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Sandie Knollenberg

Mailing Address 1130 Park Place Court

City

Bloomfield Hills

State
MIZip Code
48302-Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12652

Date of Disbursement

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

Amount of Each Disbursement this Period

254.03

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Office Max

Mailing Address 31219 Fourteen Mile

City

Farmington Hills

State
MIZip Code
48334-Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12655

Date of Disbursement

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

Amount of Each Disbursement this Period

78.96

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

294.88

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Studio 330

Mailing Address 6566 Telegraph Road

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
GIFTS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12654

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.07

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GIFTS

Full Name (Last, First, Middle Initial)

B. LCA Computer Systems, Inc.

Mailing Address Attn: Lonnie Collins
21711 W. 10 Mile Road, #230

City Southfield State MI Zip Code 48075-

Purpose of Disbursement
COMPUTER MAINTENANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12745

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1073.47

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

COMPUTER MAINTENANCE

Full Name (Last, First, Middle Initial)

C. Mental Illness Research Association

Mailing Address 43494 Woodward Ave., #201
3315 Auburn Road

City Bloomfield Hills State MI Zip Code 48302-

Purpose of Disbursement
AD IN BOOKLET

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12811

Date of Disbursement

/ /

Amount of Each Disbursement this Period

275.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

AD IN BOOKLET

SUBTOTAL of Disbursements This Page (optional)

1348.47

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Mitchell Research & Communications

Mailing Address 5034 Champlain Circle

City
West Bloomfield

State
MI

Zip Code
48323-

Purpose of Disbursement
POLLING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12809

Date of Disbursement

/ /

Amount of Each Disbursement this Period

18207.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POLLING

Full Name (Last, First, Middle Initial)

B. Richard Mushegian

Mailing Address 14281 Whittram Ave.

City
Fontana

State
CA

Zip Code
92335-

Purpose of Disbursement
HOSTED FUNDRAISER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.C32441IK

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1760.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

IN KIND: HOSTED FUNDRAISER

Full Name (Last, First, Middle Initial)

C. National City

Mailing Address P.O. Box 856176

City
Louisville

State
KY

Zip Code
40285-6176

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12876

Date of Disbursement

/ /

Amount of Each Disbursement this Period

397.42

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

20364.42

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. America on Line

Mailing Address P.O. Box 28640

City
Jacksonville

State
FL

Zip Code
32226-8640

Purpose of Disbursement
INTERNET SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12877

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: INTERNET SERVICE

Full Name (Last, First, Middle Initial)

B. Champps Restaurant

Mailing Address 7410 Orchard Lake Road

City
West Bloomfield

State
MI

Zip Code
48322-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12878

Date of Disbursement

/ /

Amount of Each Disbursement this Period

27.62

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

C. Detroit Jewish News

Mailing Address 29200 Northwestern Highway, #110

City
Southfield

State
MI

Zip Code
48034-

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12880

Date of Disbursement

/ /

Amount of Each Disbursement this Period

156.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SUBSCRIPTION

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Steves Deli

Mailing Address 6646 Telegraph Road

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12879

Date of Disbursement

08 / 30 / 2006

Amount of Each Disbursement this Period

32.18

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Verizon Wireless Great Lakes

Mailing Address P.O. Box 790292

City Saint Louis State MO Zip Code 63179-0292

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12881

Date of Disbursement

08 / 30 / 2006

Amount of Each Disbursement this Period

155.72

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PHONE BILL

Full Name (Last, First, Middle Initial)

C. National City

Mailing Address P.O. Box 856176

City Louisville State KY Zip Code 40285-6176

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12928

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

411.23

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

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)
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. America on Line

Mailing Address P.O. Box 28640

City Jacksonville State FL Zip Code 32226-8640

Purpose of Disbursement
INTERNET SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12931

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

25.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: INTERNET SERVICE

Full Name (Last, First, Middle Initial)

B. Baileys Pub & Grille

Mailing Address 1965 W. Maple

City Troy State MI Zip Code 48084-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12929

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

28.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

C. Bamboo Club

Mailing Address 44375 W. 12 Mile Road

City Novi State MI Zip Code 48377-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12930

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

321.29

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. National City Bank

Mailing Address 30701 Woodward Avenue

City State Zip Code
Royal Oak MI 48073-Purpose of Disbursement
BANK CHARGES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12633

Date of Disbursement

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

Amount of Each Disbursement this Period

180.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BANK CHARGES

Full Name (Last, First, Middle Initial)

B. Oakland Press

Mailing Address P.O. Box 436009

City State Zip Code
Pontiac MI 48343-Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12604

Date of Disbursement

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

Amount of Each Disbursement this Period

40.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBSCRIPTION

Full Name (Last, First, Middle Initial)

