

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

Office Use Only

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

Schwarz for Congress

ADDRESS (number and street) P.O. Box 2063

Check if different than previously reported. (ACC)

Battle Creek MI 49016

2. **FEC IDENTIFICATION NUMBER** C00395822

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

MI 07

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on [] [] [] in the State of []

(c) 30-Day **POST**-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on [] [] [] in the State of []

5. Covering Period 01 01 2006 through 03 31 2006

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

Type or Print Name of Treasurer Jennifer Bertram

Signature of Treasurer Electronically Filed by Jennifer Bertram Date 06 29 2006

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Schwarz for Congress

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	155873.75	818026.34
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	155873.75	813026.34
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	186561.98	677072.33
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4176.45
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	186561.98	672895.88
8. Cash on Hand at Close of Reporting Period (from Line 27).....	335613.70	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Schwarz for Congress

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

59673.00

246697.93

(ii) Unitemized.....

6817.00

41977.00

(iii) TOTAL of contributions

66490.00

288674.93

from individuals..... ▶

0.00

196.00

(b) Political Party Committees.....

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

89383.75

529155.41

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

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

155873.75

818026.34

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

4176.45

15. OTHER RECEIPTS

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

0.00

850.00

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

155873.75

823052.79

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	186561.98	677072.33
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5000.00
21. OTHER DISBURSEMENTS.....	0.00	13812.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	186561.98	695884.33

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	366301.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	155873.75
25. SUBTOTAL (add Line 23 and Line 24).....	522175.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	186561.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	335613.70

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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)
Schwarz for Congress

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

Mailing Address 1000 E. Paris Ave., Se

City State Zip Code
Grand Rapids MI 49546

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

Name of Employer Self Occupation
Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

199.00

Date of Receipt
MM / DD / YYYY
01 / 17 / 2006

Transaction ID: 60320.C3514

Amount of Each Receipt this Period
199.00

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

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

Mailing Address 1000 E. Paris Ave., Se

City State Zip Code
Grand Rapids MI 49546

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

Name of Employer Self Occupation
Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

299.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2006

Transaction ID: 60404.C3650

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 9604 Timberview Ct.

City State Zip Code
Vienna VA 22182

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

Name of Employer Alliance Of Automobile Manufac Occupation
Director, Gov. Affairs

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2006

Transaction ID: 60415.C3697

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	549.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 227 Barrington Circle East

City State Zip Code
Battle Creek MI 49015-9625

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 6

Transaction ID: 60320.C3444

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 10205 Lake Shore Drive

City State Zip Code
West Olive MI 49460

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

Name of Employer Occupation
Varnum, Riddering, Schmidt And Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 7 / 2 0 0 6

Transaction ID: 60320.C3573

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 21 Kersheval Avenue Suite 360

City State Zip Code
Grosse Pointe Farm MI 48236

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

Name of Employer Occupation
Axe And Ecklund, Pc Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60320.C3467

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 1 Hillside Court

City State Zip Code
Ann Arbor MI 48104

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 04 / 2006

Transaction ID: 60415.C3690

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 7856 Midday Ln

City State Zip Code
Alexandria VA 22306-2724

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

Name of Employer Occupation
Dykema Gossett Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

750.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 15 / 2006

Transaction ID: 60320.C3504

Amount of Each Receipt this Period
250.00

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

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

Mailing Address PO Box 460

City State Zip Code
Battle Creek MI 49016

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

625.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 21 / 2006

Transaction ID: 60320.C3471

Amount of Each Receipt this Period
375.00

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

SUBTOTAL of Receipts This Page (optional) ► **875.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 765 Chester Street

City Birmingham State MI Zip Code 48009

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

Name of Employer SELF EMPLOYED Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60320.C3535

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 5160 North Shore Drive

City Clarklake State MI Zip Code 49234

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

Name of Employer HOMEMAKER Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2006

Transaction ID: 60320.C3501

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 363 Fremont St

City Battle Creek State MI Zip Code 49017-3389

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

Name of Employer Self Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2006

Transaction ID: 60320.C3592

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► 2450.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
John E. Billi

Mailing Address 1439 Burgundy

City State Zip Code
Ann Arbor MI 48105

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

Name of Employer Occupation
University of Michigan Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 6

Transaction ID: 60320.C3548

Amount of Each Receipt this Period
400.00

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

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

Mailing Address 124 South Minges Road

City State Zip Code
Battle Creek MI 49015

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

Name of Employer Occupation
SELF EMPLOYED Architect

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 0 6

Transaction ID: 60320.C3462

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 31 Willison

City State Zip Code
Grosse Pointe Shor MI 48236

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

Name of Employer Occupation
SELF EMPLOYED Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 0 6

Transaction ID: 60320.C3449

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 24 Country Club Dr

City State Zip Code
Battle Creek MI 49015-3622

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 6

Transaction ID: 60320.C3563

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 28 Hiawatha Drive

City State Zip Code
Battle Creek MI 49015

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

Name of Employer Occupation
RETIRED Accounts Director

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60320.C3441

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 3610 Applewood Road

City State Zip Code
Midland MI 48640

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 0 6

Transaction ID: 60320.C3541

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional)	▶	700.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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)
Schwarz for Congress

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

Mailing Address 2633 Middleboro Lane, NE

City State Zip Code
Grand Rapids MI 49506

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

Name of Employer
SELF EMPLOYED

Occupation
Developer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2006

Transaction ID: 60404.C3649

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 2800 Stein Court

City State Zip Code
Ann Arbor MI 48105

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

Name of Employer
HOMEMAKER

Occupation
Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2006

Transaction ID: 60415.C3695

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 25 Southwick Court

City State Zip Code
Ann Arbor MI 48104

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

Name of Employer
Self

Occupation
Developer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 23 / 2006

Transaction ID: 60320.C3454

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 3975 Holden Drive

City State Zip Code
Ann Arbor MI 48103

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

Name of Employer Occupation
Gene Codes Corporation Ceo

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 6

Transaction ID: 60320.C3511

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 4220 Dandridge Terrace

City State Zip Code
Alexandria VA 22309

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

Name of Employer Occupation
Lawrence Tech University President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60404.C3658

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 461 East Hamilton Lane

City State Zip Code
Battle Creek MI 49015

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 5 / 2 0 0 6

Transaction ID: 60320.C3561

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1700.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 109
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Schwarz for Congress

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

Mailing Address 2007 Seward Street

City State Zip Code
Evanston IL 60202

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

Name of Employer
RETIRED Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2006

Transaction ID: 60415.C3698

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 247 Brewer Drive

City State Zip Code
Battle Creek MI 49015

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

Name of Employer
SELF EMPLOYED Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: 60404.C3634

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 36 Lynwood Dr

City State Zip Code
Battle Creek MI 49015-7913

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

Name of Employer
RETIRED Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 23 / 2006

Transaction ID: 60320.C3395

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 439 Ashton Lake Dr

City State Zip Code
Battle Creek MI 49015-4692

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2006

Transaction ID: 60320.C3570

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 731 Gorham

City State Zip Code
Marshall MI 49068

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

Name of Employer Occupation
ERA ROSEMARY DAVIS REALTOR Lawyer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 03 / 2006

Transaction ID: 60415.C3700

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 240 Ashton Lake Dr

City State Zip Code
Battle Creek MI 49015-4689

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1350.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60320.C3433

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 1350.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 3360 Brookshire St

City State Zip Code
Trenton MI 48183-3966

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

Name of Employer STATE OF MICHIGAN Occupation Judge

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 6

Transaction ID: 60320.C3538

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 8101 Locklin Lane

City State Zip Code
Commerce Township MI 48382

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

Name of Employer Self Occupation Cpa

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 8 / 2 0 0 6

Transaction ID: 60404.C3662

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 341 Corrie Road

City State Zip Code
Ann Arbor MI 48105

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60320.C3414

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address P.o. Box 1570

City State Zip Code
Anacortes WA 98221

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

Name of Employer Self Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2006

Transaction ID: 60404.C3626

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 630 Fifth Avenue, 39th Floor

City State Zip Code
New York NY 10111

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

Name of Employer Self Occupation
Developer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2006

Transaction ID: 60320.C3526

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1475 Eply Road

City State Zip Code
Williamston MI 48895

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

Name of Employer Msu Occupation
Veterinarian

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60320.C3476

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 189 Townsend Street

City Birmingham State MI Zip Code 48009

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

Name of Employer SELF EMPLOYED Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 7 / 2 0 0 6

Transaction ID: 60320.C3515

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 1450 Wincanton Drive

City Deerfield State IL Zip Code 60015

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

Name of Employer Self Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60404.C3670

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 3254 Deer Creek Drive

City Lamberville State MI Zip Code 48144

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 8 / 2 0 0 6

Transaction ID: 60404.C3664

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 4700 North Delhi Road

City State Zip Code
Ann Arbor MI 48104

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2006

Transaction ID: 60415.C3692

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 505 E. Huron, #805

City State Zip Code
Ann Arbor MI 48104

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60404.C3620

Amount of Each Receipt this Period
350.00

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

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

Mailing Address 505 E. Huron, #805

City State Zip Code
Ann Arbor MI 48104

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2450.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60404.C3619

Amount of Each Receipt this Period
1650.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2200.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 414 N. Liberty

City Marshall State MI Zip Code 49068-1230

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

Name of Employer Southwestern Hospital Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60320.C3571

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 7021 North 46th Street

City Augusta State MI Zip Code 49012

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

Name of Employer Kalamazoo County Occupation Administrator

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 950.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60320.C3426

Amount of Each Receipt this Period
500.00

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

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

Mailing Address Post Office Box 1810

City Birmingham State MI Zip Code 48012

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 625.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60320.C3473

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► 1200.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 5187 Thames Ct.

