



A. Form/Schedule : **F3XN**

In the unitemized receipts, no individual gave over \$200 in the reporting period 07/01/2010 to 09/30/-2010.

Transaction ID :

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		239360.91
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	171463.49									
(c) Total Receipts (from Line 19) .....	36783.13	138258.71								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	208246.62	377619.62								
7. Total Disbursements (from Line 31) .....	188829.46	358202.46								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	19417.16	19417.16								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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

Write or Type Committee Name

MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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) .....	0.00	1434.30
(ii) Unitemized .....	36540.48	135572.99
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	36540.48	137007.29
(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) .....	36540.48	137007.29
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.) .....	242.65	1251.42
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 Transfer (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)) .....	36783.13	138258.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	36783.13	138258.71

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	0.00	428.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	428.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20250.00	20250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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	20.00
(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	20.00
29. Other Disbursements.....	168579.46	337504.46
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	188829.46	358202.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	188829.46	358202.46

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	36540.48	137007.29
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	20.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	36540.48	136987.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	428.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	428.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 36  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
FARM BUREAU FAMILY CREDIT UNION  
Mailing Address P.O. BOX 30960  
City LANSING State MI Zip Code 48909-8460  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1098.35  
Date of Receipt 07 / 31 / 2010  
Transaction ID: SA17.6475  
Amount of Each Receipt this Period 89.58  
JULY 2010 INTEREST

**B.** Full Name (Last, First, Middle Initial)  
FARM BUREAU FAMILY CREDIT UNION  
Mailing Address P.O. BOX 30960  
City LANSING State MI Zip Code 48909-8460  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1188.18  
Date of Receipt 08 / 31 / 2010  
Transaction ID: SA17.6476  
Amount of Each Receipt this Period 89.83  
AUGUST 2010 INTEREST

**C.** Full Name (Last, First, Middle Initial)  
FARM BUREAU FAMILY CREDIT UNION  
Mailing Address P.O. BOX 30960  
City LANSING State MI Zip Code 48909-8460  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1251.42  
Date of Receipt 09 / 30 / 2010  
Transaction ID: SA17.6477  
Amount of Each Receipt this Period 63.24  
SEPTEMBER 2010 INTEREST

**SUBTOTAL** of Receipts This Page (optional) ..... ► 242.65  
**TOTAL** This Period (last page this line number only) ..... ► 242.65

# 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) BENISHEK FOR CONGRESS</p> <p>Mailing Address 802 PENTOGA TRAIL</p> <p>City CRYSTAL FALLS State MI Zip Code 49920</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name DANIEL J BENISHEK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6367</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) HUIZENGA FOR CONGRESS</p> <p>Mailing Address 441 WILLIAM COURT</p> <p>City ZEELAND State MI Zip Code 49464</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name HUIZENGA FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6401</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) HUIZENGA FOR CONGRESS</p> <p>Mailing Address 441 WILLIAM COURT</p> <p>City ZEELAND State MI Zip Code 49464</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name HUIZENGA FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6449</p> <p>Date of Disbursement 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>

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

7750.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN KUPIEC FOR CONGRESS COMMITTEE	Transaction ID: SB23.6414 Date of Disbursement
	Mailing Address 5054 W BRISTOL ROAD SUITE A	<input type="text" value="09"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City FLINT State MI Zip Code 48507	Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISER	<input type="text" value="5000.00"/>
	Candidate Name JOHN KUPIEC	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JUSTIN AMASH FOR CONGRESS	Transaction ID: SB23.6365 Date of Disbursement
	Mailing Address 1500 E BELTLINE AVENUE SE SUITE 250	<input type="text" value="09"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City GRAND RAPIDS State MI Zip Code 49506	Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISER	<input type="text" value="2500.00"/>
	Candidate Name JUSTIN AMASH	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ROB STEELE FOR CONGRESS	Transaction ID: SB23.6441 Date of Disbursement
	Mailing Address 320 N MAIN STREET SUITE 104	<input type="text" value="09"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City ANN ARBOR State MI Zip Code 48104	Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISER	<input type="text" value="5000.00"/>
	Candidate Name ROBERT L STEELE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="12500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="20250.00"/>

