

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Brodhead for Senate		2. FEC IDENTIFICATION NUMBER C00284893
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 17321 Telegraph Road		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CITY, STATE and ZIP CODE Detroit MI 48219	STATE/DISTRICT Michigan	

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
<input type="checkbox"/> July 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election of _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Termination Report
<input checked="" type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	

This report contains activity for ☒ Primary Election ☐ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

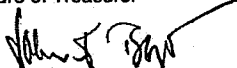
5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>10-22-93</u> through <u>12-31-93</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	114,080.00	114,080.00
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	114,080.00	114,080.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).	15,273.96	15,273.96
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a)).	15,273.96	15,273.96
8. Cash on Hand at Close of Reporting Period (from Line 27)	98,682.41	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-376-3120
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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

Type or Print Name of Treasurer

John F. Boyd

Signature of Treasurer



Date

January 16, 1993

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

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) Brodhead for Senate		Report Covering the Period: From: 10-22-93 To: 12-31-93	
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)		81,875.00	
(ii) Unitemized		30,755.00	
(iii) Total of contributions from individuals		112,630.00	112,630.00
(b) Political Party Committees		0	
(c) Other Political Committees (such as PACs)		450.00	450.00
(d) The Candidate		1,000.00	1,000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))		114,080.00	114,080.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.		0	0
13. LOANS:			
(a) Made or Guaranteed by the Candidate		0	0
(b) All Other Loans		0	0
(c) TOTAL LOANS (add 13(a) and (b))		0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)		4.53	4.53
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		114,084.53	114,084.53
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		15,273.96	15,273.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.		0	0
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate		0	0
(b) Of All Other Loans		0	0
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		0	0
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		0	0
(b) Political Party Committees		0	0
(c) Other Political Committees (such as PACs)		0	0
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		0	0
21. OTHER DISBURSEMENTS		128.16	128.16
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21).		15,402.12	15,402.12
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$	0
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$	114,084.53
25. SUBTOTAL (add Line 23 and Line 24)		\$	114,084.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).		\$	15,402.12
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25).		\$	98,682.41

94020050636

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 19
FOR LINE NUMBER 11 (a) (1)

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

NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Gerald Acker 28588 Northwestern Hwy., Suite 444 Southfield MI 48034 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Gerald H. Acker P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-14-93 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Patrick J. Alandt 1771 Burns Detroit MI 48214 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-5-93 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code James L. Allen 900 Marquette Bldg. Detroit MI 48226 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-7-93 250.00	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Janet Aronoff 3950 Franklin Road Bloomfield Hills MI 48302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 11-18-93 1,000.00	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Don H. Barden 18240 Fairway Detroit MI 48221 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Barden Communications Inc. Occupation Chairman & President Aggregate Year-to-Date > \$	Date (month, day, year) 12-14-93 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Patrick M. Barrett 340 S. Glenhurst Birmingham MI 48009 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-30-93 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Michael J. Barton 41635 Chattman Novi MI 48375 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-10-93 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

94020050637

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 2 OF 19
FOR LINE NUMBER 11 (a) (1)

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code George Bedrosian 3000 Cadillac Tower Detroit MI 48226	Name of Employer Goodman Eden Millender & Bedrosian Occupation attorney	Date (month, day, year) 12-20-93	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code William A. Beluzo, Jr. 1695 Woodward Ave., Suite 210 Bloomfield Hills MI 48302	Name of Employer Plunkett & Cooney P.C. Occupation attorney	Date (month, day, year) 11-4-93	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code James C. Benfield 519 New York Ave. Takoma Park MD 20902	Name of Employer Bracy Williams & Co. Occupation public affairs consultant	Date (month, day, year) 11-1-93	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code Karen M. Bernacki 7411 Old Mill Road Bloomfield Hills MI 48301	Name of Employer Occupation homemaker	Date (month, day, year) 11-11-93	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code John F. Boyd 33136 Hampshire Road Livonia MI 48154	Name of Employer Occupation retired	Date (month, day, year) 12-7-93	Amount of Each Receipt this Period 900.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 900.00		
F. Full Name, Mailing Address and ZIP Code Nancy M. Bracy 1258 Beverly McLean VA 22101	Name of Employer Occupation homemaker	Date (month, day, year) 12-6-93	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code Terrence L. Bracy 1258 Beverly McLean VA 22101	Name of Employer Bracy Williams & Co. Occupation public affairs consultant	Date (month, day, year) 11-1-93	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 3 OF 19
FOR LINE NUMBER 11 (a) (1)