C. Oakland Press

Mailing Address P.O. Box 436009

City State Zip Code
Pontiac MI 48343-Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12740

Date of Disbursement

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

Amount of Each Disbursement this Period

56.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBSCRIPTION

SUBTOTAL of Disbursements This Page (optional)

276.00

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)

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Observer & Eccentric Newspapers

Mailing Address 36251 Schoolcraft

City
Livonia

State
MI

Zip Code
48150-

Purpose of Disbursement
NEWSPAPER ADS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12591

Date of Disbursement

/ /

Amount of Each Disbursement this Period

19923.63

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

NEWSPAPER ADS

Full Name (Last, First, Middle Initial)

B. Jeff Onizuk

Mailing Address 4629 30th Road South

City
Arlington

State
VA

Zip Code
22206-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12856

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1331.76

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Courtyard by Marriot Farmington Hills

Mailing Address 31525 W. 12 Mile Road

City
Farmington Hills

State
MI

Zip Code
48334-

Purpose of Disbursement
LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12857

Date of Disbursement

/ /

Amount of Each Disbursement this Period

941.29

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: LODGING

SUBTOTAL of Disbursements This Page (optional)

21255.39

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:
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Thrifty Car Rental

Mailing Address 29111 Wick Road

City Romulus State MI Zip Code 48174-

Purpose of Disbursement
CAR RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12858

Date of Disbursement

/ /

Amount of Each Disbursement this Period

318.48

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CAR RENTAL

Full Name (Last, First, Middle Initial)

B. Optimist Club of West Bloomfield

Mailing Address P.O. Box 250141

City West Bloomfield State MI Zip Code 48325-

Purpose of Disbursement
GUS MACKER SPONSORSHIP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12621

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

GUS MACKER SPONSORSHIP

Full Name (Last, First, Middle Initial)

C. Papa Romanos

Mailing Address 1998 Southfield Road

City Birmingham State MI Zip Code 48009-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12631

Date of Disbursement

/ /

Amount of Each Disbursement this Period

90.24

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEALS

SUBTOTAL of Disbursements This Page (optional)

590.24

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Papa Romanos

Mailing Address 1998 Southfield Road

City Birmingham State MI Zip Code 48009-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012676

Date of Disbursement

/ /

Amount of Each Disbursement this Period

132.37

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEALS

Full Name (Last, First, Middle Initial)

B. Pas Photographic

Mailing Address Attn: Don Pas
871 Kirts

City Troy State MI Zip Code 48084-

Purpose of Disbursement
PHOTOGRAPHER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12806

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHOTOGRAPHER

Full Name (Last, First, Middle Initial)

C. Petty Cash

Mailing Address 27867 Orchard Lake Road

City Farmington Hills State MI Zip Code 48334-

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12637

Date of Disbursement

/ /

Amount of Each Disbursement this Period

99.94

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PETTY CASH

SUBTOTAL of Disbursements This Page (optional)

382.31

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Petty Cash

Mailing Address 27867 Orchard Lake Road

City Farmington Hills State MI Zip Code 48334-

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012673

Date of Disbursement

08 / 08 / 2006

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PETTY CASH

Full Name (Last, First, Middle Initial)

B. Petty Cash

Mailing Address 27867 Orchard Lake Road

City Farmington Hills State MI Zip Code 48334-

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012682

Date of Disbursement

08 / 12 / 2006

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PETTY CASH

Full Name (Last, First, Middle Initial)

C. Petty Cash

Mailing Address 27867 Orchard Lake Road

City Farmington Hills State MI Zip Code 48334-

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12768

Date of Disbursement

09 / 15 / 2006

Amount of Each Disbursement this Period

94.63

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PETTY CASH

SUBTOTAL of Disbursements This Page (optional)

294.63

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Plaza Deli

Mailing Address 29145 Northwestern Hwy.

City Southfield State MI Zip Code 48034-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12787

Date of Disbursement

/ /

Amount of Each Disbursement this Period

82.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEALS

Full Name (Last, First, Middle Initial)

B. Political Productions.com

Mailing Address Attn: Mr. David Grossman, Presiden
20570 West Eight Mile Road

City Southfield State MI Zip Code 48075-

Purpose of Disbursement
TAILGATE PARTY SET UP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12617

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TAILGATE PARTY SET UP

Full Name (Last, First, Middle Initial)

C. Renaissance Strategies

Mailing Address 27780 Novi Road, #210

City Novi State MI Zip Code 48377-

Purpose of Disbursement
CABLE TIME

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12586

Date of Disbursement

/ /

Amount of Each Disbursement this Period

139993.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CABLE TIME

SUBTOTAL of Disbursements This Page (optional)

