

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

OUTSIDER PAC

ADDRESS (number and street) **25 WEST 8TH STREET**

SUITE 300

Check if different than previously reported. (ACC) **HOLLAND MI 49423**

2. **FEC IDENTIFICATION NUMBER** **C** **C00678920**

3. IS THIS REPORT **NEW (N)** OR **AMENDED (A)**

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Jan 31 (YE)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)

(c) 12-Day **PRE-Election** Report for the: **Primary (12P)** **General (12G)** **Runoff (12R)**

Convention (12C) **Special (12S)**

Election on **08 / 07 / 2018** in the State of **MI**

(d) 30-Day **POST-Election** Report for the: **General (30G)** **Runoff (30R)** **Special (30S)**

Election on **/ /** in the State of

5. Covering Period **07 / 01 / 2018** through **07 / 18 / 2018**

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

JULIE, DOZIER, , ,

Type or Print Name of Treasurer

Signature of Treasurer **JULIE, DOZIER, , ,** *[Electronically Filed]* Date **07 / 26 / 2018**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

OUTSIDER PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="145.35"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="320000.00"/>	<input type="text" value="320150.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="320145.35"/>	<input type="text" value="320150.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="262998.50"/>	<input type="text" value="263003.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="57146.85"/>	<input type="text" value="57146.85"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 05/2016)

Write or Type Committee Name

OUTSIDER PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	320000.00	320000.00
(ii) Unitemized	0.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	320000.00	320150.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	320000.00	320150.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	320000.00	320150.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	320000.00	320150.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	52998.50	53003.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	52998.50	53003.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	210000.00	210000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	262998.50	263003.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	262998.50	263003.15

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	320000.00	320150.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	320000.00	320150.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	52998.50	53003.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	52998.50	53003.15

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
OUTSIDER PAC

A. ALTICOR INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30600 TELEGRAPH ROAD
SUITE 2345

City BINGHAM FARMS State MI Zip Code 48025

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2018

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. HAWORTH, INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address ONE HAWORTH CENTER

City HOLLAND State MI Zip Code 49423

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2018

Transaction ID : SA11AI.4125

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. PARFET, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15570 NORTHWOOD LANE

City HICKORY CORNERS State MI Zip Code 49060

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2018

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
OUTSIDER PAC

A. SNOW PHIPPS GROUP, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 667 MADISON AVE
 18TH FL
 City NEW YORK State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2018
Transaction ID : SA11AI.4122
 Amount of Each Receipt this Period
 20000.00
 Memo Item
CONTRIBUTION

B. TUBERGEN, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1911 EGYPT VALLEY AVENUE NE
 City ADA State MI Zip Code 49301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RDV CORPORATION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2018
Transaction ID : SA11AI.4119
 Amount of Each Receipt this Period
 25000.00
 Memo Item
CONTRIBUTION

C. UIHLEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 ULINE CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2018
Transaction ID : SA11AI.4118
 Amount of Each Receipt this Period
 200000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	245000.00
TOTAL This Period (last page this line number only).....	320000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
OUTSIDER PAC

A. CLARK HILL PLC

Full Name (Last, First, Middle Initial)

Mailing Address 1001 PENNSYLVANIA AVENUE NW
SUITE 1300 SOUTH

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 11 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4134

Amount of Each Disbursement this Period: 2473.50

Memo Item

B. CROSBY OTTENHOFF GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 611 PENNSYLVANIA AVE SE #267

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 11 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4135

Amount of Each Disbursement this Period: 525.00

Memo Item

C. GRAND RIVER STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 49378 CAMAROSA

City MACOMB State MI Zip Code 48044

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 11 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4133

Amount of Each Disbursement this Period: 10000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 12998.50

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
OUTSIDER PAC

Full Name (Last, First, Middle Initial) A. NATIONAL RESEARCH, INC.		Date of Disbursement MM / DD / YYYY 07 / 18 / 2018	
Mailing Address 17 VILLAGE COURT		FEC Identification Number C [] Transaction ID : SB21B.4136 Amount of Each Disbursement this Period [] 30000.00	
City HAZLET	State NJ	Zip Code 07730	Category/ Type []
Purpose of Disbursement SURVEY RESEARCH		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. PRUES-HECKER, LLC		Date of Disbursement MM / DD / YYYY 07 / 11 / 2018	
Mailing Address 1315 HARVARD RD		FEC Identification Number C [] Transaction ID : SB21B.4132 Amount of Each Disbursement this Period [] 10000.00	
City GROSSE POINTE	State MI	Zip Code 48230	Category/ Type []
Purpose of Disbursement FUNDRAISING CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	40000.00
TOTAL This Period (last page this line number only).....▶	52998.50

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) OUTSIDER PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00678920 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item GRP BUYING LLC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 16 / 2018 </div>
Mailing Address 3136 KINGSDALE CENTER, #136	Amount <div style="border: 1px solid black; padding: 2px;"> M M M M . 00 105000.00 </div>
City State Zip Code UPPER ARLINGTON OH 43221	
Purpose of Expenditure MEDIA PLACEMENT/MEDIA PRODUCTION	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose JAMES, JOHN, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: MI
Calendar Year-To-Date Per Election for Office Sought ▶	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item GRP BUYING LLC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M M M / D D D D / Y Y Y Y Y Y 07 / 16 / 2018 </div>
Mailing Address 3136 KINGSDALE CENTER, #136	Amount <div style="border: 1px solid black; padding: 2px;"> M M M M . 00 105000.00 </div>
City State Zip Code UPPER ARLINGTON OH 43221	
Purpose of Expenditure MEDIA PLACEMENT/MEDIA PRODUCTION	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose PENSLER, SANDY, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: MI
Calendar Year-To-Date Per Election for Office Sought ▶	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> M M M M . 00 210000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> M M M M . 00 0.00 </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> M M M M . 00 210000.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JULIE, DOZIER, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
 07 / 26 / 2018

Signature