**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)

PAGE 10 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) AL PSCHOLKA FOR STATE REPRESENTATIVE COMMITTEE <hr/> Mailing Address 5810 LONGHORN TRAIL <hr/> City STEVENSVILLE State MI Zip Code 49127 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6429 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) ARIC NESBITT FOR STATE REPRESENTATIVE <hr/> Mailing Address 29050 94TH AVENUE <hr/> City MARCELLUS State MI Zip Code 49067 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6360 Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2010
	Amount of Each Disbursement this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) BEN GLARDON FOR STATE REPRESENTATIVE <hr/> Mailing Address PO BOX 1746 <hr/> City OWOSSO State MI Zip Code 48867 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6387 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 2500.00

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

3500.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
BILL SCHUETTE FOR ATTORNEY GENERAL

Mailing Address 5915 EASTMAN AVENUE  
SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6433  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
BILL SCHUETTE FOR ATTORNEY GENERAL

Mailing Address 5915 EASTMAN AVENUE  
SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6460  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
BOB GENETSKI FOR STATE REPRESENTATIVE

Mailing Address 107 PARK STREET

City SAUGATUCK State MI Zip Code 49453

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6384  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) BRUCE CASWELL FOR SENATE</p> <p>Mailing Address 8940 E BACON ROAD</p> <p>City HILLSDALE State MI Zip Code 49242</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6374</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) CINDY DENBY FOR STATE REP COMM</p> <p>Mailing Address 9787 AMANDA DRIVE</p> <p>City FOWLERVILLE State MI Zip Code 48836</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6379</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) CITIZENS SUPPORTING MIKE NOFS</p> <p>Mailing Address 5420 BECKLEY RD PMB 350</p> <p>City BATTLE CREEK State MI Zip Code 49015</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6419</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

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

1500.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CITIZENS TO ELECT DEB SHAUGHNESSY STATE REP</p> <p>Mailing Address 956 CHADS WAY</p> <p>City CHARLOTTE State MI Zip Code 48813</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6437</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4000.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT BRIAN CALLEY</p> <p>Mailing Address 10198 BUTLER RD</p> <p>City PORTLAND State MI Zip Code 48875</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6458</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DALE W ZORN</p> <p>Mailing Address PO BOX 2</p> <p>City ISA State MI Zip Code 48140</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6444</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4000.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="10000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DAVID NATHAN	Transaction ID: SB29.6456 Date of Disbursement
	Mailing Address 18701 GRAND RIVER AVE #270	<input type="text" value="08"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City State Zip Code DETROIT MI 48223	Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISER	<input type="text" value="500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT JASE BOLGER	Transaction ID: SB29.6368 Date of Disbursement
	Mailing Address PO BOX 638	<input type="text" value="09"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City State Zip Code MARSHALL MI 49068	Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISER	<input type="text" value="500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT JOEL JOHNSON	Transaction ID: SB29.6407 Date of Disbursement
	Mailing Address PO BOX 280	<input type="text" value="09"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City State Zip Code CLARE MI 48617	Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISER	<input type="text" value="2500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>COMMITTEE TO ELECT JON BUMSTEAD</b></p> <p>Mailing Address 2186 E 72ND STREET</p> <p>City NEWAYGO State MI Zip Code 49337</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6351</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>COMMITTEE TO ELECT JON BUMSTEAD</b></p> <p>Mailing Address 2186 E 72ND STREET</p> <p>City NEWAYGO State MI Zip Code 49337</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6372</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>COMMITTEE TO ELECT KEVIN DALEY</b></p> <p>Mailing Address 3387 DALEY RD</p> <p>City LUM State MI Zip Code 48412</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6377</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