140175.50

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Renaissance Strategies

Mailing Address 27780 Novi Road, #210

City Novi State MI Zip Code 48377-

Purpose of Disbursement
RADIO TIME

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60728.E12585

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

31125.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

RADIO TIME

Full Name (Last, First, Middle Initial)

B. Renaissance Strategies

Mailing Address 27780 Novi Road, #210

City Novi State MI Zip Code 48377-

Purpose of Disbursement
CABLE TIME

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60728.E12587

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

62975.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CABLE TIME

Full Name (Last, First, Middle Initial)

C. Renaissance Strategies

Mailing Address 27780 Novi Road, #210

City Novi State MI Zip Code 48377-

Purpose of Disbursement
CONSULTING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60807.E12616

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CONSULTING FEE

SUBTOTAL of Disbursements This Page (optional)

96100.00

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Renaissance Strategies

Mailing Address 27780 Novi Road, #210

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
CONSULTING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12810

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CONSULTING FEE

Full Name (Last, First, Middle Initial)

B. Renaissance Strategies

Mailing Address 27780 Novi Road, #210

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
RADIO TIME

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12799

Date of Disbursement

/ /

Amount of Each Disbursement this Period

57793.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

RADIO TIME

Full Name (Last, First, Middle Initial)

C. Bryce Sandler

Mailing Address 1600 Normandy

City State Zip Code
Clawson MI 48017-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12595

Date of Disbursement

/ /

Amount of Each Disbursement this Period

429.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

60222.80

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Northwest Airlines

Mailing Address 5101 Northwest Drive
Department A5200

City St. Paul State MN Zip Code 55111-3034

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12596

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

429.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Bryce Sandler

Mailing Address 1600 Normandy

City Clawson State MI Zip Code 48017-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12859

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Bryce Sandler

Mailing Address 1600 Normandy

City Clawson State MI Zip Code 48017-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12872

Date of Disbursement

08 / 30 / 2006

Amount of Each Disbursement this Period

38.39

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

63.39

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
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(check only one)

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Detroit Metro McNamara Parking

Mailing Address 9555 Middlebelt

City Romulus State MI Zip Code 48174-

Purpose of Disbursement
PARKING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12873

Date of Disbursement

08 / 30 / 2006

Amount of Each Disbursement this Period

7.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PARKING

Full Name (Last, First, Middle Initial)

B. Bryce Sandler

Mailing Address 1600 Normandy

City Clawson State MI Zip Code 48017-

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12884

Date of Disbursement

09 / 07 / 2006

Amount of Each Disbursement this Period

1039.52

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

C. Sandler & Associates

Mailing Address 1600 Normandy

City Clawson State MI Zip Code 48017-

Purpose of Disbursement
FUNDRAISING CONSULTANT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12615

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

7500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING CONSULTANT

SUBTOTAL of Disbursements This Page (optional)

8539.52

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Sandler & Associates

Mailing Address 1600 Normandy

City
Clawson

State
MI

Zip Code
48017-

Purpose of Disbursement
FUNDRAISING CONSULTANT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12757

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING CONSULTANT

Full Name (Last, First, Middle Initial)

B. Ali Shaye

Mailing Address 6552 Colgate Avenue

City
Los Angeles

State
CA

Zip Code
90048-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12638

Date of Disbursement

/ /

Amount of Each Disbursement this Period

125.99

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Sav-On Drugs

Mailing Address 6510 Telegraph Road

City
Bloomfield Hills

State
MI

Zip Code
48301-

Purpose of Disbursement
EMPLOYEE HEALTH CARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12639

Date of Disbursement

/ /

Amount of Each Disbursement this Period

125.99

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EMPLOYEE HEALTH CARE

SUBTOTAL of Disbursements This Page (optional)

7625.99

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Ali Shaye

Mailing Address 6552 Colgate Avenue

City
Los AngelesState
CAZip Code
90048-Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12833

Date of Disbursement

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

Amount of Each Disbursement this Period

59.08

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Ali Shaye

Mailing Address 6552 Colgate Avenue

City
Los AngelesState
CAZip Code
90048-Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12834

Date of Disbursement

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

Amount of Each Disbursement this Period

40.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

C. Sprint

Mailing Address P.O. Box 530503

City
AtlantaState
GAZip Code
30353-0503Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12835

Date of Disbursement

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

Amount of Each Disbursement this Period

11.41

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PHONE BILL

SUBTOTAL of Disbursements This Page (optional)

59.08

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:
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Sparrs Hearts & Roses

Mailing Address 156 North Center

City Northville State MI Zip Code 48167-

Purpose of Disbursement
FLORAL ARRANGEMENTS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60728.E12602