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Paul L. Brakora 1633 Cranbrook Troy MI 48084 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation Director of Administration Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-7-93	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Mary Jo Braun 17434 Cameron Drive Northville MI 48167 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer MCN Corporation Occupation Vice President Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12-20-93	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code Mark Brewer 21371 Cass Avenue Clinton Twp. MI 48036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sachs Waldman Occupation attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12-16-93	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Frank Brochert 6195 Dakota Circle Bloomfield Hills MI 48301 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11-6-93	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Agnes M. Brodhead 2645 University Blvd. #102 University Heights OH 44118 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation retired Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 10-29-93	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code James P. Brown 4807 Cumberland Chevy Chase MD 20815 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bracy Williams & Co. Occupation transportation consultant Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11-1-93	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code A. C. Buesser 725 South Adams, Suite 85 Birmingham MI 48009 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12-10-93	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

94020050639

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 4	OF 19
FOR LINE NUMBER 11 (a) (1)	

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>James W. Burdick 1760 Telegraph Road, Suite 300 Bloomfield Hills MI 48302</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>James W. Burdick P.C.</p> <p>Occupation attorney</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year)</p> <p>12-17-93</p>	<p>Amount of Each Receipt this Period</p> <p>250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>David W. Christensen 3195 Ayrshire Bloomfield Hills MI 48302</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Charfoos & Christensen P.C.</p> <p>Occupation attorney</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year)</p> <p>12-16-93</p>	<p>Amount of Each Receipt this Period</p> <p>1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Maureen Smith Christensen 1095 Roosevelt Street Plymouth MI 48170</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Hanlon, Becker</p> <p>Occupation attorney</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year)</p> <p>12-14-93</p>	<p>Amount of Each Receipt this Period</p> <p>250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Mary Ellen Clark 233 Dean Lane Grosse Pointe Farms MI 48236</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Plunkett & Cooney P.C.</p> <p>Occupation attorney</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year)</p> <p>12-3-93</p>	<p>Amount of Each Receipt this Period</p> <p>500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Feliciano Colista, Jr. 306 S. Washington St. Royal Oak MI 48067</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Colista Adams & Palmer P.C.</p> <p>Occupation attorney</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year)</p> <p>12-16-93</p>	<p>Amount of Each Receipt this Period</p> <p>250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Henry B. Cooney 20392 Ronsdale Beverly Hills MI 48025</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Plunkett & Cooney P.C.</p> <p>Occupation attorney</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year)</p> <p>11-18-93</p>	<p>Amount of Each Receipt this Period</p> <p>1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Michael G. Costello 1031 Home Lane Bloomfield Hills MI 48301</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Meadowbrook Insur. Co.</p> <p>Occupation attorney</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year)</p> <p>12-17-93</p>	<p>Amount of Each Receipt this Period</p> <p>250.00</p>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

94020050640

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary PagePAGE 5 OF 19
FOR LINE NUMBER
11 (a) (1)