City State Zip Code
Jackson MI 49201

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

Name of Employer Occupation
Alro Steel Corporation Operations Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
01 / 03 / 2006

Transaction ID: 60320.C3518

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 27 Lakecrest Lane

City State Zip Code
Grosse Pointe Farm MI 48236

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

Name of Employer Occupation
SELF EMPLOYED Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2006

Transaction ID: 60404.C3623

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 277 Park Avenue
47th Floor

City State Zip Code
New York NY 10172

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

Name of Employer Occupation
SELF EMPLOYED Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2006

Transaction ID: 60320.C3391

Amount of Each Receipt this Period
2100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 1365 W. Gull Lake Dr.

City Richland State MI Zip Code 49083

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

Name of Employer Gamma Iii Ltd. Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2006

Transaction ID: 60404.C3674

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 435 Mill Street

City Williamston State MI Zip Code 48895

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

Name of Employer Self Occupation Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 07 / 2006

Transaction ID: 60404.C3630

Amount of Each Receipt this Period
150.00

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

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

Mailing Address 7908 Oak Hollow Lane

City Fairfax Station State VA Zip Code 22039

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

Name of Employer The Franklin Partnership Occupation Founding Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 15 / 2006

Transaction ID: 60320.C3502

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 850 South Old Woodward

City Birmingham State MI Zip Code 48009

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

Name of Employer Hagopian Rugs Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 22 / 2006

Transaction ID: 60320.C3475

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 308 Carpenter Drive

City Battle Creek State MI Zip Code 49017

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

Name of Employer KELLOGG COMMUNITY COLLEGE Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2006

Transaction ID: 60320.C3569

Amount of Each Receipt this Period
150.00

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

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

Mailing Address 1320 Covington Road

City Bloomfield Hills State MI Zip Code 48301

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60320.C3474

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. David Hayhow		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 6	
Mailing Address 360 Winterberry Ln		Transaction ID: 60320.C3448	
City State Zip Code Okemos MI 48864-4166	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation RETIRED Retired	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1750.00		

Full Name (Last, First, Middle Initial) B. Richard Henry		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6	
Mailing Address 703 Capital Ave., SW		Transaction ID: 60320.C3522	
City State Zip Code Battle Creek MI 49015	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Richard A. Henry Funeral Home President	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		

Full Name (Last, First, Middle Initial) C. David Hickman		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6	
Mailing Address PO Box 399		Transaction ID: 60320.C3517	
City State Zip Code Tecumseh MI 49286-0399	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation United Bank And Trust Ceo	Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4000.00		

SUBTOTAL of Receipts This Page (optional) ▶	3200.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 2120 Wallingford

City State Zip Code
Ann Arbor MI 48104

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

Name of Employer Self
Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60320.C3413

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 2575 Oxford Road

City State Zip Code
Lansing MI 48911

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

Name of Employer Public Affairs Associates, Inc
Occupation Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60320.C3566

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 100 Peets Cove

City State Zip Code
Battle Creek MI 49015

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

Name of Employer Self
Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2006

Transaction ID: 60320.C3591

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 299 Minges Hills Dr

City State Zip Code
Battle Creek MI 49015-9336

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 08 / 2006

Transaction ID: 60404.C3642

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 22505 East Ave N

City State Zip Code
Battle Creek MI 49017-9427

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 01 / 2006

Transaction ID: 60320.C3539

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 1227 Chartwell Carriage Way

City State Zip Code
East Lansing MI 48823

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

Name of Employer Occupation
SELF EMPLOYED Lobbyist

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 22 / 2006

Transaction ID: 60320.C3399

Amount of Each Receipt this Period
250.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 7602 East 46 1/2 Road

City Cadillac State MI Zip Code 49601

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 6

Transaction ID: 60320.C3574

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 100 E Huron St Apt 4602

City Chicago State IL Zip Code 60611-5971

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 7 / 2 0 0 6

Transaction ID: 60320.C3544

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 432 Riverview Dr.

City Ann Arbor State MI Zip Code 48104

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

Name of Employer Cybernet Systems Occupation Ceo

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 4 / 2 0 0 6

Transaction ID: 60515.C3729

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2700.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 154 Deer Path Lane

City State Zip Code
Battle Creek MI 49015

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

200.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 06 / 2006

Transaction ID: 60404.C3640

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 144 Maplewood Dr

City State Zip Code
East Lansing MI 48823-4713

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

Name of Employer Occupation
Mid-michigan Surgoens Physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

375.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 27 / 2006

Transaction ID: 60320.C3557

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 300 Minges Hills Dr

City State Zip Code
Battle Creek MI 49015-9408

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

Name of Employer Occupation
Self Physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 25 / 2006

Transaction ID: 60320.C3479

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address P.O. Box 594

City State Zip Code
Katonah NY 10536

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

Name of Employer Occupation
US House of Reps. Member of Congress

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2000.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2006

Transaction ID: 60404.C3618

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 4530 Grand Blvd.

City State Zip Code
Clarklake MI 49234

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

Name of Employer Occupation
Jackson Orthopaedic & Sports M Physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2006

Transaction ID: 60320.C3550

Amount of Each Receipt this Period
200.00

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

C. Full Name (Last, First, Middle Initial)
Marilyn V. Koth

Mailing Address 1614 Landmark Avenue

City State Zip Code
Galva IA 51020

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

Name of Employer Occupation
HOMEMAKER Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

600.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2006

Transaction ID: 60404.C3622

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **2500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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)
Schwarz for Congress

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

Mailing Address 731 Venture Way

City Marshall State MI Zip Code 49068

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

Name of Employer Family Surgical, PC Occupation Surgeon

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 01 / 2006

Transaction ID: 60320.C3545

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 5060 Halbert Rd E

City Battle Creek State MI Zip Code 49017-8408

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 625.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 23 / 2006

Transaction ID: 60320.C3396

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Carol Parker Lee

Mailing Address 803 Greenwich

City Grand Ledge State MI Zip Code 48837

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

Name of Employer Michigan State University Occupation Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 02 / 2006

Transaction ID: 60320.C3579

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **950.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 3 Hiawatha Cove Trl Apt 12

City State Zip Code
Battle Creek MI 49015-3599

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60320.C3549

Amount of Each Receipt this Period
125.00

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

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

Mailing Address 848 Country Club Dr.

City State Zip Code
Battle Creek MI 49015-3653

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 4 / 2 0 0 6

Transaction ID: 60320.C3554

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 247 Central St

City State Zip Code
Battle Creek MI 49017-3346

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60320.C3431

Amount of Each Receipt this Period
600.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **975.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 247 Central St

City State Zip Code
Battle Creek MI 49017-3346

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60320.C3432

Amount of Each Receipt this Period
400.00

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

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

Mailing Address 1655 Kibby Rd

City State Zip Code
Jackson MI 49203-3828

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1200.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2006

Transaction ID: 60404.C3643

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 289 Deer Path Lane

City State Zip Code
Battle Creek MI 49015

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2006

Transaction ID: 60320.C3585

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 121 Cascade Pl.

City State Zip Code
Battle Creek MI 49015

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

Name of Employer Occupation
HOMEMAKER Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 2 / 2 0 0 6

Transaction ID: 60320.C3424

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 7907 Birnam Wood Drive

City State Zip Code
Mclean VA 22102

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

Name of Employer Occupation
Preston, Gates, Ellis, Executive

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 6

Transaction ID: 60320.C3505

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 115 Depot Street

City State Zip Code
Ann Arbor MI 48104

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

Name of Employer Occupation
First Martin Corporation Executive

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 8 / 2 0 0 6

Transaction ID: 60320.C3507

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. William Martin		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6	
Mailing Address 115 Depot Street		Transaction ID: 60320.C3506	
City State Zip Code Ann Arbor MI 48104		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer University of Michigan	Occupation Athletic Director		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Donald Matrone		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 6	
Mailing Address P.O. Box 2060		Transaction ID: 60320.C3477	
City State Zip Code Battle Creek MI 49016		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer A 2 Z Ad Specialties	Occupation Partner		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) C. Frederick Matthaei		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 6	
Mailing Address PO Box 2480		Transaction ID: 60404.C3632	
City State Zip Code Birmingham MI 48012-2480		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer SELF EMPLOYED	Occupation Entrepreneur		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	3150.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 6589 R Drive North

City State Zip Code
Battle Creek MI 49017

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

Name of Employer
RETIRED

Occupation
Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 21 / 2006

Transaction ID: 60404.C3666

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 216 N Chestnut Street

City State Zip Code
Lansing MI 48933

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

Name of Employer
McKinney & Associates

Occupation
Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 08 / 2006

Transaction ID: 60404.C3621

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 3 Hiawatha Cove Trl., #8

City State Zip Code
Battle Creek MI 49015-3591

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 17 / 2006

Transaction ID: 60404.C3668

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 778 Toulouse

City State Zip Code
Battle Creek MI 49017-3200

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2006

Transaction ID: 60404.C3679

Amount of Each Receipt this Period
125.00

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

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

Mailing Address Post Office Box 904

City State Zip Code
Mackinac Island MI 49757

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

Name of Employer Occupation
Self Restaurateur

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 07 / 2006

Transaction ID: 60404.C3641

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 8822 W. Lake Pointe Drive

City State Zip Code
Laingsburg MI 48848

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

Name of Employer Occupation
Dhr International Executive Vice President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 04 / 2006

