

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
**STABENOW 2012 VICTORY FUND**

ADDRESS (number and street) PO BOX 4462  
 Check if different than previously reported. (ACC) EAST LANSING MI 48826

2. **FEC IDENTIFICATION NUMBER** C C00495580 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
MI 00

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 M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
07 / 01 / 2011 through 12 / 31 / 2011

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 Cheryl Bergman  
Signature of Treasurer Cheryl Bergman *[Electronically Filed]* Date M M / D D / Y Y Y Y  
04 / 09 / 2012

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  
**STABENOW 2012 VICTORY FUND**

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

	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))....	199800.00	251900.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	199800.00	251900.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	41858.20	42488.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	41858.20	42488.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	11311.98	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**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 12/2003)

Write or Type Committee Name

**STABENOW 2012 VICTORY FUND**

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

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).....	193100.00	240200.00
(ii) Unitemized.....	700.00	700.00
(iii) TOTAL of contributions from individuals ▶	193800.00	240900.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	11000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	199800.00	251900.00
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	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	199800.00	251900.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	41858.20	42488.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	147500.00	198100.00
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	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	189358.20	240588.02

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	870.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	199800.00
25. SUBTOTAL (add Line 23 and Line 24).....	200670.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	189358.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	11311.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Elizabeth L Aderholdt**

Mailing Address 8077 Hawkcrest Dr

City Grand Blanc State MI Zip Code 48439-2422

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

Name of Employer Genesys Health System Occupation President

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : SA11AI.4313**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Akerson**

Mailing Address 1135 Shelby St  
Apt 2710

City Detroit State MI Zip Code 48226-2634

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

Name of Employer General Motors Occupation Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2011

**Transaction ID : SA11AI.4307**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Theresa Baker**

Mailing Address 5628 Pine Aire Court

City Rochester Hills State MI Zip Code 48306

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

Name of Employer . Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2011

**Transaction ID : SA11AI.4288**

Amount of Each Receipt this Period  
1000.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Vernon G Baker II</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011	
Mailing Address 5826 Pine Aire Ct		<b>Transaction ID : SA11AI.4287</b>	
City Rochester Hills	State MI	Zip Code 48306-2251	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00	
Name of Employer Meritor Inc	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00		

Full Name (Last, First, Middle Initial) <b>B. Max Berlin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011	
Mailing Address 17517 Adrian Rd		<b>Transaction ID : SA11AI.4284</b>	
City Southfield	State MI	Zip Code 48075-1949	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00	
Name of Employer MeasureComp	Occupation President/Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Mandell Berman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2011	
Mailing Address 29100 Northwestern Hwy Suite 370		<b>Transaction ID : SA11AI.4269</b>	
City Southfield	State MI	Zip Code 48034	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00	
Name of Employer MLB Investments Inc.	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14000.00
<b>TOTAL</b> This Period (last page this line number only).....	14000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Mark Bernstein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011	
Mailing Address 2002 Scottwood Ave		<b>Transaction ID : SA11AI.4282</b>	
City Ann Arbor	State MI	Zip Code 48104-4511	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00	
Name of Employer Law Offices of Sam Bernstein	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Paul Blizman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 10 / 2011	
Mailing Address 28700 Herndonwood Dr		<b>Transaction ID : SA11AI.4277</b>	
City Farmington Hills	State MI	Zip Code 48334-5235	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self-employed	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. Harvey Bronstein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2011	
Mailing Address 22490 Hallcroft Trl		<b>Transaction ID : SA11AI.4259</b>	
City Southfield	State MI	Zip Code 48034-5498	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Oakland Community College	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Timothy Bryan**

Mailing Address 2 Executive Dr  
Ste 430

City Somerset State NJ Zip Code 08873-4003

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

Name of Employer GalaxE.Solutions Occupation Chairman/Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 13 / 2011

**Transaction ID : SA11AI.4283**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**Geraldine Buckles**

Mailing Address 16910 Locherbie

City Beverly Hills State MI Zip Code 48029

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

Name of Employer Self Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2011

**Transaction ID : SA11AI.4299**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Geraldine Buckles**

Mailing Address 16910 Locherbie

City Beverly Hills State MI Zip Code 48029

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

Name of Employer Self Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2011

**Transaction ID : SA11AI.4423**

Amount of Each Receipt this Period  
-5000.00

Reattribute:

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

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

5000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Michael Buckles</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011
Mailing Address 16910 Locherbie		<b>Transaction ID : SA11AI.4424</b>
City Beverly Hills	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Self Employed	Occupation Attorney	Reattribute:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Carolyn Cassin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 10 / 2011
Mailing Address 217 Lake Shore Rd		<b>Transaction ID : SA11AI.4278</b>
City Grosse Pointe Farms	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Michigan Women's Foundation	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Roy Chapman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 08 / 2011
Mailing Address 3471 S Hemlock Rd		<b>Transaction ID : SA11AI.4273</b>
City Hemlock	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer .	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 10 OF 37  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Christine Comstock**