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Mark H. Cousens 29331 Sharon Lane Southfield MI 48076 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation attorney Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 11-5-93 12-7-93	Amount of Each Receipt this Period 500.00 100.00
B. Full Name, Mailing Address and ZIP Code Owen J. Cummings 16642 Negaunee Redford MI 48240 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Cummings, McClorey Occupation attorney Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 12-16-93	Amount of Each Receipt this Period 350.00
C. Full Name, Mailing Address and ZIP Code Timothy J. Curtin 448 Cambridge Blvd. S. E. Grand Rapids MI 49506 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Varnum, Giddering, Howlett Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11-22-93	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code James I. DeGrazia 6660 Castle Drive Bloomfield Hills MI 48301 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer O'Connor, DeGrazia & Tamm Occupation attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12-16-93	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code Lawrence R. Donaldson 1117 3 Mile Road Grosse Pointe Park MI 48230 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11-6-93	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Walter E. Douglas 20035 Lichfield Detroit MI 48221 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Avis Ford, Inc. Occupation President Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 12-13-93	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Howard L. Dow 42023 Crestview Circle Northville MI 48167 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan Consolidated Gas Co. Occupation Vice President Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12-20-93	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE 6 OF 19
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Wallace L. Duncan 4451 North 33rd Arlington VA 22207 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Duncan & Weinberg Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-6-93 500.00	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Charles E. Feder 14434 Longacre Detroit MI 48227 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Charles E. Feder P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-14-93 250.00	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code Robert Z. Feldstein 30200 Telegraph Road, Suite 444 Bingham Farms MI 48025 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Baskin & Feldstein Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-19-93 1,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Michael J. Flynn 1440 Peck Muskegon MI 49443 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer McCroskey, Feldman, Cochran & Breck P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-13-93 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Robert Garvey 24825 Little Mack St. Clair Shores MI 48080 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Thomas, Garvey, Garvey & Sciotti P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-1-93 500.00	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Sandor M. Gelman 3001 W. Big Beaver, # 324 Troy MI 48084 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-16-93 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code James R. Geroux 347 E. Hickory Grove Bloomfield Hills MI 48304 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-10-93 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

94020050642

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Mary Ellen Glaser 2106 North Millwood Santa Ana CA 92701 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Univ. of So. California Occupation social worker Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-25-93 12-31-93	Amount of Each Receipt this Period 250.00 250.00
B. Full Name, Mailing Address and ZIP Code Jennifer M. Granholm 26406 Dundee Huntington Woods MI 48070 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer US Attorney Office Occupation attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12-11-93	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code William R. Gregory 3321 Lakeshore Drive Sault Ste. Marie MI 49783 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Edison Sault Electric Co. Occupation President Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12-14-93	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Gregory Gromek 1695 Woodward Ave., Suite 210 Bloomfield Hills, MI 48302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12-8-93	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Randall R. Hall 3121 Kernway Bloomfield Hills MI 48304 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-18-93	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code William J. Heaphy 1496 Waukazoo Holland MI 49424 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Vandever Garzia Occupation attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12-14-93	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code A. Benjamin Henson 6528 Red Oak Lane Troy MI 48098 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 11-12-93	Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A

ITEMIZED RECEIPTS

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

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Robert S. Hertzberg 31525 Nottingham Franklin MI 48025 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hertz, Schram & Saretsky P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-11-93 250.00	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and ZIP Code Stuart Hertzberg 5532 Lane Lake Bloomfield Hills MI 48302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Pepper, Hamilton & Scheetz Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-11-93 250.00	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code Otto J. Hetzel, Esq. Wayne State Univ. Law School Detroit MI 48202 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer WSU Law School Occupation Professor Aggregate Year-to-Date > \$	Date (month, day, year) 12-17-93 250.00	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Renze Hoeksema 43806 Brandywyne Canton MI 48187 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan Consolidated Gas Co. Occupation Director, Corp. Issues Aggregate Year-to-Date > \$	Date (month, day, year) 12-20-93 250.00	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code Lawrence Jackier 1533 N. Woodward Bloomfield Hills MI 48304 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Silver, Gould Elzelman Upfal Bean & Jackier Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-17-93 250.00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code Christine Jacobs 39 Briarwood Place Grosse Pointe Farms MI 48236 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation student Aggregate Year-to-Date > \$	Date (month, day, year) 10-29-93 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code John P. Jacobs 39 Briarwood Place Grosse Pointe Farms MI 48236 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer O'Leary, O'Leary Jacobs Mattson & Perry P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-1-93 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