Date of Disbursement

/ /

Amount of Each Disbursement this Period

116.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FLORAL ARRANGEMENTS

Full Name (Last, First, Middle Initial)

B. Sparrs Hearts & Roses

Mailing Address 156 North Center

City Northville State MI Zip Code 48167-

Purpose of Disbursement
FLORAL ARRANGEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 200012689

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FLORAL ARRANGEMENT

Full Name (Last, First, Middle Initial)

C. Star Deli

Mailing Address 24555 W. 12 Mile Road

City Southfield State MI Zip Code 48034-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61013.E12767

Date of Disbursement

/ /

Amount of Each Disbursement this Period

162.47

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEALS

SUBTOTAL of Disbursements This Page (optional)

331.92

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 PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Steves Deli

Mailing Address 6646 Telegraph Road

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12603

Date of Disbursement

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

Amount of Each Disbursement this Period

97.08

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEALS

Full Name (Last, First, Middle Initial)

B. Steves Deli

Mailing Address 6646 Telegraph Road

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12782

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	8	/	2	0	0	6

Amount of Each Disbursement this Period

33.36

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEALS

Full Name (Last, First, Middle Initial)

C. Televideo Studios

Mailing Address 2040 Crooks Road

City Troy State MI Zip Code 48084-

Purpose of Disbursement
TV PRODUCTION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12618

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	0	6

Amount of Each Disbursement this Period

5861.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TV PRODUCTION

SUBTOTAL of Disbursements This Page (optional)

5991.64

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:
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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. The Levatino Group

Mailing Address Ms. Vita Levatino
2501 Wisconsin Avenue NW, #304

City Washington State DC Zip Code 20007-

Purpose of Disbursement
FUNDRAISING CONSULTANT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12747

Date of Disbursement

08 / 25 / 2006

Amount of Each Disbursement this Period

27722.47

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING CONSULTANT

Full Name (Last, First, Middle Initial)

B. TVS Communication Solutions

Mailing Address 2040 Crooks Road

City Troy State MI Zip Code 48084-

Purpose of Disbursement
TV PRODUCTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12738

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

11728.53

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TV PRODUCTION

Full Name (Last, First, Middle Initial)

C. U.S. Bank

Mailing Address P.O. Box 790408

City Saint Louis State MO Zip Code 63179-0408

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12818

Date of Disbursement

08 / 14 / 2006

Amount of Each Disbursement this Period

4811.81

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

44262.81

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Avenue Family Restaurant

Mailing Address 31253 Woodward Ave.

City State Zip Code
 Royal Oak MI 48073-

Purpose of Disbursement
 MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12827

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.48

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Einstein Bros Bagels

Mailing Address 4089 W. Maple Road

City State Zip Code
 Bloomfield Hills MI 48301-

Purpose of Disbursement
 MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12819

Date of Disbursement

/ /

Amount of Each Disbursement this Period

72.76

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

C. Family Buggy Restaurant

Mailing Address 29335 Orchard Lake Road

City State Zip Code
 Farmington Hills MI 48334-

Purpose of Disbursement
 MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12828

Date of Disbursement

/ /

Amount of Each Disbursement this Period

45.49

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Ginopolis Restaurant

Mailing Address Attn: Johnny & Peter
27815 Middlebelt Road

City Farmington Hills State MI Zip Code 48334-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12821

Date of Disbursement

08 / 14 / 2006

Amount of Each Disbursement this Period

116.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Hogans Restaurant

Mailing Address 6450 Telegraph

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12830

Date of Disbursement

08 / 14 / 2006

Amount of Each Disbursement this Period

96.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

C. Leos Coney Island

Mailing Address 6527 Telegraph Road

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12820

Date of Disbursement

08 / 14 / 2006

Amount of Each Disbursement this Period

149.07

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. U.S. Postmaster

Mailing Address 22200 W. Eleven Mile Road

City Southfield	State MI	Zip Code 48037-9998
--------------------	-------------	------------------------

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12825

Date of Disbursement

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

Amount of Each Disbursement this Period

3900.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

B. Verizon Wireless Great Lakes

Mailing Address P.O. Box 790292

City Saint Louis	State MO	Zip Code 63179-0292
---------------------	-------------	------------------------

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12829

Date of Disbursement

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

Amount of Each Disbursement this Period

148.57

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PHONE BILL

Full Name (Last, First, Middle Initial)

C. U.S. Bank

Mailing Address P.O. Box 790408

City Saint Louis	State MO	Zip Code 63179-0408
---------------------	-------------	------------------------