Transaction ID: 60320.C3527

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **475.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 4721 46th Street, NW

City Washington State DC Zip Code 20016

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

Name of Employer Cassidy & Associates Occupation Senior Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2006

Transaction ID: 60320.C3524

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 13862 Iyopawa Island Rd

City Coldwater State MI Zip Code 49036-8752

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

Name of Employer Starr Commonwealth Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2006

Transaction ID: 60320.C3409

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 850 Thorntree Blvd

City Jackson State MI Zip Code 49203-2518

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

Name of Employer Foote Health System Occupation Director, Corporate Accts.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60320.C3420

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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)
Schwarz for Congress

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

Mailing Address 5140 Page Ave

City State Zip Code
Jackson MI 49201

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

Name of Employer Photo Marketing Association, I
Occupation Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2006

Transaction ID: 60404.C3659

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 1225 Forrester Road

City State Zip Code
Frankfort MI 49635

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

Name of Employer Graceland Fruit, Inc.
Occupation Ceo

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: 60320.C3481

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 1200 Lakeside Dr S

City State Zip Code
Battle Creek MI 49015-3534

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

Name of Employer Radiology Consultants
Occupation Doctor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2006

Transaction ID: 60320.C3531

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	950.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 20 Woodland Ave.

City State Zip Code
Kalispell MT 59901

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2006

Transaction ID: 60404.C3676

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 4192 E. Gull Lake Drive

City State Zip Code
Hickory Corners MI 49060

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2006

Transaction ID: 60404.C3669

Amount of Each Receipt this Period
300.00

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

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

Mailing Address 3253 Avalon Place

City State Zip Code
Houston TX 77019

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

Name of Employer
Self

Occupation
Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 02 / 2006

Transaction ID: 60320.C3586

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 515 Michigan, NE Suite 301

City Grand Rapids State MI Zip Code 49503

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

Name of Employer SELF EMPLOYED Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 6

Transaction ID: 60320.C3560

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 128 North Broad Street

City Battle Creek State MI Zip Code 49017

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 6

Transaction ID: 60320.C3436

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 74 Hickory Lane

City Battle Creek State MI Zip Code 49015

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

Name of Employer Bam, Inc. Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 6

Transaction ID: 60320.C3584

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 405 W Seminary St

City State Zip Code
Charlotte MI 48813-1878

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

Name of Employer Occupation
Pray Funeral Home Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
MM / DD / YYYY
02 / 22 / 2006

Transaction ID: 60320.C3468

Amount of Each Receipt this Period
150.00

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

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

Mailing Address 81 Latta Street

City State Zip Code
Battle Creek MI 49017

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

Name of Employer Occupation
CALHOUN COUNTY Judge

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2006

Transaction ID: 60320.C3445

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 5198 Wyndemere Square

City State Zip Code
Swartz Creek MI 48473

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

Name of Employer Occupation
Self Physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2006

Transaction ID: 60404.C3657

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Marda Robillard		Date of Receipt M M / D D / Y Y Y Y 03 / 04 / 2006	
Mailing Address 16053 Laconia Circle		Transaction ID: 60320.C3590	
City State Zip Code Woodbridge VA 22191	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Wayne State University Lobbyist	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

Full Name (Last, First, Middle Initial) B. James Rosbe		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2006	
Mailing Address 3364 Tacoma Circle		Transaction ID: 60415.C3694	
City State Zip Code Ann Arbor MI 48108	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Soar Technology, Inc. Software Developer	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 650.00		

Full Name (Last, First, Middle Initial) C. Robert T. Sackrider		Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2006	
Mailing Address 1633 E. Michigan Ave.		Transaction ID: 60320.C3523	
City State Zip Code Battle Creek MI 49014	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Self Farmer	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1550.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 5606 Meadow Drive

City State Zip Code
Ann Arbor MI 48105

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

Name of Employer Mhni Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2006

Transaction ID: 60404.C3644

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 3645 Daleview Drive

City State Zip Code
Ann Arbor MI 48105

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

Name of Employer SELF EMPLOYED Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2006

Transaction ID: 60404.C3617

Amount of Each Receipt this Period
400.00

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

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

Mailing Address 73 Appleblossom

City State Zip Code
Okemos MI 48864

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60320.C3469

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 2224 Ash-te-Wette Drive

City Hillsdale State MI Zip Code 49242

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

Name of Employer The Shane Group Occupation Ceo

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 1 / 2 0 0 6

Transaction ID: 60404.C3606

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 339 Northshore Drive

City Coldwater State MI Zip Code 49036

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

Name of Employer Century Bank and Trust Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 5 / 2 0 0 6

Transaction ID: 60320.C3525

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Mary Ellen Sheets

Mailing Address 1141 Southlawn Ave

City East Lansing State MI Zip Code 48823-3072

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

Name of Employer Two Men and a Truck Occupation Ceo

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60320.C3419

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 1416 Folkstone Ct

City State Zip Code
Ann Arbor MI 48105-2848

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

Name of Employer Occupation
Huron Valley Tennis Club Bookkeeper

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: 60415.C3691

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 26982 Hamstead

City State Zip Code
Farmington MI 48331

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

Name of Employer Occupation
Versacaom President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 25 / 2006

Transaction ID: 60404.C3675

Amount of Each Receipt this Period
300.00

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

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

Mailing Address 174 Coconut Palm Road

City State Zip Code
Boca Raton FL 33432

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 23 / 2006

Transaction ID: 60320.C3455

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Lawrence Sweet		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6	
Mailing Address 999 Putney		Transaction ID: 60320.C3533	
City State Zip Code Birmingham MI 48009		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Birmingham Allergy Clinic Physician			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) B. Elizabeth Teeter		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 0 6	
Mailing Address 880 Colliston Road		Transaction ID: 60320.C3508	
City State Zip Code Ann Arbor MI 48105		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation RETIRED Retired			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Raymond Telman		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6	
Mailing Address 709 W. Geneva		Transaction ID: 60320.C3437	
City State Zip Code Dewitt MI 48820		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Middle Cities Education Assn Executive Director			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional) ▶	2200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
Simon Ter Avest

Mailing Address 9 Capital Avenue, NE

City State Zip Code
Battle Creek MI 49017

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

Name of Employer John Teravest Agency, Inc. Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60320.C3430

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 5800 1st Street, N

City State Zip Code
Arlington VA 22203

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

Name of Employer Self Occupation Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 6

Transaction ID: 60320.C3503

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 3713 W Main St

City State Zip Code
Kalamazoo MI 49006-2842

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

Name of Employer Kalsec, Inc. Occupation Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 324.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 2 / 2 0 0 6

Transaction ID: 60320.C3423

Amount of Each Receipt this Period
199.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **699.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 3965 Penberton

City State Zip Code
Ann Arbor MI 48105

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

Name of Employer Occupation
Oakwood Healthcare, Inc. Sr. Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 15 / 2006

Transaction ID: 60404.C3616

Amount of Each Receipt this Period
400.00

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

B. Full Name (Last, First, Middle Initial)
John T. Truscott

Mailing Address 920 Nicole Circle

City State Zip Code
Okemos MI 48864

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

Name of Employer Occupation
The John Truscott Group President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 01 / 2006

Transaction ID: 60320.C3509

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 5 Minges Lane

City State Zip Code
Battle Creek MI 49015-7921

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

Name of Employer Occupation
Upston Associates, Inc. Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 24 / 2006

Transaction ID: 60320.C3461

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1650.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

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

Mailing Address 1008 Scott Place

City State Zip Code
Ann Arbor MI 48105

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

Name of Employer
HOMEMAKER

Occupation
Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2006

Transaction ID: 60404.C3608

Amount of Each Receipt this Period
400.00

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

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

Mailing Address 1 Hiawatha Cove Trl Apt 18

City State Zip Code
Battle Creek MI 49015-3500

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2006

Transaction ID: 60404.C3639

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 3050 St. James Drive

City State Zip Code
Boca Raton FL 33434

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
01 / 03 / 2006

Transaction ID: 60320.C3521

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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)
Schwarz for Congress

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

Mailing Address 3428 Old Oak Court

City State Zip Code
Saline MI 48176

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

Name of Employer
University of Michigan

Occupation
Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: 60320.C3450

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 607 North Kalamazoo Avenue

City State Zip Code
Marshall MI 49068

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

Name of Employer
RETIRED

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
03 / 01 / 2006

Transaction ID: 60320.C3540

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 719 Capital Avenue, SW

City State Zip Code
Battle Creek MI 49015

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

Name of Employer
SELF EMPLOYED

Occupation
Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 14 / 2006

Transaction ID: 60404.C3653

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 109
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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)
Schwarz for Congress

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

Mailing Address 145 Cascade Drive

City State Zip Code
Battle Creek MI 49015

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

200.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2006

Transaction ID: 60320.C3447

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 20417 Bedford Rd N

City State Zip Code
Battle Creek MI 49017-8804

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

Name of Employer Occupation
RETIRED Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