94020050644

SCHEDULE A

ITEMIZED RECEIPTS

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

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Linda Jacobs 39 Briarwood Place Grosse Pointe Farms MI 48036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 11-1-93 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Daniel J. Jourdan 301 S. Reynolds, #208 Alexandria VA 22304 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer US House of Representatives Occupation legislative asst. Aggregate Year-to-Date > \$	Date (month, day, year) 12-6-93 250.00	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code J. Phillip Jourdan 15686 Northville Forest Drive Plymouth MI 48170 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Wayne Cnty. Circ. Court Occupation Judge Aggregate Year-to-Date > \$	Date (month, day, year) 12-6-93 250.00	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Nancy L. Kassab 3880 Lahser Road Bloomfield Hills MI 48302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation retired Aggregate Year-to-Date > \$	Date (month, day, year) 11-19-93 300.00	Amount of Each Receipt this Period 300.00
E. Full Name, Mailing Address and ZIP Code John B. Kemp 201 W. Big Beaver, Suite 600 Troy MI 48084 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Kemp, Klein Umphrey Endelman & Beer P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-18-93 250.00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code James R. Kohl 1034 Springfield Drive Northville MI 48167 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-8-93 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Judith V. Kohl 1034 Springfield Drive Northville MI 48167 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 11-7-93 1,000.00	Amount of Each Receipt this Period 1,000.00

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Herbert Lawson 4512 Walden Drive Bloomfield Hills MI 48301 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Windham Realty Group Occupation President Aggregate Year-to-Date > \$	Date (month, day, year) 10-31-93 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Charles M. Lax 4583 Fairway Ridge West Bloomfield MI 48323 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Maddin Hauser Wartell Roth Heller & Pesses Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-16-93 250.00	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code Wallace G. Long 1161 Audubon Grosse Pointe Farms MI 48230 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Cox & Hodgman Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-6-93 12-17-93 250.00 100.00 350.00	Amount of Each Receipt this Period 250.00 100.00
D. Full Name, Mailing Address and ZIP Code Joseph G. Lujan 4090 N. Rochester Road Rochester MI 48306 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-14-93 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Henry J. Maher 853 Baylor Road Rochester Hills MI 48309 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-24-93 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code P. Markey 6404 Brookside Drive Chevy Chase MD 20815 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Pat Markey & Associates Occupation consultant Aggregate Year-to-Date > \$	Date (month, day, year) 12-6-93 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code Robert H. Martin 1505 Ashford Lane Birmingham MI 48009 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10-25-93 12-17-93 500.00 200.00 700.00	Amount of Each Receipt this Period 500.00 200.00

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>Larry G. Mason 900 Marquette Bldg. Detroit MI 48226</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Plunkett & Cooney P.C.</p> <p>Occupation</p> <p>attorney</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>11-24-93</p>	<p>Amount of Each Receipt this Period</p> <p>500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Laurel McGiffert 20130 Marlowe Detroit MI 48235</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Plunkett & Cooney P.C.</p> <p>Occupation</p> <p>attorney</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>11-3-93</p>	<p>Amount of Each Receipt this Period</p> <p>1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Mark McGowan 5517 Foxridge Drive West Bloomfield MI 48322</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Plunkett & Cooney P.C.</p> <p>Occupation</p> <p>attorney</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>11-12-93</p>	<p>Amount of Each Receipt this Period</p> <p>1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Susan K. McNish 9130 Woodberry Plymouth MI 48170</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Michigan Consolidated Gas Co.</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>12-20-93</p>	<p>Amount of Each Receipt this Period</p> <p>250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>John E. Mogk 1000 Yorkshire Grosse Pointe Park MI 48230</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Wayne State University Law School</p> <p>Occupation</p> <p>Professor</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>12-14-93</p>	<p>Amount of Each Receipt this Period</p> <p>250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Carolyn Mooney 1208 Stablegate Court McLean VA 22102</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>McInerney & Company</p> <p>Occupation</p> <p>real estate agent</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>12-6-93</p>	<p>Amount of Each Receipt this Period</p> <p>500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Joseph A. Murphy, Jr. 2717 O Street, N. W. Washington D. C. 20007</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Blue Cross/Blue Shield</p> <p>Occupation</p> <p>attorney</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>11-1-93</p>	<p>Amount of Each Receipt this Period</p> <p>1,000.00</p>