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12900

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	6

Amount of Each Disbursement this Period

2324.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

2324.45

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Baileys Pub & Grille

Mailing Address 1965 W. Maple

City Troy State MI Zip Code 48084-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12904

Date of Disbursement

09 / 14 / 2006

Amount of Each Disbursement this Period

20.25

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. G.T. Jerseys

Mailing Address 1203 Rankin

City Troy State MI Zip Code 48083-

Purpose of Disbursement
T-SHIRTS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12902

Date of Disbursement

09 / 14 / 2006

Amount of Each Disbursement this Period

793.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: T-SHIRTS

Full Name (Last, First, Middle Initial)

C. Gallery Restaurant

Mailing Address 6638 Telegraph Road

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12915

Date of Disbursement

09 / 14 / 2006

Amount of Each Disbursement this Period

40.91

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Ginopolis Restaurant

Mailing Address Attn: Johnny & Peter
27815 Middlebelt Road

City Farmington Hills State MI Zip Code 48334-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12903

Date of Disbursement

09 / 14 / 2006

Amount of Each Disbursement this Period

238.65

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Hogans Restaurant

Mailing Address 6450 Telegraph

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12911

Date of Disbursement

09 / 14 / 2006

Amount of Each Disbursement this Period

54.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

C. J. Alexanders Restaurant

Mailing Address 7440 Orchard Lake Road

City West Bloomfield State MI Zip Code 48322-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12908

Date of Disbursement

09 / 14 / 2006

Amount of Each Disbursement this Period

46.11

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Leos Coney Island

Mailing Address 6527 Telegraph Road

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12901

Date of Disbursement

/ /

Amount of Each Disbursement this Period

48.07

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Steves Deli

Mailing Address 6646 Telegraph Road

City Bloomfield Hills State MI Zip Code 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12914

Date of Disbursement

/ /

Amount of Each Disbursement this Period

58.41

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

C. Uncle Bucks Party Tyme Inc.

Mailing Address 6650 Highland Road, #301

City Waterford State MI Zip Code 48327-

Purpose of Disbursement
HELIUM TANK RENTAL & BALLOONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12907

Date of Disbursement

/ /

Amount of Each Disbursement this Period

324.84

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: HELIUM TANK RENTAL &
BALLOONS

SUBTOTAL of Disbursements This Page (optional)

0.00

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 PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. United States Flag.com

Mailing Address 1000 Westinghouse Drive

City State Zip Code
New Stanton PA 15672-Purpose of Disbursement
FLAGS

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12912

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	6

Amount of Each Disbursement this Period

448.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: FLAGS

Full Name (Last, First, Middle Initial)

B. U.S. Postmaster

Mailing Address 22200 W. Eleven Mile Road

City State Zip Code
Southfield MI 48037-9998Purpose of Disbursement
BRM ACCOUNT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12788

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	0	6

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BRM ACCOUNT

Full Name (Last, First, Middle Initial)

C. Verizon Wireless Great Lakes

Mailing Address P.O. Box 790292

City State Zip Code
Saint Louis MO 63179-0292Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12600

Date of Disbursement

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

Amount of Each Disbursement this Period

181.64

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE BILL

SUBTOTAL of Disbursements This Page (optional)

381.64

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
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FOR LINE NUMBER:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Verizon Wireless Great Lakes

Mailing Address P.O. Box 790292

City
Saint Louis

State
MO

Zip Code
63179-0292

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012695

Date of Disbursement

/ /

Amount of Each Disbursement this Period

198.88

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE BILL

Full Name (Last, First, Middle Initial)

B. Walmart

Mailing Address Grand River Avenue

City
Howell

State
MI

Zip Code
48843-

Purpose of Disbursement
FOOD & BEVERAGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 200012675

Date of Disbursement

/ /

Amount of Each Disbursement this Period

163.69

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FOOD & BEVERAGES

Full Name (Last, First, Middle Initial)

C. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City
Novi

State
MI

Zip Code
48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12592

Date of Disbursement

/ /

Amount of Each Disbursement this Period

103.19

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

465.76

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Stage & Company Deli

Mailing Address 6873 Orchard Lake Road

City West Bloomfield State MI Zip Code 48322-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12593

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

103.19

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City Novi State MI Zip Code 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12656

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

277.66

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Baja Fresh Mexican Grill

Mailing Address 28644 Telegraph Road

City Southfield State MI Zip Code 48034-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12661

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

82.14

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

277.66

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

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. FedEx Kinkos

Mailing Address 28844 Northwestern Highway

City State Zip Code
Southfield MI 48034-

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12659

Date of Disbursement

/ /

Amount of Each Disbursement this Period

67.84

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PRINTING

Full Name (Last, First, Middle Initial)