450.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2006

Transaction ID: 60320.C3463

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 4870 Park Hill Drive

City State Zip Code
West Bloomfield MI 48323

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

Name of Employer Occupation
Diagnostic Radiology Radiologist

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
MM / DD / YYYY
02 / 22 / 2006

Transaction ID: 60320.C3464

Amount of Each Receipt this Period
150.00

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

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	59673.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 109
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. AFGE PAC		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6	
Mailing Address 80 F St NW		Transaction ID: 60320.C3546	
City Washington	State DC	Zip Code 20001-1528	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C C70000104		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation	Election Cycle-to-Date ▼ 1500.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. AFGE PAC		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6	
Mailing Address 80 F St NW		Transaction ID: 60320.C3547	
City Washington	State DC	Zip Code 20001-1528	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C C70000104		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation	Election Cycle-to-Date ▼ 2000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. American Academy of Family Physician PAC		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 0 6	
Mailing Address 2023 Massachusetts Ave., NW		Transaction ID: 60404.C3612	
City Washington	State DC	Zip Code 20036	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00411553		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

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

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

FOR LINE NUMBER: PAGE 52 / 109
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
American Academy Of Ophthalmology Inc Po
Mailing Address 655 Beach St
City San Francisco State CA Zip Code 94109-1342
FEC ID number of contributing federal political committee. **C** C00196246
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 6
Transaction ID: 60320.C3490
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Academy Of Otolaryngology
Mailing Address One Prince Street
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00306449
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 0 6
Transaction ID: 60404.C3682
Amount of Each Receipt this Period
2000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American College of Cardiology PAC
Mailing Address 9111 Old Georgetown Rd
City Bethesda State MD Zip Code 20814-1616
FEC ID number of contributing federal political committee. **C** C00375360
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 1 / 2 0 0 6
Transaction ID: 60320.C3483
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 53 / 109
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
American College Of Radiology
Mailing Address 1891 Preston White Dr
City Reston State VA Zip Code 20191-4375
FEC ID number of contributing federal political committee. **C** C00343459
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 6
Transaction ID: 60320.C3495
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American College Of Surgeons PAC
Mailing Address 1640 Wisconsin Avenue NW
City Washington State DC Zip Code 20007
FEC ID number of contributing federal political committee. **C** C00382424
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 6
Transaction ID: 60320.C3491
Amount of Each Receipt this Period
2500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Hospital Association PAC
Mailing Address 325 7th St NW
City Washington State DC Zip Code 20004-2818
FEC ID number of contributing federal political committee. **C** C00106146
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 6
Transaction ID: 60320.C3499
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 54 / 109
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
American Neurological Surgery PAC
Mailing Address PO Box 136
City Washington State DC Zip Code 20044-0136
FEC ID number of contributing federal political committee. **C** C00327171
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2006
Transaction ID: 60415.C3687
Amount of Each Receipt this Period
2000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Nurses Association PAC
Mailing Address 8515 Georgia Ave.
City Silver Spring State MD Zip Code 20910
FEC ID number of contributing federal political committee. **C** C00017525
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2006
Transaction ID: 60415.C3688
Amount of Each Receipt this Period
2000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Osteopathic Information Associa
Mailing Address 1090 Vermont Ave. Nw Suite 510
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00113803
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 01 / 2006
Transaction ID: 60320.C3484
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5000.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 / 109
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
American Psychiatric Association PAC

Mailing Address 1400 K St NW

City State Zip Code
Washington DC 20005-2403

FEC ID number of contributing federal political committee. **C** C00373696

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 6

Transaction ID: 60320.C3498

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
American Sugarbeet Growers Assn. PAC

Mailing Address 1156 15th St NW Ste 1101

City State Zip Code
Washington DC 20005-1756

FEC ID number of contributing federal political committee. **C** C00167684

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 6

Transaction ID: 60404.C3681

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Automobile Club Of Michigan Political Ac

Mailing Address 1 Auto Club Drive

City State Zip Code
Dearborn MI 48126

FEC ID number of contributing federal political committee. **C** C00197103

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
125.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 6

Transaction ID: 60404.C3614

Amount of Each Receipt this Period
125.00

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

SUBTOTAL of Receipts This Page (optional)	3125.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 109
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial) Blue Cross And Blue Shield Of MI PAC Mailing Address 602 W Ionia St City Lansing State MI Zip Code 48933-1015 FEC ID number of contributing federal political committee. C C00084061 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6 Transaction ID: 60320.C3487 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
---	--	---

B. Full Name (Last, First, Middle Initial) Brooke Holdings & Jackson National Life Mailing Address Separate Segregated Funds 1 Corporate Way City Lansing State MI Zip Code 48915 FEC ID number of contributing federal political committee. C C00254953 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 Transaction ID: 60320.C3492 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
---	--	---

C. Full Name (Last, First, Middle Initial) Campaign for Maryland Mailing Address 220 Broadway City Centreville State MD Zip Code 21617 FEC ID number of contributing federal political committee. C C00384263 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 6 Transaction ID: 60320.C3596 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
--	--	--

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 109
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
Carpenters Legislative Improvement Cmte.

Mailing Address 101 Constitution Ave Nw

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2006

Transaction ID: 60404.C3609

Amount of Each Receipt this Period
5000.00

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

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

Mailing Address 1350 I Street NW Suite 500

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00033589

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2006

Transaction ID: 60404.C3602

Amount of Each Receipt this Period
3000.00

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

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

Mailing Address 1000 Chrysler Dr # 485-09-02 Cims # 485-09-02

City State Zip Code
Auburn Hills MI 48326-2766

FEC ID number of contributing federal political committee. **C** C00043687

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 09 / 2006

Transaction ID: 60320.C3486

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	9000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 109
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
DTE Energy Co. PAC

Mailing Address 2000 2nd Ave

City State Zip Code
Detroit MI 48226-1203

FEC ID number of contributing federal political committee. **C** C00081547

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 60320.C3489

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Dykema Gossett Federal Pac

Mailing Address 124 W. Allegan Suite 800

City State Zip Code
Lansing MI 48933

FEC ID number of contributing federal political committee. **C** C00342113

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4922.22

Date of Receipt
MM / DD / YYYY
02 / 28 / 2006

Transaction ID: 60320.C3565

Amount of Each Receipt this Period
1600.00

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

C. Full Name (Last, First, Middle Initial)
Every Republican Is Crucial Aka Eric Pac

Mailing Address 4914 Fitzhugh Ave Ste 200

City State Zip Code
Richmond VA 23230-3534

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
9927.19

Date of Receipt
MM / DD / YYYY
03 / 31 / 2006

Transaction ID: 60404.C3600

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional)	7600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 109
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
Federal Express PAC

Mailing Address P.O. Box 529

City State Zip Code
Washington DC 20044

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
01 / 11 / 2006

Transaction ID: 60320.C3520

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Friends of Ray LaHood

Mailing Address 4238 N. Knoxville Ave.

City State Zip Code
Peoria IL 61614

FEC ID number of contributing federal political committee. **C** C00284901

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 15 / 2006

Transaction ID: 60320.C3594

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
General Motors Corporation PAC

Mailing Address 1600 L St NW Ste 400

City State Zip Code
Washington DC 20036-5602

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
MM / DD / YYYY
03 / 01 / 2006

Transaction ID: 60320.C3555

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 / 109
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
Honeywell International PAC

Mailing Address 101 Constitution Ave., NW
Suite 500 W.

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 15 / 2006

Transaction ID: 60320.C3494

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
IUPAT Political Action Together

Mailing Address 1750 New York Ave NW

City Washington State DC Zip Code 20006-5301

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
02 / 15 / 2006

Transaction ID: 60320.C3497

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
IUPAT Political Action Together

Mailing Address 1750 New York Ave NW

City Washington State DC Zip Code 20006-5301

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2006

Transaction ID: 60404.C3605

Amount of Each Receipt this Period
2500.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 109
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
Jackson Leadership Fund

Mailing Address 1339 Horton Road

City State Zip Code
Jackson MI 49203

FEC ID number of contributing federal political committee. **C** C00388025

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 21 / 2006

Transaction ID: 60404.C3607

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Kellogg Better Government Committee

Mailing Address One Kellogg Square
P. O. Box 3599

City State Zip Code
Battle Creek MI 49016

FEC ID number of contributing federal political committee. **C** C00039552

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8341.25

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2006

Transaction ID: 60404.C3611

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
Kellogg Better Government Committee

Mailing Address One Kellogg Square
P. O. Box 3599

City State Zip Code
Battle Creek MI 49016

FEC ID number of contributing federal political committee. **C** C00039552

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2006

Transaction ID: 60404.C3610

Amount of Each Receipt this Period
1658.75

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

SUBTOTAL of Receipts This Page (optional)	▶	7158.75
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 109
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial) LCR PAC Mailing Address 1607 17th Street, NW City Washington State DC Zip Code 20009 FEC ID number of contributing federal political committee. C C00405506 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60404.C3599 Amount of Each Receipt this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	3	1	/	2	0	0	6	5000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	3	1	/	2	0	0	6														
5000.00																							

B. Full Name (Last, First, Middle Initial) Mike R Fund Mailing Address PO Box 65796 City Washington State DC Zip Code 20035-5796 FEC ID number of contributing federal political committee. C C00370791 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60404.C3615 Amount of Each Receipt this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	1	/	2	0	0	6	5000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	2	1	/	2	0	0	6														
5000.00																							

C. Full Name (Last, First, Middle Initial) NEMPAC Mailing Address P.o. Box 619911 City Dallas State TX Zip Code 75261 FEC ID number of contributing federal political committee. C C00140061 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60320.C3564 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	3	/	2	0	0	6	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	2	/	2	3	/	2	0	0	6														
1000.00																							

SUBTOTAL of Receipts This Page (optional)	11000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 109
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
Schwarz for Congress

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

Mailing Address P.o. Box 619911

City State Zip Code
Dallas TX 75261

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2006

Transaction ID: 60404.C3604

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Nick Smith for Better Government

Mailing Address 12780 Addison Road

City State Zip Code
Addison MI 49220

FEC ID number of contributing federal political committee. **C** C00265157

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2006

Transaction ID: 60320.C3595

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 235 East 42nd Street

City State Zip Code
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2006

Transaction ID: 60320.C3482

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 64 / 109
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
Precision Metalforming Association

Mailing Address Voice of the Industry Committee
6363 Oak Tree Blvd.