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Kirk Nemer 6659 Fieldstone Court West Bloomfield MI 48322 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12-9-93	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and ZIP Code Michael A. Novak 70 Colonial Road Grosse Pointe MI 48236 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12-14-93	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code John Patrick O'Leary 15 Dodge Place Grosse Pointe MI 48230 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer O'Leary O'Leary Jacobs Mattson & Perry P.C. Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 12-16-93	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Thomas W. O'Leary 70 Denbar Bloomfield Hills MI 48304 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer O'Leary O'Leary Jacobs Mattson & Perry P.C. Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 10-22-93	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Edward J. Overstreet 26045 Lyndon Redford MI 48239 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Boysville of Michigan Occupation Aggregate Year-to-Date > \$ 375.00	Date (month, day, year) 11-17-93 11-24-93 12-14-93 12-22-93	Amount of Each Receipt this Period 50.00 100.00 100.00 125.00
F. Full Name, Mailing Address and ZIP Code Christine D. Oldani 2285 21st Street Wyandotte MI 48192 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney Occupation attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12-3-93 12-14-93	Amount of Each Receipt this Period 400.00 100.00
G. Full Name, Mailing Address and ZIP Code John D. Peacock 3308 Lake Shore Drive Sault Ste. Marie MI 49783 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation retired Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12-20-93	Amount of Each Receipt this Period 250.00

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SCHEDULE A

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code J. Douglas Peters 5510 Woodward Avenue Detroit MI 48202 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Charfoos & Christensen Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11-16-93	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code John F. Potvin 535 Ballantyne Grosse Pointe Shores MI 48236 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11-9-93	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Stanley A. Prokop 170 Lakeview Grosse Pointe Farms MI 48236 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11-6-93	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code James M. Radabaugh 2835 Rossmoor Circle Bloomfield Hills MI 48302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Harvey Kruse Westen & Milan P.C. Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 12-11-93	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Bradley T. Raymond 29976 Highmeadow Farmington Hills MI 48334 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Finkel Whitelfield & Selik P.C. Occupation attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-23-93 12-27-93	Amount of Each Receipt this Period 250.00 250.00
F. Full Name, Mailing Address and ZIP Code H. William Reising 1632 Wakefield Court Rochester Hills MI 48306 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11-9-93	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Christopher J. Reynolds 6599 Long Beach Drive St. Leonard MD 20685 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 12-6-93	Amount of Each Receipt this Period 1,000.00

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Elizabeth J. Riepe-Stanczyk 2079 Fifteen Mile Road Sterling Heights MI 48310 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer State Farm Insurance Occupation insurance representative Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11-16-93	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Mark D. Robins 27220 Charles Drive Southfield MI 48076 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12-14-93	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Paul Rosen 645 Griswold, #3080 Detroit MI 48226 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Rosen & Lovell P.C. Occupation attorney Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 12-13-93 12-17-93	Amount of Each Receipt this Period 200.00 100.00
D. Full Name, Mailing Address and ZIP Code Mary Masseron Ross 2100 Beaufait Grosse Pointe Woods MI 48236 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 11-16-93	Amount of Each Receipt this Period 400.00
E. Full Name, Mailing Address and ZIP Code Anthony J. Rusciano 1345 Puritan Avenue Birmingham MI 48009 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-12-93	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code David P. Ruwart 43 Deming Lane Grosse Pointe Farms MI 48236 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 12-3-93	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Sunita Sarin 5742 Springwater Lane West Bloomfield MI 48322 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Wayne State University Medical School Occupation physician Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11-3-93	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

94020050650

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 15 OF 19
FOR LINE NUMBER
11 (a) (1)