B. Hogans Restaurant

Mailing Address 6450 Telegraph

City State Zip Code
Bloomfield Hills MI 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12657

Date of Disbursement

/ /

Amount of Each Disbursement this Period

73.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 1072 S. Latson Road

City State Zip Code
Howell MI 48843-

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12658

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.22

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12662

Date of Disbursement

/ /

Amount of Each Disbursement this Period

337.71

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Gallery Restaurant

Mailing Address 6638 Telegraph Road

City State Zip Code
Bloomfield Hills MI 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12666

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

C. Steves Deli

Mailing Address 6646 Telegraph Road

City State Zip Code
Bloomfield Hills MI 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12665

Date of Disbursement

/ /

Amount of Each Disbursement this Period

72.18

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

337.71

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12663

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	0	6

Amount of Each Disbursement this Period

242.65

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

B. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12667

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	6

Amount of Each Disbursement this Period

5485.39

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. FedEx Kinkos

Mailing Address 28844 Northwestern Highway

City State Zip Code
Southfield MI 48034-Purpose of Disbursement
PRINTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12668

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	6

Amount of Each Disbursement this Period

5485.39

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: PRINTING

SUBTOTAL of Disbursements This Page (optional)

5485.39

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12669

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3343.27

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. FedEx Kinkos

Mailing Address 28844 Northwestern Highway

City State Zip Code
Southfield MI 48034-

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12670

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3343.27

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PRINTING

Full Name (Last, First, Middle Initial)

C. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12640

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3314.09

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

6657.36

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. FedEx Kinkos

Mailing Address 28844 Northwestern Highway

City
Southfield

State
MI

Zip Code
48034-

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12643

Date of Disbursement

08 / 04 / 2006

Amount of Each Disbursement this Period

3121.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PRINTING

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 3375 North Woodward Avenue

City
Royal Oak

State
MI

Zip Code
48073-

Purpose of Disbursement
LABELS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12642

Date of Disbursement

08 / 04 / 2006

Amount of Each Disbursement this Period

110.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: LABELS

Full Name (Last, First, Middle Initial)

C. Plaza Deli

Mailing Address 29145 Northwestern Hwy.

City
Southfield

State
MI

Zip Code
48034-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12641

Date of Disbursement

08 / 04 / 2006

Amount of Each Disbursement this Period

82.19

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12749

Date of Disbursement

/ /

Amount of Each Disbursement this Period

335.68

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Dunkin Donuts

Mailing Address 29285 Southfield Road

City State Zip Code
Southfield MI 48076-

Purpose of Disbursement
DONUTS & COFFEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12753

Date of Disbursement

/ /

Amount of Each Disbursement this Period

18.97

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: DONUTS & COFFEE

Full Name (Last, First, Middle Initial)

C. Meijer Thrifty Acres

Mailing Address 28800 Telegraph Road

City State Zip Code
Southfield MI 48034-

Purpose of Disbursement
WATER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12752

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11.98

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: WATER

SUBTOTAL of Disbursements This Page (optional)

335.68

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Roosevelts Restaurant

Mailing Address Attn: Craig
27843 Orchard Lake Road

City Farmington Hills State MI Zip Code 48334-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12751

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Star Deli

Mailing Address 24555 W. 12 Mile Road

City Southfield State MI Zip Code 48034-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12754

Date of Disbursement

/ /

Amount of Each Disbursement this Period

120.34

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

C. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City Novi State MI Zip Code 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12853

Date of Disbursement

/ /

Amount of Each Disbursement this Period

333.47

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

333.47

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Hogans Restaurant

Mailing Address 6450 Telegraph

City
Bloomfield Hills

State
MI

Zip Code
48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12855

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59.35

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City
Novi

State
MI

Zip Code
48377-

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12854

Date of Disbursement

/ /

Amount of Each Disbursement this Period

274.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

C. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City
Novi

State
MI

Zip Code
48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12861

Date of Disbursement

/ /

Amount of Each Disbursement this Period

123.66

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

123.66

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Champps Restaurant

Mailing Address 7410 Orchard Lake Road

City State Zip Code
West Bloomfield MI 48322-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12871

Date of Disbursement

/ /

Amount of Each Disbursement this Period

106.02

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Dunkin Donuts

Mailing Address 29285 Southfield Road

City State Zip Code
Southfield MI 48076-

Purpose of Disbursement
DONUTS FOR VOLUNTEERS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12870

Date of Disbursement

/ /

Amount of Each Disbursement this Period

17.64

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: DONUTS FOR VOLUNTEERS

Full Name (Last, First, Middle Initial)

C. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12874

Date of Disbursement

/ /

Amount of Each Disbursement this Period

124.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

124.70

TOTAL This Period (last page this line number only)