City Independence State OH Zip Code 44131

FEC ID number of contributing federal political committee. **C** C00082271

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 1 5 / 2 0 0 6

Transaction ID: 60320.C3500

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Promoting Republicans You Can Elect Proj

Mailing Address 1155 21st St NW Ste 300

City Washington State DC Zip Code 20036-3312

FEC ID number of contributing federal political committee. **C** C00330068

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60404.C3598

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
Republican for Env'tl Protection PAC

Mailing Address PO Box 412

City Ridley Park State PA Zip Code 19078-0412

FEC ID number of contributing federal political committee. **C** C00373589

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 7 / 2 0 0 6

Transaction ID: 60404.C3683

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 109
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
Republican Majority For Choice

Mailing Address 57 West 57th Street Suite 1101

City State Zip Code
New York NY 10019

FEC ID number of contributing federal political committee. **C** C00346635

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 03 / 2006

Transaction ID: 60320.C3488

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Restore America PAC

Mailing Address P.O. Box 12526

City State Zip Code
Shawnee Mission KS 66282

FEC ID number of contributing federal political committee. **C** C00344333

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2006

Transaction ID: 60404.C3685

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Southern Minnesota Sugar Coop. PAC

Mailing Address PO Box 500

City State Zip Code
Renville MN 56284-0500

FEC ID number of contributing federal political committee. **C** C00166348

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2006

Transaction ID: 60320.C3493

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 109
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
Straight Talk America

Mailing Address 211 N. Union Street, Ste. 200

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00413245

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
03 / 14 / 2006

Transaction ID: 60404.C3613

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
Telecommunications Industry Assn. PAC

Mailing Address 2500 Wilson Blvd., Suite 300

City State Zip Code
Arlington VA 22201

FEC ID number of contributing federal political committee. **C** C00383356

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2006

Transaction ID: 60415.C3689

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
The Financial Services Roundtable Pac

Mailing Address 1001 Pennsylvania Ave
Suite 500 South

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 15 / 2006

Transaction ID: 60320.C3496

Amount of Each Receipt this Period
1000.00

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

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

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

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

FOR LINE NUMBER: PAGE 67 / 109
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
The Orthopaedic PAC
Mailing Address 317 Massachusetts Ave NE
City State Zip Code
Washington DC 20002-5701
FEC ID number of contributing federal political committee. **C** C00343137
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2006
Transaction ID: 60404.C3603
Amount of Each Receipt this Period
2500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
The Society of Thoracic Surgeons PAC
Mailing Address 1025 Connecticut Ave NW Ste 1104 Suite 1104
City State Zip Code
Washington DC 20036-5405
FEC ID number of contributing federal political committee. **C** C00325936
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2006
Transaction ID: 60404.C3601
Amount of Each Receipt this Period
2000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
United Transportaion Union PAC
Mailing Address 14600 Detroit Avenue
City State Zip Code
Cleveland OH 44107
FEC ID number of contributing federal political committee. **C** C70000468
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2006
Transaction ID: 60404.C3684
Amount of Each Receipt this Period
2500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 68 / 109	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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) Schwarz for Congress

Full Name (Last, First, Middle Initial) A. VenturePAC	
Mailing Address 1655 N Fort Myer Drive Suite 850	
City Arlington	State Zip Code VA 22209
FEC ID number of contributing federal political committee.	C C00150367
Name of Employer	Occupation
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00

Date of Receipt MM / DD / YYYY 02 / 13 / 2006
Transaction ID: 60320.C3485
Amount of Each Receipt this Period 1500.00
Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	89383.75

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

A. Adrian Telegram Full Name (Last, First, Middle Initial) Adrian Telegram Mailing Address 133 N. Winter St City Adrian State MI Zip Code 49221- Purpose of Disbursement Print Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E965 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6 Amount of Each Disbursement this Period 2618.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PRINT ADVERTISING
---	--	---

B. Advanced Mailing Services Full Name (Last, First, Middle Initial) Advanced Mailing Services Mailing Address 2600 Temple Heights Dr City Oceanside State CA Zip Code 92056-3585 Purpose of Disbursement Campaign Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E1063 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6 Amount of Each Disbursement this Period 4214.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN MAIL
--	--	--

C. Alltel Full Name (Last, First, Middle Initial) Alltel Mailing Address 1 Allied Dr City Little Rock State AR Zip Code 72202-2013 Purpose of Disbursement Cell Phone Bill Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60123.E807 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6 Amount of Each Disbursement this Period 259.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE BILL
---	--	--

SUBTOTAL of Disbursements This Page (optional) ▶	7093.03
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

A. Alltel Full Name (Last, First, Middle Initial) Mailing Address 1 Allied Dr City Little Rock State AR Zip Code 72202-2013 Purpose of Disbursement Cell Phone Bill Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E971 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 205.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE BILL
--	--	--

B. Arcadia Brewing Company Full Name (Last, First, Middle Initial) Mailing Address 103 West Michigan Ave City Battle Creek State MI Zip Code 49015- Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E1066 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6 Amount of Each Disbursement this Period 68.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CATERING
---	--	---

C. Artemis Solutions Full Name (Last, First, Middle Initial) Mailing Address 2501 Coolidge Rd. Suite 5 City East Lansing State MI Zip Code 48823- Purpose of Disbursement Computer Technical Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E952 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6 Amount of Each Disbursement this Period 3825.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 COMPUTER TECHNICAL SUPPORT
---	--	--

SUBTOTAL of Disbursements This Page (optional) ▶	4098.83
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Artemis Solutions		Transaction ID: 60415.E972 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6
Mailing Address 2501 Coolidge Rd. Suite 5		Amount of Each Disbursement this Period 252.00
City East Lansing State MI Zip Code 48823-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Computer Technical Support	Candidate Name	001 Category/Type COMPUTER TECHNICAL SUPPORT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Artemis Solutions		Transaction ID: 60415.E992 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address 2501 Coolidge Rd. Suite 5		Amount of Each Disbursement this Period 3114.50
City East Lansing State MI Zip Code 48823-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Computer Technical Support	Candidate Name	001 Category/Type COMPUTER TECHNICAL SUPPORT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Battle Creek Chamber		Transaction ID: 60123.E812 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 0 6
Mailing Address 77 East Michigan Ave		Amount of Each Disbursement this Period 299.00
City Battle Creek State MI Zip Code 49017-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Membership Dues	Candidate Name	012 Category/Type MEMBERSHIP DUES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3665.50
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Battle Creek Enquirer		Transaction ID: 60415.E967 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6
Mailing Address 155 Van Buren St W		Amount of Each Disbursement this Period 2644.50
City State Zip Code Battle Creek MI 49017-3002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Print Advertising	Category/Type 004	PRINT ADVERTISING
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. The Bertram Group		Transaction ID: 60130.E894 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 0 6
Mailing Address 2164 Beechnut Trl		Amount of Each Disbursement this Period 5800.00
City State Zip Code Holt MI 48842-8784	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Consulting Fee	Category/Type 003	FUNDRAISING CONSULTING FEE
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. The Bertram Group		Transaction ID: 60415.E968 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6
Mailing Address 2164 Beechnut Trl		Amount of Each Disbursement this Period 2900.00
City State Zip Code Holt MI 48842-8784	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Consulting Fees	Category/Type 003	FUNDRAISING CONSULTING FE-ES
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	11344.50
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. The Bertram Group		Transaction ID: 60415.E999 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6
Mailing Address 2164 Beechnut Trl		Amount of Each Disbursement this Period 2900.00
City Holt State MI Zip Code 48842-8784	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Consulting Fee Candidate Name	Category/Type 003	FUNDRAISING CONSULTING FEE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. The Bertram Group		Transaction ID: 60415.E1069 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address 2164 Beechnut Trl		Amount of Each Disbursement this Period 765.71
City Holt State MI Zip Code 48842-8784	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Mileage Candidate Name	Category/Type 002	MILEAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Bertram Group		Transaction ID: 60415.E1073 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 2164 Beechnut Trl		Amount of Each Disbursement this Period 2900.00
City Holt State MI Zip Code 48842-8784	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Consulting Fee Candidate Name	Category/Type 003	FUNDRAISING CONSULTING FEE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6565.71
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Best Buy		Transaction ID: 60415.E1020 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 6
Mailing Address 5216 West Saginaw Highway		Amount of Each Disbursement this Period 648.38
City Lansing State MI Zip Code 48917-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type: 001		