**3150.00**

**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)

PAGE 16 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT KURT HEISE</p> <p>Mailing Address 9054 MUIRLAND</p> <p>City PLYMOUTH State MI Zip Code 48170</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6354</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT KURT HEISE</p> <p>Mailing Address 9054 MUIRLAND</p> <p>City PLYMOUTH State MI Zip Code 48170</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6393</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3900.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT MARK QUIMET</p> <p>Mailing Address 310 N MAIN STREET SUITE 160</p> <p>City CHELSEA State MI Zip Code 48118</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6341</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>

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

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT MARK OUIMET

Mailing Address 310 N MAIN STREET  
SUITE 160

City CHELSEA State MI Zip Code 48118

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6422

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT MATT LORI STATE REPRESENTATIVE

Mailing Address 14941 ROBERTS SHORES DR

City CONSTANTINE State MI Zip Code 49042

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6416

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT MIKE SHIRKEY

Mailing Address 11757 SUTFIN ROAD

City CLARK LAKE State MI Zip Code 49234

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6345

Date of Disbursement

08 / 24 / 2010

Amount of Each Disbursement this Period

500.00

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

3500.00

**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)

PAGE 18 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT MIKE SHIRKEY</p> <p>Mailing Address 11757 SUTFIN ROAD</p> <p>City CLARK LAKE State MI Zip Code 49234</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6438</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3500.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT PETER LUND FOR STATE REP</p> <p>Mailing Address 6881 MUIRFIELD</p> <p>City SHELBY TWP State MI Zip Code 48316</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6348</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT PETER LUND STATE REP</p> <p>Mailing Address 6881 MUIRFIELD</p> <p>City SHELBY TWP State MI Zip Code 48316</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6418</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="4250.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# 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)

PAGE 19 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT PETER PETTALIA</p> <p>Mailing Address 11617 BELL BAY RD</p> <p>City PRESQUE ISLE State MI Zip Code 49707</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6424</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT PHIL POTVIN</p> <p>Mailing Address 129 PETRIE ROAD</p> <p>City CADILLAC State MI Zip Code 49601</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6426</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RAY FRANZ STATE REPRESENTATIVE</p> <p>Mailing Address PO BOX 25</p> <p>City ONEKAMA State MI Zip Code 49675</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6382</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3000.00"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="8500.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**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)

PAGE 20 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) DAVE HILDENBRAND FOR STATE SENATE</p> <p>Mailing Address 2700 TIMPSON AVE SE</p> <p>City LOWELL State MI Zip Code 49331</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6395</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4800.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) DAVE ROBERTSON FOR STATE SENATE</p> <p>Mailing Address PO BOX 181</p> <p>City GRAND BLANC State MI Zip Code 48480</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6431</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) DAVID AGEMA FOR STATE REPRESENTATIVE COMMITTEE</p> <p>Mailing Address 3299 TOMAHAWK</p> <p>City GRANDVILLE State MI Zip Code 49418</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6363</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>

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

**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)

PAGE 21 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
DAVID HILDENBRAND FOR STATE SENATE

Transaction ID: SB29.6356

Date of Disbursement

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

Mailing Address 2700 TIMPSON AVE SE

Amount of Each Disbursement this Period

200.00
--------

City State Zip Code  
LOWELL MI 49331

Purpose of Disbursement  
FUNDRAISER

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
DON NUGENT FOR MSU TRUSTEE

Transaction ID: SB29.6342

Date of Disbursement

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

Mailing Address 1225 FORRESTER ROAD

Amount of Each Disbursement this Period

250.00
--------

City State Zip Code  
FRANKFORT MI 49635

Purpose of Disbursement  
FUNDRAISER

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
DON NUGENT FOR MSU TRUSTEE

Transaction ID: SB29.6343

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

Mailing Address 1225 FORRESTER ROAD

Amount of Each Disbursement this Period

5000.00
---------

City State Zip Code  
FRANKFORT MI 49635

Purpose of Disbursement  
FUNDRAISER

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

5450.00
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**TOTAL** This Period (last page this line number only) ..... ►