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

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

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Stage & Company Deli

Mailing Address 6873 Orchard Lake Road

City State Zip Code
West Bloomfield MI 48322-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12875

Date of Disbursement

08 / 30 / 2006

Amount of Each Disbursement this Period

124.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12882

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

129.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Stage & Company Deli

Mailing Address 6873 Orchard Lake Road

City State Zip Code
West Bloomfield MI 48322-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12883

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

129.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

129.75

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12765

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7410.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. U.S. Postmaster

Mailing Address 22200 W. Eleven Mile Road

City State Zip Code
Southfield MI 48037-9998

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12766

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7410.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

C. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12763

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1599.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

9009.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. U.S. Postmaster

Mailing Address 22200 W. Eleven Mile Road

City State Zip Code
Southfield MI 48037-9998

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12764

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1599.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

B. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12785

Date of Disbursement

/ /

Amount of Each Disbursement this Period

55.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12783

Date of Disbursement

/ /

Amount of Each Disbursement this Period

54.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

110.70

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Stage & Company Deli

Mailing Address 6873 Orchard Lake Road

City State Zip Code
West Bloomfield MI 48322-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12784

Date of Disbursement

/ /

Amount of Each Disbursement this Period

54.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

Full Name (Last, First, Middle Initial)

B. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12918

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1607.09

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. FedEx Kinkos

Mailing Address 28844 Northwestern Highway

City State Zip Code
Southfield MI 48034-

Purpose of Disbursement
CUTTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12920

Date of Disbursement

/ /

Amount of Each Disbursement this Period

47.09

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CUTTING

SUBTOTAL of Disbursements This Page (optional)

1607.09

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. U.S. Postmaster

Mailing Address 22200 W. Eleven Mile Road

City State Zip Code
Southfield MI 48037-9998

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12919

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1560.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

B. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12790

Date of Disbursement

/ /

Amount of Each Disbursement this Period

66.36

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12795

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2067.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

2133.36

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. U.S. Postmaster

Mailing Address 22200 W. Eleven Mile Road

City State Zip Code
Southfield MI 48037-9998

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12796

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2067.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

B. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12792

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2067.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. U.S. Postmaster

Mailing Address 22200 W. Eleven Mile Road

City State Zip Code
Southfield MI 48037-9998

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12793

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2067.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

SUBTOTAL of Disbursements This Page (optional)

2067.00

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12936

Date of Disbursement

/ /

Amount of Each Disbursement this Period

161.69

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Hogans Restaurant

Mailing Address 6450 Telegraph

City State Zip Code
Bloomfield Hills MI 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12938

Date of Disbursement

/ /

Amount of Each Disbursement this Period

63.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: MEALS

Full Name (Last, First, Middle Initial)

C. Steves Deli

Mailing Address 6646 Telegraph Road

City State Zip Code
Bloomfield Hills MI 48301-

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12937

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59.88

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional)

161.69

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Brian Watson

Mailing Address 31061 Woodstone Lane, #155

City State Zip Code
Novi MI 48377-Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12803

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	6

Amount of Each Disbursement this Period

975.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. U.S. Postmaster

Mailing Address 22200 W. Eleven Mile Road

City State Zip Code
Southfield MI 48037-9998Purpose of Disbursement
POSTAGE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12804

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	6

Amount of Each Disbursement this Period

975.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

C. Heather Wilson

Mailing Address 3006 Laurel Ave.

City State Zip Code
Cheverly MD 20785-Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12836

Date of Disbursement

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

Amount of Each Disbursement this Period

271.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

1246.30

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Enterprise Rent A Car

Mailing Address 330 Lucas Drive

City
Detroit

State
MI

Zip Code
48242-

Purpose of Disbursement
CAR RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12837

Date of Disbursement

/ /

Amount of Each Disbursement this Period

122.39

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CAR RENTAL

Full Name (Last, First, Middle Initial)

B. Ms. Elif Wisecup

Mailing Address 1772 Washington

City
Birmingham

State
MI

Zip Code
48009-

Purpose of Disbursement
AD DESIGN

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12636

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

AD DESIGN

Full Name (Last, First, Middle Initial)

C. Trent Wisecup

Mailing Address 1772 Washington

City
Birmingham

State
MI

Zip Code
48009-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12625

Date of Disbursement

/ /

Amount of Each Disbursement this Period

615.59

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

1115.59

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Ron Rose Productions

Mailing Address 29277 Southfield

City
Southfield

State
MI

Zip Code
48076-

Purpose of Disbursement
TV & RADIO PRODUCTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12626

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TV & RADIO PRODUCTI-
ON

Full Name (Last, First, Middle Initial)