Full Name (Last, First, Middle Initial) B. Best Buy		Transaction ID: 60415.E984 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 5216 West Saginaw Highway		Amount of Each Disbursement this Period 84.78
City Lansing State MI Zip Code 48917-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type: 001		

Full Name (Last, First, Middle Initial) C. Calhoun County Republicans		Transaction ID: 60415.E1004 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 5420 Beckley Rd # 361		Amount of Each Disbursement this Period 160.00
City Battle Creek State MI Zip Code 49015-5719	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Event Tickets	Candidate Name	EVENT TICKETS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type: 011		

SUBTOTAL of Disbursements This Page (optional) ▶	893.16
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Transaction ID: 60415.E1075 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 500.00
City Washington State DC Zip Code 20005-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Meals Candidate Name	Category/Type 002	MEALS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cascade Investment Group		Transaction ID: 60415.E1065 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 280 W. Cortland		Amount of Each Disbursement this Period 2500.00
City Jackson State MI Zip Code 49201-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Rent Candidate Name	Category/Type 001	RENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Century Marketing		Transaction ID: 60415.E1026 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 3544 Sunnyside Lane		Amount of Each Disbursement this Period 7585.00
City Markham State VA Zip Code 22643-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign Mail Candidate Name	Category/Type 006	CAMPAIGN MAIL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10585.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Century Marketing		Transaction ID: 60415.E1027 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6
Mailing Address 3544 Sunnyside Lane		Amount of Each Disbursement this Period 8090.00
City Markham State VA Zip Code 22643-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign Mail Candidate Name	Category/Type 006	CAMPAIGN MAIL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Coldwater Daily Reporter		Transaction ID: 60415.E1060 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 15 W. Pearl Street		Amount of Each Disbursement this Period 499.00
City Coldwater State MI Zip Code 49036-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Advertising Candidate Name	Category/Type 004	ADVERTISING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Coldwater Daily Reporter		Transaction ID: 60415.E1059 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 15 W. Pearl Street		Amount of Each Disbursement this Period 85.00
City Coldwater State MI Zip Code 49036-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Advertising Candidate Name	Category/Type 004	ADVERTISING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	8674.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Crooks Advertising Alliance		Transaction ID: 60415.E946 Date of Disbursement MM / DD / YYYY 03 / 13 / 2006	
Mailing Address 2776 Eden Road		Amount of Each Disbursement this Period 5565.16	
City Leslie State MI Zip Code 48251-	Purpose of Disbursement Advertising Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	004 Category/ Type ADVERTISING	

Full Name (Last, First, Middle Initial) B. Dogs R Us		Transaction ID: 60415.E990 Date of Disbursement MM / DD / YYYY 02 / 10 / 2006	
Mailing Address 8329 Diane Lane		Amount of Each Disbursement this Period 749.00	
City Richmond State VA Zip Code 23227-	Purpose of Disbursement Catering Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	003 Category/ Type CATERING	

Full Name (Last, First, Middle Initial) C. Dykema Gossett, PC		Transaction ID: 60123.E810 Date of Disbursement MM / DD / YYYY 01 / 09 / 2006	
Mailing Address 124 W Allegan St Ste 800 Suite 800		Amount of Each Disbursement this Period 1750.00	
City Lansing State MI Zip Code 48933-1724	Purpose of Disbursement Legal Fees Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type LEGAL FEES	

SUBTOTAL of Disbursements This Page (optional) ▶	8064.16
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Eaton County Republicans		Transaction ID: 60415.E998 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address Post Office Box 308		Amount of Each Disbursement this Period 550.00
City Charlotte State MI Zip Code 48813-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Dinner Tickets	Category/Type 011	DINNER TICKETS
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Caryn Eggeraat		Transaction ID: 60415.E1008 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address 1201 F Street, NW		Amount of Each Disbursement this Period 1885.00
City Washington State DC Zip Code 20004-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Category/Type 002	REIMBURSEMENT: SEE BELOW
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Amtrak		Transaction ID: 60415.E1009 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6
Mailing Address 60 Massachusetts Ave NE		Amount of Each Disbursement this Period 1008.00
City Washington State DC Zip Code 20002-4285	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Rail Tickets	Category/Type 002	[MEMO ITEM] MEMO: RAIL TICKETS
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2435.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

A. Caryn Eggeraat Full Name (Last, First, Middle Initial) Mailing Address 1201 F Street, NW City Washington State DC Zip Code 20004- Purpose of Disbursement Cab Fare Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E1010 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 6 Amount of Each Disbursement this Period 20.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CAB FARE REIMBURSEMENT
--	--	---

B. Even Stevens, LLC Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 528 City Jackson State MI Zip Code 49204- Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E1017 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6 Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENT
---	--	---

C. Even Stevens, LLC Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 528 City Jackson State MI Zip Code 49204- Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E1071 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6 Amount of Each Disbursement this Period 1073.71 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENT
---	--	---

SUBTOTAL of Disbursements This Page (optional) ▶	3073.71
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. FedEx Kinkos		Transaction ID: 60415.E1029 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 15.88
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. FedEx Kinkos		Transaction ID: 60415.E1030 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 63.16
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FedEx Kinkos		Transaction ID: 60415.E1031 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 18.99
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	98.03
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. FedEx Kinkos		Transaction ID: 60415.E1032 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 34.88
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. FedEx Kinkos		Transaction ID: 60415.E1033 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 34.00
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FedEx Kinkos		Transaction ID: 60415.E1034 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 53.01
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	121.89
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. FedEx Kinkos		Transaction ID: 60415.E988 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 176.94
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign Materials Candidate Name	Category/Type 006	CAMPAIGN MATERIALS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. FedEx Kinkos		Transaction ID: 60415.E1035 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 16.36
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping Candidate Name	Category/Type 001	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FedEx Kinkos		Transaction ID: 60415.E1036 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 13.08
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping Candidate Name	Category/Type 001	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	206.38
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. FedEx Kinkos		Transaction ID: 60415.E1037 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 40.01
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. FedEx Kinkos		Transaction ID: 60415.E1039 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 35.99
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FedEx Kinkos		Transaction ID: 60415.E1041 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 9.54
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	85.54
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. FedEx Kinkos		Transaction ID: 60415.E1042 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 28.27
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. FedEx Kinkos		Transaction ID: 60415.E1043 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 5930 Enterprise Dr		Amount of Each Disbursement this Period 37.20
City Lansing State MI Zip Code 48911-4109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Overnight Shipping	Candidate Name	OVERNIGHT SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Glengariff Group, Inc.		Transaction ID: 60415.E978 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 1653 West Hollywood Ave.		Amount of Each Disbursement this Period 9500.00
City Chicago State IL Zip Code 60660-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Polling Expense	Candidate Name	POLLING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9565.47
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Grand Blanc Printing Company		Transaction ID: 60415.E1005 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 9449 Holly Road		Amount of Each Disbursement this Period 1149.46
City Grand Blanc State MI Zip Code 48439-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign Materials Candidate Name	Category/Type 006	CAMPAIGN MATERIALS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Greater Albion Chamber of Commerce		Transaction ID: 60415.E977 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6
Mailing Address PO Box 238		Amount of Each Disbursement this Period 80.00
City Albion State MI Zip Code 49224-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Event Tickets Candidate Name	Category/Type 012	EVENT TICKETS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Greater Jackson Chamber of Commerce		Transaction ID: 60415.E976 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6
Mailing Address 1 S Jackson Sq Ste 1100 Suite 1100		Amount of Each Disbursement this Period 147.00
City Jackson State MI Zip Code 49201-2240	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Event Tickets Candidate Name	Category/Type 012	EVENT TICKETS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1376.46
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Gary Herbert		Transaction ID: 60415.E1002 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6
Mailing Address 6600 Herbert Road		Amount of Each Disbursement this Period 553.42
City Delton State MI Zip Code 49046-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Mileage Reimbursement	Category/Type 002	MILEAGE REIMBURSEMENT
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Hillsdale County Chamber of Commerce		Transaction ID: 60415.E974 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6
Mailing Address 22 N Manning St		Amount of Each Disbursement this Period 190.00
City Hillsdale State MI Zip Code 49242-1682	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Membership Dues	Category/Type 012	MEMBERSHIP DUES
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Inspiration Web Works		Transaction ID: 60415.E954 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Mailing Address 6346 Willow Hwy.		Amount of Each Disbursement this Period 35.00
City Grand Ledge State MI Zip Code 48837-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Webmaster Services	Category/Type 001	WEBMASTER SERVICES
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	778.42
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Inspiration Web Works		Transaction ID: 60415.E1076 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Mailing Address 6346 Willow Hwy.		Amount of Each Disbursement this Period 36.00
City Grand Ledge State MI Zip Code 48837-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Webmaster Services Candidate Name	Category/Type 001	WEBMASTER SERVICES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jackson Citizen Patroit		Transaction ID: 60415.E966 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6
Mailing Address 214 South Jackson Street		Amount of Each Disbursement this Period 3174.12
City Jackson State MI Zip Code 49201-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Print Advertising Candidate Name	Category/Type 004	PRINT ADVERTISING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jackson County Republicans		Transaction ID: 60415.E980 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 803 Brighton Rd		Amount of Each Disbursement this Period 200.00
City Jackson State MI Zip Code 49203-3860	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Lincoln Day Expenses Candidate Name	Category/Type 011	LINCOLN DAY EXPENSES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3410.12
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Joel Ross Productions, LLC		Transaction ID: 60415.E1023 Date of Disbursement 01 / 20 / 2006	
Mailing Address 2470 Turner Road		Amount of Each Disbursement this Period 14950.00	
City West Bloomfield State MI Zip Code 48323-	Purpose of Disbursement Ad Production Candidate Name	Category/Type 004 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ AD PRODUCTION		