Mailing Address 3226 Wellington Ct

City State Zip Code  
West Bloomfield MI 48324-2162

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

Name of Employer Occupation  
. Retired

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 15 / 2011

**Transaction ID : SA11AI.4326**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Amy Courter**

Mailing Address 9081 Silverside Dr

City State Zip Code  
South Lyon MI 48178

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

Name of Employer Occupation  
VisionIT CIO

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2011

**Transaction ID : SA11AI.4315**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jane Ann Damren**

Mailing Address 1133 Bishop Rd

City State Zip Code  
Grosse Pointe MI 48230-1422

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

Name of Employer Occupation  
SPEC Associates Project Associate

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 10 / 2011

**Transaction ID : SA11AI.4279**

Amount of Each Receipt this Period  
250.00

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

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

1500.00

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

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

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Nina Dodge Abrams**

Mailing Address 12959 Talbot Ln

City State Zip Code  
Huntington Woods MI 48070-1049

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

Name of Employer Occupation  
Abrams Law Firm Attorney

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2011

**Transaction ID : SA11AI.4290**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Eugene Driker**

Mailing Address 1525 Wellesley Dr

City State Zip Code  
Detroit MI 48203-1477

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

Name of Employer Occupation  
Barris Sott Denn & Driker Attorney

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 10 / 2011

**Transaction ID : SA11AI.4281**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Sue Ellen Eisenberg**

Mailing Address 700 Lone Pine Rd.

City State Zip Code  
Bloomfield Hills MI 48304

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

Name of Employer Occupation  
Sue Ellen Eisenberg & Associat Attorney

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
10400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2011

**Transaction ID : SA11AI.4162**

Amount of Each Receipt this Period  
10400.00

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

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

13400.00

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

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

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Sally Foley</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011
Mailing Address 1030 Covington Rd		<b>Transaction ID : SA11AI.4291</b>
City Bloomfield Hills	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self-employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>B. Sandy Fortier</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 29 / 2011
Mailing Address 3265 W. Maple Rd.		<b>Transaction ID : SA11AI.4143</b>
City Ann Arbor	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Self Employed	Occupation Psychotherapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Sandy Fortier</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2011
Mailing Address 3265 W. Maple Rd.		<b>Transaction ID : SA11AI.4270</b>
City Ann Arbor	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Self Employed	Occupation Psychotherapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Fox**

Mailing Address 3652 E Meadows Ct

City Okemos State MI Zip Code 48864-3920

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

Name of Employer Self Employed Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2011

**Transaction ID : SA11AI.4280**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Anand Gangadharan**

Mailing Address 23390 Winnsborough

City Novi State MI Zip Code 48375-4007

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

Name of Employer Novi Energy LLC Occupation President/Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2011

**Transaction ID : SA11AI.4285**

Amount of Each Receipt this Period  
3750.00

**C.** Full Name (Last, First, Middle Initial)  
**Ruth Glancy**

Mailing Address 40 Preston Pl

City Grosse Pointe Farms State MI Zip Code 48236-3036

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

Name of Employer . Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2011

**Transaction ID : SA11AI.4308**

Amount of Each Receipt this Period  
1000.00

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

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

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

Mailing Address 2493 Davis Rd

City Fenton State MI Zip Code 48430-8852

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

Name of Employer St. Mary's of Michigan Occupation Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : SA11AI.4314**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 420 Martell Dr

City Bloomfield Hills State MI Zip Code 48304-3452

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

Name of Employer . Occupation Volunteer

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : SA11AI.4320**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Leo Hindery**

Mailing Address 188 E. 78th St.

City New York State NY Zip Code 10075

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

Name of Employer InterMedia Parnter LP Occupation Managing Parter

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2011

**Transaction ID : SA11AI.4151**

Amount of Each Receipt this Period  
5200.00

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

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

10700.00

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

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

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Frederick Hoffman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2011
Mailing Address 21800 Morley Ave Apt 1005		<b>Transaction ID : SA11AI.4263</b>
City Dearborn State MI Zip Code 48124-2342	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer State of Michigan	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Marian Ilitch</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2011
Mailing Address 2211 Woodward Ave		<b>Transaction ID : SA11AI.4301</b>
City Detroit State MI Zip Code 48201-3467	Amount of Each Receipt this Period 15000.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15000.00
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15000.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Ilitch</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2011
Mailing Address Ilitch Holdings Inc 2211 Woodward Av		<b>Transaction ID : SA11AI.4302</b>
City Detroit State MI Zip Code 48201-3400	Amount of Each Receipt this Period 15000.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15000.00
Name of Employer Ilitch Holdings Inc	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30250.00
<b>TOTAL</b> This Period (last page this line number only).....	30250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Hassan Jaber**