B. Trent Wisecup

Mailing Address 1772 Washington

City
Birmingham

State
MI

Zip Code
48009-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12921

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Ron Rose Productions

Mailing Address 29277 Southfield

City
Southfield

State
MI

Zip Code
48076-

Purpose of Disbursement
TV & RADIO PRODUCTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12922

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TV & RADIO PRODUCTI-
ON

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Wisecup Consulting, LLC

Mailing Address 1772 Washington Blvd

City
BirminghamState
MIZip Code
48009-Purpose of Disbursement
CONSULTING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60728.E12594

Date of Disbursement

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

Amount of Each Disbursement this Period

7500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CONSULTING FEE

Full Name (Last, First, Middle Initial)

B. Wisecup Consulting, LLC

Mailing Address 1772 Washington Blvd

City
BirminghamState
MIZip Code
48009-Purpose of Disbursement
CONSULTING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12624

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	6

Amount of Each Disbursement this Period

2641.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CONSULTING FEE

Full Name (Last, First, Middle Initial)

C. Wisecup Consulting, LLC

Mailing Address 1772 Washington Blvd

City
BirminghamState
MIZip Code
48009-Purpose of Disbursement
CONSULTING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12635

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	6

Amount of Each Disbursement this Period

4756.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CONSULTING FEE

SUBTOTAL of Disbursements This Page (optional)

14897.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Wisecup Consulting, LLC

Mailing Address 1772 Washington Blvd

City Birmingham State MI Zip Code 48009-

Purpose of Disbursement
CONSULTING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61013.E12756

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CONSULTING FEE

Full Name (Last, First, Middle Initial)

B. Wisecup Consulting, LLC

Mailing Address 1772 Washington Blvd

City Birmingham State MI Zip Code 48009-

Purpose of Disbursement
CONSULTING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61013.E12935

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2391.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CONSULTING FEE

Full Name (Last, First, Middle Initial)

C. Robert Wyatt

Mailing Address 38121 Spring Lane

City Farmington Hills State MI Zip Code 48331-

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60807.E12612

Date of Disbursement

/ /

Amount of Each Disbursement this Period

881.99

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

10772.99

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Robert Wyatt

Mailing Address 38121 Spring Lane

City
Farmington Hills

State
MI

Zip Code
48331-

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 200012681

Date of Disbursement

/ /

Amount of Each Disbursement this Period

972.77

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

B. Robert Wyatt

Mailing Address 38121 Spring Lane

City
Farmington Hills

State
MI

Zip Code
48331-

Purpose of Disbursement
FAST FOOD MEALS FOR VOLUNTEERS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61013.E12832

Date of Disbursement

/ /

Amount of Each Disbursement this Period

130.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FAST FOOD MEALS FOR VOLUNTEERS

Full Name (Last, First, Middle Initial)

C. Robert Wyatt

Mailing Address 38121 Spring Lane

City
Farmington Hills

State
MI

Zip Code
48331-

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61013.E12743

Date of Disbursement

/ /

Amount of Each Disbursement this Period

789.43

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

1892.20

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. Robert Wyatt

Mailing Address 38121 Spring Lane

City
Farmington HillsState
MIZip Code
48331-Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12744

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	6

Amount of Each Disbursement this Period

759.17

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

B. Robert Wyatt

Mailing Address 38121 Spring Lane

City
Farmington HillsState
MIZip Code
48331-Purpose of Disbursement
PARKING & FOOD REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12899

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	6

Amount of Each Disbursement this Period

45.62

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PARKING & FOOD REIMBURSEMENT

Full Name (Last, First, Middle Initial)

C. Robert Wyatt

Mailing Address 38121 Spring Lane

City
Farmington HillsState
MIZip Code
48331-Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12798

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Amount of Each Disbursement this Period

839.27

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)

1644.06

TOTAL This Period (last page this line number only)

645460.05

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)

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

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NAME OF COMMITTEE (In Full)

Knollenberg for Congress Committee

Full Name (Last, First, Middle Initial)

A. National Republican Congressional Com.

Mailing Address 320 First Street, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
TRANSFER OF EXCESS FUNDS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12794

Date of Disbursement

/ /

Amount of Each Disbursement this Period

111000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. National Republican Congressional Com.

Mailing Address 320 First Street, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
TRANSFER OF EXCESS FUNDS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61013.E12759

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. North Oakland Republican Club

Mailing Address 4470 Motorway

City Waterford State MI Zip Code 48328-

Purpose of Disbursement
TICKETS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60807.E12613

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

121200.00

TOTAL This Period (last page this line number only)

	17		18		19a		19b
	20a		20b		20c	X	21

FEC Schedule B (Form 3) Rev. 02/2003