Full Name (Last, First, Middle Initial) B. Joel Ross Productions, LLC		Transaction ID: 60415.E1015 Date of Disbursement 02 / 14 / 2006	
Mailing Address 2470 Turner Road		Amount of Each Disbursement this Period 2489.00	
City West Bloomfield State MI Zip Code 48323-	Purpose of Disbursement Ad Production Candidate Name	Category/Type 004 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ AD PRODUCTION		

Full Name (Last, First, Middle Initial) C. Jeane Johnson		Transaction ID: 60415.E979 Date of Disbursement 02 / 03 / 2006	
Mailing Address Post Office Box 634		Amount of Each Disbursement this Period 31.50	
City Jackson State MI Zip Code 49204-	Purpose of Disbursement Reimbursement Candidate Name	Category/Type 001 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ REIMBURSEMENT		

SUBTOTAL of Disbursements This Page (optional) ▶	17470.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

A. Jeane Johnson Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 634 City Jackson State MI Zip Code 49204- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E975 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 1100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY
--	--	---

B. Jeane Johnson Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 634 City Jackson State MI Zip Code 49204- Purpose of Disbursement Salary and Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E947 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 6 Amount of Each Disbursement this Period 1162.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY AND REIMBURSEMENT
--	--	---

C. JTV Full Name (Last, First, Middle Initial) Mailing Address 152 W Michigan Ave City Jackson State MI Zip Code 49201-1302 Purpose of Disbursement Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E958 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period 699.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING
--	--	---

SUBTOTAL of Disbursements This Page (optional)	2961.91
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

A. JTV Full Name (Last, First, Middle Initial) Mailing Address 152 W Michigan Ave City Jackson State MI Zip Code 49201-1302 Purpose of Disbursement Purchase of Show Tape Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E963 Date of Disbursement 01 / 25 / 2006 Amount of Each Disbursement this Period 35.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PURCHASE OF SHOW TAPE
--	--	--

B. JTV Full Name (Last, First, Middle Initial) Mailing Address 152 W Michigan Ave City Jackson State MI Zip Code 49201-1302 Purpose of Disbursement Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E945 Date of Disbursement 03 / 21 / 2006 Amount of Each Disbursement this Period 699.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING
--	--	---

C. Lansing State Journal Full Name (Last, First, Middle Initial) Mailing Address 120 East Lenawee Street City Lansing State MI Zip Code 48933- Purpose of Disbursement Print Advertisement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E964 Date of Disbursement 01 / 25 / 2006 Amount of Each Disbursement this Period 6837.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PRINT ADVERTISEMENT
---	--	--

SUBTOTAL of Disbursements This Page (optional) ▶	7571.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Matt Marsden		Transaction ID: 60415.E949 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 624 Hillside Drive		Amount of Each Disbursement this Period 215.72
City Clarkston State MI Zip Code 48346-	Purpose of Disbursement Reimbursement Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 REIMBURSEMENT

Full Name (Last, First, Middle Initial) B. Michigan Retailers Association		Transaction ID: 60415.E1044 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 6
Mailing Address 603 South Washington		Amount of Each Disbursement this Period 3.00
City Lansing State MI Zip Code 48933-	Purpose of Disbursement Processing Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PROCESSING FEE

Full Name (Last, First, Middle Initial) C. Michigan Retailers Association		Transaction ID: 60415.E1045 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 603 South Washington		Amount of Each Disbursement this Period 3.00
City Lansing State MI Zip Code 48933-	Purpose of Disbursement Processing Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PROCESSING FEE

SUBTOTAL of Disbursements This Page (optional) ▶	221.72
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 92 / 109

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Michigan Retailers Association		Transaction ID: 60415.E1046 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6
Mailing Address 603 South Washington		Amount of Each Disbursement this Period 196.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lansing State MI Zip Code 48933-	Category/Type 001	
Purpose of Disbursement Processing Fee Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

PROCESSING FEE

Full Name (Last, First, Middle Initial) B. National Security Service, Inc.		Transaction ID: 60123.E811 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 6
Mailing Address 31600 Telegraph Road Suite 260		Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Birmingham State MI Zip Code 48025-	Category/Type 007	
Purpose of Disbursement Campaign Event Consultant Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

CAMPAIGN EVENT CONSULTANT

Full Name (Last, First, Middle Initial) C. Northwest Airlines		Transaction ID: 60415.E1058 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 6
Mailing Address 2700 Lone Oak Pkwy		Amount of Each Disbursement this Period 529.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Saint Paul State MN Zip Code 55121-1546	Category/Type 002	
Purpose of Disbursement Airline Ticket Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

AIRLINE TICKET

SUBTOTAL of Disbursements This Page (optional) ▶

5726.04

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Office Max		Transaction ID: 60415.E1021 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 6
Mailing Address 5503 W Saginaw Hwy		Amount of Each Disbursement this Period 204.92
City Lansing State MI Zip Code 48917-1920	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type: 001		

Full Name (Last, First, Middle Initial) B. Office Max		Transaction ID: 60415.E1024 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 5503 W Saginaw Hwy		Amount of Each Disbursement this Period 44.80
City Lansing State MI Zip Code 48917-1920	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type: 001		

Full Name (Last, First, Middle Initial) C. Office Max		Transaction ID: 60415.E985 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 5503 W Saginaw Hwy		Amount of Each Disbursement this Period 90.88
City Lansing State MI Zip Code 48917-1920	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type: 001		

SUBTOTAL of Disbursements This Page (optional) ▶	340.60
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Office Max		Transaction ID: 60415.E986 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 5503 W Saginaw Hwy		Amount of Each Disbursement this Period 1348.73
City Lansing State MI Zip Code 48917-1920	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) B. Office Max		Transaction ID: 60415.E983 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 5503 W Saginaw Hwy		Amount of Each Disbursement this Period 476.97
City Lansing State MI Zip Code 48917-1920	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) C. Office Max		Transaction ID: 60415.E948 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 6
Mailing Address 5503 W Saginaw Hwy		Amount of Each Disbursement this Period 983.69
City Lansing State MI Zip Code 48917-1920	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶	2809.39
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Office Max		Transaction ID: 60415.E1047 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 5503 W Saginaw Hwy		Amount of Each Disbursement this Period 104.63
City Lansing State MI Zip Code 48917-1920	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) B. Office Max		Transaction ID: 60415.E981 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6
Mailing Address 5503 W Saginaw Hwy		Amount of Each Disbursement this Period 116.76
City Lansing State MI Zip Code 48917-1920	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: 60415.E1049 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 1429.10
City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll	Candidate Name	001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶	1650.49
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: 60415.E1050 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 96.10
City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Processing Candidate Name	Category/Type 001	PAYROLL PROCESSING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: 60415.E1051 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 1429.10
City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name	Category/Type 001	PAYROLL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: 60415.E1052 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 1429.10
City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name	Category/Type 001	PAYROLL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2954.30
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: 60415.E1053 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 130.53
City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Processing Candidate Name	Category/Type 001	PAYROLL PROCESSING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: 60415.E1054 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 1429.10
City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name	Category/Type 001	PAYROLL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: 60415.E1055 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 9922.62
City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name	Category/Type 001	PAYROLL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	11482.25
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

A. Pitcock Design Full Name (Last, First, Middle Initial) Mailing Address 3436 N. Seminary #2 City Chicago State IL Zip Code 60657- Purpose of Disbursement Advertising Production Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E991 Date of Disbursement: M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6 Amount of Each Disbursement this Period 450.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING PRODUCTION
--	--	--

B. Pitcock Design Full Name (Last, First, Middle Initial) Mailing Address 3436 N. Seminary #2 City Chicago State IL Zip Code 60657- Purpose of Disbursement Advertising Production Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E950 Date of Disbursement: M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 6 Amount of Each Disbursement this Period 450.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING PRODUCTION
--	--	--

C. Practical Political Consulting Full Name (Last, First, Middle Initial) Mailing Address 220 Albert Ave., #2 City East Lansing State MI Zip Code 48823- Purpose of Disbursement List Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60415.E1062 Date of Disbursement: M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 LIST
---	--	---

SUBTOTAL of Disbursements This Page (optional) ▶	10900.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

A. Saline Chamber of Commerce Full Name (Last, First, Middle Initial) Mailing Address 141 E. Michigan Ave. City Saline State MI Zip Code 48176-		Transaction ID: 60415.E1003 Date of Disbursement: M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Purpose of Disbursement Event Tickets Candidate Name		Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CATEGORY/TYPE 012 EVENT TICKETS

B. SBC Michigan Full Name (Last, First, Middle Initial) Mailing Address 201 N Washington Sq City Lansing State MI Zip Code 48933-1321		Transaction ID: 60415.E953 Date of Disbursement: M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Purpose of Disbursement Phone Bill Candidate Name		Amount of Each Disbursement this Period 23.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CATEGORY/TYPE 001 PHONE BILL