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# 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) FRANK FOSTER FOR HOUSE</p> <p>Mailing Address PO BOX 452</p> <p>City PELLSTON State MI Zip Code 49769</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6381</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) FRIENDS OF HOLLY HUGHES</p> <p>Mailing Address 8801 LEHMAN</p> <p>City MONTAGUE State MI Zip Code 49437</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6399</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) FRIENDS OF JIM STAMAS</p> <p>Mailing Address 5915 EASTMAN AVE STE 100</p> <p>City MIDLAND State MI Zip Code 48640</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6439</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

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

5500.00

**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)

PAGE 23 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF KATE SEGAL	Transaction ID: SB29.6436 Date of Disbursement
	Mailing Address 108 PINEHURST LANE	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City BATTLE CREEK State MI Zip Code 49015	Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISER	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) FRIENDS OF KEN HORN	Transaction ID: SB29.6396 Date of Disbursement
	Mailing Address 516 S MAIN STREET	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City FRANKENMUTH State MI Zip Code 48734	Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISER	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) FRIENDS OF MIKE KOWALL FOR STATE SENATE	Transaction ID: SB29.6448 Date of Disbursement
	Mailing Address 2333 CUMBERLAND DR	<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City WHITE LAKE State MI Zip Code 48383	Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISER	<input type="text" value="200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1200.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

PAGE 24 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF RICHARD HAMMEL	Transaction ID: SB29.6391 Date of Disbursement 09 / 23 / 2010
	Mailing Address 6343 W CLOSVIS AVE	Amount of Each Disbursement this Period 500.00
	City FLUSHING State MI Zip Code 48433	
	Purpose of Disbursement FUNDRAISER Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) FRIENDS OF ROGER KAHN FOR SENATE	Transaction ID: SB29.6410 Date of Disbursement 09 / 23 / 2010
	Mailing Address PO BOX 1627 3177 MONTICELLO	Amount of Each Disbursement this Period 500.00
	City SAGINAW State MI Zip Code 48603	
	Purpose of Disbursement FUNDRAISER Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) FRIENDS TO ELECT BRUCE R RENDON	Transaction ID: SB29.6371 Date of Disbursement 09 / 23 / 2010
	Mailing Address 4833 RIVERWOODS ROAD	Amount of Each Disbursement this Period 2500.00
	City LAKE CITY State MI Zip Code 49651	
	Purpose of Disbursement FUNDRAISER Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3500.00

**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)

PAGE 25 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS TO ELECT DIAN SLAVENS	Transaction ID: SB29.6358 Date of Disbursement																			
	Mailing Address PO BOX 871212	<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>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	7		2	0	1	0												
	City CANTON State MI Zip Code 48187	Amount of Each Disbursement this Period																			
	Purpose of Disbursement FUNDRAISER	<table border="1"><tr><td>150.00</td></tr></table>	150.00																		
150.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) FRIENDS TO ELECT SHARON TYLER	Transaction ID: SB29.6442 Date of Disbursement																			
	Mailing Address PO BOX 964	<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>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	3		2	0	1	0												
	City NILES State MI Zip Code 49120	Amount of Each Disbursement this Period																			
	Purpose of Disbursement FUNDRAISER	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) GOEFF HANSEN FOR SENATE	Transaction ID: SB29.6392 Date of Disbursement																			
	Mailing Address 4635 N 68TH AVE	<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>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	3		2	0	1	0												
	City HART State MI Zip Code 49420	Amount of Each Disbursement this Period																			
	Purpose of Disbursement FUNDRAISER	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>5650.00</td></tr></table>	5650.00
5650.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# 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)