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

NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Chaman L. Sarin, M.D. 5742 Springwater Lane West Bloomfield MI 48322 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Cape Medical Inc. Occupation physician Aggregate Year-to-Date > \$	Date (month, day, year) 10-24-93 12-8-93 1,000.00	Amount of Each Receipt this Period 2,000.00 (1,000.00) Memo Reattribution Below
B. Full Name, Mailing Address and ZIP Code Susan Sarin 5742 Springwater Lane West Bloomfield MI 48322 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Cape Medical Inc. Occupation Vice President Aggregate Year-to-Date > \$	Date (month, day, year) 12-8-93 1,000.00	Amount of Each Receipt this Period 1,000.00 Memo Reattribution
C. Full Name, Mailing Address and ZIP Code Ellen Schelble 4319 N. 19th Street Arlington VA 22207 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Jerome Canter M.D. Occupation Registered Nurse Aggregate Year-to-Date > \$	Date (month, day, year) 10-19-93 12-6-93 500.00 200.00 700.00	Amount of Each Receipt this Period 500.00 200.00
D. Full Name, Mailing Address and ZIP Code John Schelble 4319 N. 19th Street Arlington VA 22207 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer US House of Repres. Occupation legislative aide Aggregate Year-to-Date > \$	Date (month, day, year) 12-6-93 1,000.00	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Marianne S. Schwartz 4120 Echo Road Bloomfield Hills MI 48302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 11-30-93 500.00	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Mike Schwartz 3632 Window Place N. W. Washington D.C. 20038 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Federal Home Loan Mortgage Corp. Occupation Director, House Relations Aggregate Year-to-Date > \$	Date (month, day, year) 11-1-93 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Beverly J Segal 1468 Inwoods Circle Bloomfield Hills MI 48302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 12-17-93 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

94030050651

SCHEDULE A

ITEMIZED RECEIPTS

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

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16 OF **19**
FOR LINE NUMBER
11 (a) (1)

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

NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Merton J. Segal 1468 Inwoods Circle Bloomfield Hills MI 48302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Meadowbrook Insur. Co. Chairman Aggregate Year-to-Date > \$	Date (month, day, year) 12-17-93 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Belinda R. Shannon 8120 E. Jefferson, #2L Detroit MI 48214 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-29-93 250.00	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code Abraham Singer 100 Renaissance Center, #3600 Detroit MI 48243 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Pepper, Hamilton & Scheetz attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-14-93 1,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code B. I. Stanczyk 900 Marquette Bldg. Detroit MI 48226 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plunkett & Cooney P.C. attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-3-93 1,000.00	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Frederick D. Steinhardt 25220 Roycourt East Huntington Woods MI 48070 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-16-93 250.00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code James E. Tamm 5191 Clarendon Crest Bloomfield Hills MI 48302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer O'Connor, DeGrazia & Tamm attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-16-93 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code Arthur J. Tarnow 18995 Muirland Detroit MI 48221 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-14-93 250.00	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

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94020050652

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 17 OF 19
FOR LINE NUMBER 11 (a) (1)

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

NAME OF COMMITTEE (in Full)

Brodhead for Senate

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>Patricia M. Thornton 2 Barnesdale Road Short Hills N. J. 07078</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>homemaker</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year)</p> <p>11-3-93</p>	<p>Amount of Each Receipt this Period</p> <p>500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Thomas Troyer 16 Primrose Chevy Chase MD 20815</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Caplin & Drysdale</p> <p>attorney</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year)</p> <p>12-7-93</p>	<p>Amount of Each Receipt this Period</p> <p>500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>John E. Vonrosen 1175 Sunningdale Grosse Pointe Woods MI 48236</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Michigan Consolidated Gas Co.</p> <p>Senior Vice President</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year)</p> <p>12-20-93</p>	<p>Amount of Each Receipt this Period</p> <p>250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Joseph V. Walker 32410 Bingham Road Bingham Farms MI 48025</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Plunkett & Cooney P.C.</p> <p>attorney</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year)</p> <p>11-8-93</p>	<p>Amount of Each Receipt this Period</p> <p>1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>D. J. Watters 26625 Captains Lane Franklin MI 48025</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Plunkett & Cooney P.C.</p> <p>attorney</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year)</p> <p>12-6-93</p>	<p>Amount of Each Receipt this Period</p> <p>1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Douglas Weiland 2701 Norbert Flint MI 48504</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Weiland & Associates</p> <p>consultant</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year)</p> <p>12-20-93</p>	<p>Amount of Each Receipt this Period</p> <p>250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Marc G. Whitefield 4797 Pickering Bloomfield MI 48334</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Finkel, Whitefield & Selik P.C.</p> <p>attorney</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year)</p> <p>12-16-93</p>	<p>Amount of Each Receipt this Period</p> <p>250.00</p>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