C. SBC Michigan Full Name (Last, First, Middle Initial) Mailing Address 201 N Washington Sq City Lansing State MI Zip Code 48933-1321		Transaction ID: 60415.E962 Date of Disbursement: M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 6
Purpose of Disbursement Phone Bill Candidate Name		Amount of Each Disbursement this Period 25.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CATEGORY/TYPE 001 PHONE BILL

SUBTOTAL of Disbursements This Page (optional) ▶	149.52
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 100 / 109

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. SBC Michigan		Transaction ID: 60415.E993 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address 201 N Washington Sq		Amount of Each Disbursement this Period 25.03
City Lansing State MI Zip Code 48933-1321	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Phone Bill	Category/Type 001	PHONE BILL
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Schulers Restaurant		Transaction ID: 60415.E955 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Mailing Address 115 S. Eagle Street		Amount of Each Disbursement this Period 1578.85
City Marshall State MI Zip Code 49068-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Catering	Category/Type 007	CATERING
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. John Schwarz		Transaction ID: 60415.E951 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 251 Central Street		Amount of Each Disbursement this Period 121.98
City Battle Creek State MI Zip Code 49017-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Travel Reimbursement	Category/Type 002	TRAVEL REIMBURSEMENT
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	1725.86
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 101 / 109

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. John Schwarz		Transaction ID: 60415.E989 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 251 Central Street		Amount of Each Disbursement this Period 475.75
City Battle Creek State MI Zip Code 49017-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Travel Reimbursement	Candidate Name	TRAVEL REIMBURSEMENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. John Schwarz		Transaction ID: 60415.E1070 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address 251 Central Street		Amount of Each Disbursement this Period 207.08
City Battle Creek State MI Zip Code 49017-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Meals	Candidate Name	MEALS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. SCM Associates		Transaction ID: 60123.E803 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Mailing Address 10 Main Street		Amount of Each Disbursement this Period 8069.50
City Jaffrey State NH Zip Code 03452-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Direct Mail	Candidate Name	DIRECT MAIL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	8752.33
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 102 / 109

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. SCM Associates		Transaction ID: 60415.E959 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 10 Main Street		Amount of Each Disbursement this Period 3653.55 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Jaffrey State NH Zip Code 03452-	Category/Type 003	
Purpose of Disbursement Fundraising and Direct Mail	Candidate Name	FUNDRAISING AND DIRECT MAIL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sprint - Nextel		Transaction ID: 60123.E805 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Mailing Address PO Box 17990		Amount of Each Disbursement this Period 115.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Denver State CO Zip Code 80217-0990	Category/Type 001	
Purpose of Disbursement Cell Phone Bill	Candidate Name	CELL PHONE BILL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sprint - Nextel		Transaction ID: 60415.E973 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6
Mailing Address PO Box 17990		Amount of Each Disbursement this Period 139.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Denver State CO Zip Code 80217-0990	Category/Type 001	
Purpose of Disbursement Cell Phone Bill	Candidate Name	CELL PHONE BILL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3908.50
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Sprint - Nextel		Transaction ID: 60415.E1057 Date of Disbursement MM / DD / YYYY 02 / 24 / 2006
Mailing Address PO Box 17990		Amount of Each Disbursement this Period 311.99
City Denver State CO Zip Code 80217-0990	Purpose of Disbursement Cell Phone Bill Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE BILL

Full Name (Last, First, Middle Initial) B. Such Video		Transaction ID: 60123.E809 Date of Disbursement MM / DD / YYYY 01 / 09 / 2006
Mailing Address 111 East Grand River Avenue		Amount of Each Disbursement this Period 40.00
City Lansing State MI Zip Code 49096-	Purpose of Disbursement Advertising Production Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING PRODUCTION

Full Name (Last, First, Middle Initial) C. T Mobile		Transaction ID: 60123.E802 Date of Disbursement MM / DD / YYYY 01 / 17 / 2006
Mailing Address PO Box 37380		Amount of Each Disbursement this Period 297.68
City Albuquerque State NM Zip Code 87176-7380	Purpose of Disbursement Cell Phone Bill Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE BILL

SUBTOTAL of Disbursements This Page (optional) ▶	649.67
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

PAGE 104 / 109

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. T Mobile		Transaction ID: 60415.E970 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6
Mailing Address PO Box 37380		Amount of Each Disbursement this Period 114.03
City Albuquerque State NM Zip Code 87176-7380	Purpose of Disbursement Cell Phone Bill Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE BILL

Full Name (Last, First, Middle Initial) B. T Mobile		Transaction ID: 60415.E994 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address PO Box 37380		Amount of Each Disbursement this Period 31.17
City Albuquerque State NM Zip Code 87176-7380	Purpose of Disbursement Cell Phone Bill Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE BILL

Full Name (Last, First, Middle Initial) C. Tee to Green Promotional Products		Transaction ID: 60415.E997 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address 3030 Sanders Rd # 1 Box 1		Amount of Each Disbursement this Period 435.02
City Lansing State MI Zip Code 48917-8552	Purpose of Disbursement Campaign Materials Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN MATERIALS

SUBTOTAL of Disbursements This Page (optional) ▶	580.22
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 105 / 109

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. The John Truscott Group		Transaction ID: 60415.E960 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6
Mailing Address 124 West Allegan Street Suite 2010		Amount of Each Disbursement this Period 4000.00
City Lansing State MI Zip Code 48933-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Political Consulting Fees	Category/Type 001	POLITICAL CONSULTING FEES
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. The Technicom Group		Transaction ID: 60415.E1025 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 14100 Oakland Ave.		Amount of Each Disbursement this Period 5395.72
City Highland Park State MI Zip Code 48203-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign Mail	Category/Type 006	CAMPAIGN MAIL
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Travelocity		Transaction ID: 60415.E1056 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address 3150 Sabre Dr		Amount of Each Disbursement this Period 5.00
City Southlake State TX Zip Code 76092-2103	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Travel Booking Fee	Category/Type 002	TRAVEL BOOKING FEE
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	9400.72
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 106 / 109

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

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)
Schwarz for Congress

A. Full Name (Last, First, Middle Initial)
Us Postmaster, Lansing

Transaction ID: 60123.E804
Date of Disbursement

Mailing Address Downtown Station

/ /

City Lansing State MI Zip Code 48933-

Amount of Each Disbursement this Period

Purpose of Disbursement
Postage

Category/
Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: Primary General
 Other (specify) ▼

POSTAGE

State: District:

B. Full Name (Last, First, Middle Initial)
Us Postmaster, Lansing

Transaction ID: 60415.E987
Date of Disbursement

Mailing Address Downtown Station

/ /

City Lansing State MI Zip Code 48933-

Amount of Each Disbursement this Period

Purpose of Disbursement
Postage

Category/
Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: Primary General
 Other (specify) ▼

POSTAGE

State: District:

C. Full Name (Last, First, Middle Initial)
Us Postmaster, Lansing

Transaction ID: 60415.E944
Date of Disbursement

Mailing Address Downtown Station

/ /

City Lansing State MI Zip Code 48933-

Amount of Each Disbursement this Period

Purpose of Disbursement
Postage

Category/
Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: Primary General
 Other (specify) ▼

POSTAGE

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 107 / 109

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: 60123.E808 Date of Disbursement 01 / 18 / 2006	
Mailing Address P.O. Box 9058		Amount of Each Disbursement this Period 284.43	
City Dublin	State OH	Zip Code 43017-	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Cell Phone Bill		Category/ Type 001	
Candidate Name		CELL PHONE BILL	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: 60415.E1022 Date of Disbursement 01 / 25 / 2006	
Mailing Address P.O. Box 9058		Amount of Each Disbursement this Period 476.99	
City Dublin	State OH	Zip Code 43017-	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Cell Phone		Category/ Type 001	
Candidate Name		CELL PHONE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: 60415.E1011 Date of Disbursement 02 / 14 / 2006	
Mailing Address P.O. Box 9058		Amount of Each Disbursement this Period 511.58	
City Dublin	State OH	Zip Code 43017-	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Cell Phone Bill		Category/ Type 001	
Candidate Name		CELL PHONE BILL	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	1273.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 108 / 109

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

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)
Schwarz for Congress

Full Name (Last, First, Middle Initial) A. Victor Properties		Transaction ID: 60415.E1001 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6
Mailing Address 6123 W. Saginaw		Amount of Each Disbursement this Period 11700.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lansing State MI Zip Code 48933-	Category/Type 001	
Purpose of Disbursement Rent	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	RENT
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

Full Name (Last, First, Middle Initial) B. Brenda Webster		Transaction ID: 60415.E942 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6
Mailing Address 159 Clyde James		Amount of Each Disbursement this Period 212.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Pleasant Lake State MI Zip Code 49272-	Category/Type 001	
Purpose of Disbursement Office Supplies Reimbursement	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	OFFICE SUPPLIES REIMBURSEMENT
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

SUBTOTAL of Disbursements This Page (optional) ►

11912.51

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

185161.44

Image# 26950203033

Form/Schedule: **F3A** This amendment is filed in response to the request for additional information. Please contact Jennifer Bertram with any questions at 517-927-1066.
Transaction ID: **C00395822**