PAGE 26 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) JENNIFER HAASE FOR STATE REPRESENTATIVE</p> <p>Mailing Address 34886 MAPLEWOOD LANE</p> <p>City RICHMOND State MI Zip Code 48062</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6390</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) JOE HUNE FOR STATE SENATE</p> <p>Mailing Address 4849 HOGBACK RD</p> <p>City FOWLERVILLE State MI Zip Code 48836</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6346</p> <p>Date of Disbursement 08 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JOHN MOOLENAAR FOR STATE SENATE</p> <p>Mailing Address 5915 EASTMAN AVE STE 100</p> <p>City MIDLAND State MI Zip Code 48640</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6355</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p>

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

1450.00

**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)

PAGE 27 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) JOHN PAPPAGEORGE FOR STATE SENATE</p> <p>Mailing Address 537 PARIS AVENUE</p> <p>City LANSING State MI Zip Code 48910</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6423</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) JOHN PROOS FOR STATE SENATE</p> <p>Mailing Address PO BOX 271</p> <p>City ST JOSEPH State MI Zip Code 49085</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6427</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JUD GILBERT FOR STATE HOUSE</p> <p>Mailing Address 1414 ST CLAIR RIVER DRIVE</p> <p>City ALGONAC State MI Zip Code 48001</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6386</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1500.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
JUDY EMMONS FOR STATE SENATE

Mailing Address 506 E CARSON CITY ROAD

City CARSON CITY State MI Zip Code 49331

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6353

Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
JUDY EMMONS FOR STATE SENATE

Mailing Address 506 E CARSON CITY ROAD

City CARSON CITY State MI Zip Code 49331

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6380

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
KENNETH KURTZ FOR STATE REPRESENTATIVE

Mailing Address 233 W PEARL ST

City COLDWATER State MI Zip Code 49036

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6415

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3100.00

**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)

PAGE 29 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) KEVIN COTTER FOR STATE REPRESENTATIVE</p> <p>Mailing Address 2767 ELAND COURT</p> <p>City MT PLEASANT State MI Zip Code 48858</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6376</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) MARK C JANSEN FOR STATE SENATE</p> <p>Mailing Address 388 ANDOVER SE</p> <p>City KENTWOOD State MI Zip Code 49548</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6404</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MARTIN GRIFFIN FOR STATE REPRESENTATIVE</p> <p>Mailing Address 705 S GRINNELL</p> <p>City JACKSON State MI Zip Code 49203</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6388</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4800.00"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="7800.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MARTY KNOLLENBERG FOR STATE REP

Mailing Address 198 E BIG BEAVER

City State Zip Code  
TROY MI 48083

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB29.6413

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
MARY BETH KELLY FOR JUSTICE

Mailing Address 320 N MAIN STREET  
SUITE 104

City State Zip Code  
ANN ARBOR MI 48104

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB29.6412

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

10000.00

**C.** Full Name (Last, First, Middle Initial)  
MATT HUUKI FOR STATE REPRESENTATIVE

Mailing Address 13895 ROVA ROAD

City State Zip Code  
ATLANTIC MINE MI 49905

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB29.6403

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

15500.00

**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)

PAGE 31 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MICHIGAN FARM BUREAU	Transaction ID: SB29.6446 Date of Disbursement																			
	Mailing Address 7373 W. SAGINAW HWY., P.O. BOX 30960	<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>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	7		2	0	1	0												
	City LANSING State MI Zip Code 48909-8460	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PRINTING	<table border="1"><tr><td>1861.77</td></tr></table>	1861.77																		
1861.77																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) DON NUGENT FOR MSU TRUSTEE	Transaction ID: SB29.6446.0 Date of Disbursement																			
	Mailing Address 1225 FORRESTER ROAD	<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>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	7		2	0	1	0												
	City FRANKFORT State MI Zip Code 49635	Amount of Each Disbursement this Period																			
	Purpose of Disbursement IN-KIND PRINTING	<table border="1"><tr><td>1783.73</td></tr></table>	1783.73																		
1783.73																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) ROBERT YOUNG FOR JUSTICE	Transaction ID: SB29.6446.1 Date of Disbursement																			
	Mailing Address 2843 E GRAND RIVER #222	<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>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	7		2	0	1	0												
	City EAST LANSING State MI Zip Code 48823	Amount of Each Disbursement this Period																			
	Purpose of Disbursement IN-KIND PRINTING	<table border="1"><tr><td>78.04</td></tr></table>	78.04																		
78.04																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>1861.77</td></tr></table>	1861.77
1861.77		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MIKE HUCKLEBERRY FOR STATE REPRESENTATIVE