94020050653

SCHEDULE A

ITEMIZED RECEIPTS

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

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11 (a) (1)

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

NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Edwin A. Williams 1156 Swinks Mill Road McLean VA 22102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Kellogg Lyons & Williams Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 12-6-93 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Susan J. Williams 1156 Swinks Mill Road McLean VA 22102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bracy Williams & Co. Occupation publ. affairs consultant Aggregate Year-to-Date > \$	Date (month, day, year) 11-1-93 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Roger D. Winkelman 4271 Covered Bridge Road Bloomfield Hills MI 48302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Comerica Inc. Occupation attorney/banker Aggregate Year-to-Date > \$	Date (month, day, year) 12-14-93 250.00	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Ralph N. Woronoff 6679 Edinborough Drive West Bloomfield MI 48322 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Woronoff Hyman Levinson & Sweet P.C. Occupation CPA Aggregate Year-to-Date > \$	Date (month, day, year) 10-25-93 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Mark Zausmer 7250 Cedarcroft West Bloomfield MI 48322 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Cooper Fink & Zausmer Occupation attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-3-93 12-17-93 750.00	Amount of Each Receipt this Period 500.00 250.00
F. Full Name, Mailing Address and ZIP Code Richard W. Zemlin 35632 Tall Pine Farmington MI 48335 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan Consolidated Gas Co. Occupation Vice President Aggregate Year-to-Date > \$	Date (month, day, year) 12-20-93 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code Philip O. Mastin, Jr. 269 Ottawa Drive Pontiac MI 48341 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer UAW-GM Human Resource Center Occupation Manager, Governm. Relations Aggregate Year-to-Date > \$	Date (month, day, year) 12-31-93 500.00	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

94020050654

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 19 OF 19
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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Donald M. D. Thurber 10 Rathbone Place Grosse Pointe MI 48230 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation public relations Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12-31-93	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and ZIP Code Isam S. Yaldo 29209 Everett Southfield MI 48076 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Triangle Development Inc. Occupation builder Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 12-31-93	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

81,875.00

94020050655

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code CONPAC The Consumers Bankers Association Political Action Committee 1300 N. 17th Street Arlington VA 22209	Name of Employer Occupation	Date (month, day, year) 12-31-93	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code Jeffe, Raitt & Heuer Political Action Committee One Woodward Avenue Detroit MI 48226	Name of Employer Occupation	Date (month, day, year) 12-15-93	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 100.00		
C. Full Name, Mailing Address and ZIP Code Strobl & Mancogian PAC 6896 Telegraph Road Bloomfield Twp. MI 48301	Name of Employer Occupation	Date (month, day, year) 12-17-93	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 100.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

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450.00

94020050656

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11 (d)

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)

Brodhead for Senate

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>William M. Brodhead 31350 Coachlight Lane Bingham Farms MI 48025</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Plunkett & Cooney P.C.</p> <p>Occupation</p> <p>attorney</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>10-22-93 12-16-93</p>	<p>Amount of Each Receipt this Period</p> <p>500.00 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)

