

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 OF 38

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Peters Victory 2020

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mittleman, David, S., ,

Mailing Address 1700 Old Mill Rd

City
East LansingState
MIZip Code
48823-2158FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Grewal LawOccupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : VSH8GK9VGM5

Amount of Each Receipt this Period

5000.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

145449.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : VSH8GK9VGM5E

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Maisels, Jeffrey, , ,

Mailing Address 29260 Franklin Rd

City
SouthfieldState
MIZip Code
48034-1107FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Beaumont Health SystemOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : VSH8GKGDNP5

Amount of Each Receipt this Period

500.00

☐ Memo Item

* Earmarked Contribution: See Below

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

5500.00

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