Mailing Address 1738 VINING ROAD

City GREENVILLE State MI Zip Code 48838

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6398

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
NANCY JENKINS FOR STATE REPRESENTATIVE

Mailing Address 9417 W CARLETON ROAD

City CLAYTON State MI Zip Code 49235

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6406

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

4800.00

**C.** Full Name (Last, First, Middle Initial)  
NANCY JENKINS FOR STATE REPRESENTATIVE

Mailing Address 9417 W CARLETON ROAD

City CLAYTON State MI Zip Code 49235

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6447

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

200.00

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

7500.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
PAUL OPSOMMER FOR STATE REPRESENTATIVE

Mailing Address 315 EAST MAIN STREET

City DEWITT State MI Zip Code 48820

Purpose of Disbursement FUNDRAISER

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB29.6421

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
R.A. DINKEL & ASSOCIATES INC

Mailing Address PO BOX 700

City HOLT State MI Zip Code 48842

Purpose of Disbursement IN-KIND PRINTING

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB29.6349

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
ROBERT YOUNG FOR JUSTICE

Mailing Address 2843 E GRAND RIVER #222

City EAST LANSING State MI Zip Code 48823

Purpose of Disbursement IN-KIND PRINTING

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB29.6349.0

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

**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)

PAGE 34 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) DON NUGENT FOR MSU TRUSTEE</p> <p>Mailing Address 1225 FORRESTER ROAD</p> <p>City FRANKFORT State MI Zip Code 49635</p> <p>Purpose of Disbursement IN-KIND PRINTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6349.1</p> <p>Date of Disbursement 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 183.84</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) RANDY RICHARDVILLE FOR SENATE</p> <p>Mailing Address PO BOX 1631</p> <p>City MONROE State MI Zip Code 48161</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6430</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) RICK OLSON-THE VOICE FOR THE PEOPLE</p> <p>Mailing Address 525 JUDD ROAD</p> <p>City SALINE State MI Zip Code 48176</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6362</p> <p>Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 175.00</p>

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

**675.00**

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) RICK OLSON - THE VOICE FOR THE PEOPLE Mailing Address 525 JUDD RD City SALINE State MI Zip Code 48176 Purpose of Disbursement FUNDRAISER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6420 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 3825.00
<b>B.</b> Full Name (Last, First, Middle Initial) ROBERT YOUNG FOR JUSTICE Mailing Address 2843 E GRAND RIVER #222 City EAST LANSING State MI Zip Code 48823 Purpose of Disbursement FUNDRAISER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6443 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 18700.00
<b>C.</b> Full Name (Last, First, Middle Initial) RUTH JOHNSON FOR MICHIGAN Mailing Address 11750 EAGLE ROAD City DAVISBURG State MI Zip Code 48350 Purpose of Disbursement FUNDRAISER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6409 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00

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

23525.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
THE COMMITTEE TO ELECT TERRY BROWN

Mailing Address 107 CLARA ST

City PIGEON State MI Zip Code 48755

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6369

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
TOM CASPERSON FOR STATE SENATE

Mailing Address 921 5TH AVE SOUTH

City ESCANABA State MI Zip Code 49829

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6373

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
TONYA SCHUITMAKER FOR STATE SENATE

Mailing Address PO BOX 1116

City PORTAGE State MI Zip Code 49081

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6434

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

10500.00

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

168579.46