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1,000.00

94020050657

ITEMIZED RECEIPTS

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FOR LINE NUMBER	
NA	

EXEMPT LEGAL AND ACCOUNTING SERVICES

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)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Echoe McMahon 17321 Telegraph Road, Suite 204 Detroit MI 48219		Name of Employer APB Associates Inc.	Date (month, day, year) 10-29-93 11-5-93 11-9-93 11-12-93 11-16-93 11-24-93	Amount of Each Receipt this Period 190.00 MEMO
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year) 11-29-93 12-02-93 12-04-93 12-6-93 12-8-93 12-10-93	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year) 12-13-93 12-14-93 12-15-93 12-16-93 12-17-93 12-20-93	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year) 12-30-93	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code Patricia C. Becker 17321 Telegraph Road, Suite 204 Detroit MI 48219		Name of Employer APB Associates Inc.	Date (month, day, year) 10-22-93 10-29-93 12-1-93 12-29-93 12-30-93	Amount of Each Receipt this Period 300.00 MEMO
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$		

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

490.00 MEMO

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 17

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

NAME OF COMMITTEE (in Full)

Brodhead for Senate

94020050659

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
US Postal Service Southfield MI 48034	postage stamps Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-19-93	2,465.00
B. Full Name, Mailing Address and ZIP Code Pathways Press 21325 Hoover Warren MI 48089	printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-23-93 12-14-94	2,386.80 286.00
C. Full Name, Mailing Address and ZIP Code Ameritech P. O. Box 5030 Saginaw MI 48663	telephone deposit Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-22-93	242.00
D. Full Name, Mailing Address and ZIP Code Ogden Service Corporation 1 Washington Blvd. Detroit MI 48226	catering Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-6-93	734.40
E. Full Name, Mailing Address and ZIP Code Plaza Hotel 16400 J. L. Hudson Drive Southfield MI 48075	catering & room rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-15-93	1,160.09
F. Full Name, Mailing Address and ZIP Code Denise K. Sloan 417 Carey Lansing MI 48915	salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-17-93 12-31-93	2,000.00 338.15
G. Full Name, Mailing Address and ZIP Code State Bar of Michigan 306 Townsend Lansing MI 48933	mailing labels Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-20-93	226.00
H. Full Name, Mailing Address and ZIP Code Lamphars, Inc. 22882 Orchard Lake Road Farmington MI 48336	office rent deposit Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-23-93	1,197.00
I. Full Name, Mailing Address and ZIP Code Savoyard Club Buhl Building Detroit MI 48226	catering Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-31-93	2,503.43

SUBTOTAL of Disbursements This Page (optional)

13,538.77

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Brodhead for Senate

A. Full Name, Mailing Address and ZIP Code Internal Revenue Service Service Center Cincinnati OH 45999	Purpose of Disbursement FICA & FIT withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12-31-93	Amount of Each Disbursement This Period 1,105.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

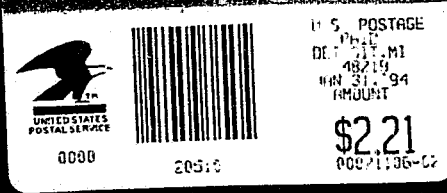
SUBTOTAL of Disbursements This Page (optional)

1,105.00

TOTAL This Period (last page this line number only)

14,643.77

94020050660



fold at line over top of envelope to the
right of the return address

CERTIFIED
P-070 745 934
MAIL

SECRETARY OF THE SENATE
OFFICE OF PUBLIC RECORDS
232 SENATE HART OFFICE BLDG.
WASHINGTON D. C. 20510-7116

WALTER J. STEWART
SECRETARY

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

PAMELA B. GAVIN
SUPERINTENDENT
HART BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: 202-224-0322

THE PRECEDING DOCUMENT(S) WAS:

_____ HAND DELIVERED _____
Date of Receipt

_____ INSIDE MAIL _____
Date of Receipt

_____ RECEIVED FROM THE HOUSE OFFICE OF RECORDS
AND REGISTRATIONS _____
Date of Receipt

_____ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date of Receipt

_____ FIRST CLASS MAIL _____
Postmarked

1 _____ REGISTERED/CERTIFIED MAIL Jan. 31, 1994
Postmarked

_____ NO POSTMARK

_____ POSTMARK ILLEGIBLE

_____ OTHER _____ POSTMARK _____

AND/OR DATE OF RECEIPT _____

94020050662