Mailing Address 2651 Saulino Ct

City Dearborn State MI Zip Code 48120

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

Name of Employer ACCESS Occupation Executive Director

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2011

**Transaction ID : SA11AI.4289**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Gloria Jarecki**

Mailing Address 10 Timber Trl

City Rye State NY Zip Code 10580-1935

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

Name of Employer Self-employed Occupation Business Executive

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2011

**Transaction ID : SA11AI.4312**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jumana Judeh**

Mailing Address Judeh & Associates  
22952 Outer Dr

City Dearborn State MI Zip Code 48124

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

Name of Employer Judeh & Associates Occupation President

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2011

**Transaction ID : SA11AI.4304**

Amount of Each Receipt this Period  
250.00

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

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

6250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Geraldine Kilsdonk</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 08 / 2011	
Mailing Address 375 Red Ryder Dr		<b>Transaction ID : SA11AI.4272</b>	
City Plymouth	State MI	Zip Code 48170-2160	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer .	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. Zina Kramer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011	
Mailing Address 1600 Apple Ln		<b>Transaction ID : SA11AI.4319</b>	
City Bloomfield Hills	State MI	Zip Code 48302-1303	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Events Marketing	Occupation Owner		
Receipt For: <input 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>C. Ann Evans Larimore</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 08 / 2011	
Mailing Address 916 Olivia Ave		<b>Transaction ID : SA11AI.4271</b>	
City Ann Arbor	State MI	Zip Code 48104-3535	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00	
Name of Employer .	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7250.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 18 OF 37  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Bonnie Larson**

Mailing Address 580 Yarboro Dr.

City State Zip Code  
Bloomfield Hills MI 48304

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2011

**Transaction ID : SA11AI.4177**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**Timothy Light**

Mailing Address 1017 Essex Circle

City State Zip Code  
Kalamazoo MI 49008

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 31 / 2011

**Transaction ID : SA11AI.4147**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dov Loketch**

Mailing Address 25940 Stratford Pl

City State Zip Code  
Oak Park MI 48237-1028

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

Name of Employer Occupation  
Sterling Group Construction Manager

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 13 / 2011

**Transaction ID : SA11AI.4311**

Amount of Each Receipt this Period  
2000.00

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

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

12000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Lorenz**

Mailing Address 3226 Wellington Ct

City West Bloomfield State MI Zip Code 48324-2162

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

Name of Employer William Beaumont Hospital Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2011

**Transaction ID : SA11AI.4325**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael J Malik Sr**

Mailing Address 2211 Woodward Ave

City Detroit State MI Zip Code 48201-3467

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

Name of Employer Self-employed Occupation Developer

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2011

**Transaction ID : SA11AI.4303**

Amount of Each Receipt this Period  
10000.00

**C.** Full Name (Last, First, Middle Initial)  
**Stephen Munk**

Mailing Address 15976 Winchester Dr

City Northville State MI Zip Code 48168-2345

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

Name of Employer Ash Stevens Occupation Chief Executive Officer/President

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2011

**Transaction ID : SA11AI.4293**

Amount of Each Receipt this Period  
250.00

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

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

10500.00

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

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

FOR LINE NUMBER: (check only one)	PAGE 20 OF 37
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Hanna Newman</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 20 / 2011	
Mailing Address 1762 Saint Johns Ct		<b>Transaction ID : SA11AI.4318</b>	
City Bloomfield Hills	State MI	Zip Code 48302-1776	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00	
Name of Employer Frank W. Kerr Company	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00		

Full Name (Last, First, Middle Initial) <b>B. Dr Gail Ann Northcutt</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 04 / 2011	
Mailing Address 560 Parkview Dr Apt 201		<b>Transaction ID : SA11AI.4265</b>	
City Detroit	State MI	Zip Code 48214-4113	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Detroit Public Schools	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. Rolland O'Hare</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 02 / 2011	
Mailing Address 8162 E Jefferson Ave # 17A		<b>Transaction ID : SA11AI.4258</b>	
City Detroit	State MI	Zip Code 48214-2611	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer .	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5250.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 21 OF 37  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Theodore Pantos**

Mailing Address 45 Warner Rd

City State Zip Code  
Grosse Pointe Farms MI 48236-3745

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

Name of Employer Occupation  
. Retired

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2011

**Transaction ID : SA11AI.4292**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Dimitrios Papas**

Mailing Address 1001 Woodward Ave  
Ste 400

City State Zip Code  
Detroit MI 48226-2723

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

Name of Employer Occupation  
Helicon Holdings Owner

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 28 / 2011

**Transaction ID : SA11AI.4321**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Valerie Parisi**

Mailing Address 540 E Canfield St  
1241 Scott Hall

City State Zip Code  
Detroit MI 48201-1928

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

Name of Employer Occupation  
WSU School of Medicine Dean

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2011

**Transaction ID : SA11AI.4286**

Amount of Each Receipt this Period  
1500.00

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

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

6750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Pechanga Band of Luiseno Indians**

Mailing Address **PO Box 1477**

City **Temecula** State **CA** Zip Code **92593**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2011**

**Transaction ID : SA11AI.4322**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**David Provost**

Mailing Address **952 Brookwood St**

City **Birmingham** State **MI** Zip Code **48009-1102**

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

Name of Employer Occupation  
**Tamer President**

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 13 / 2011**

**Transaction ID : SA11AI.4309**

Amount of Each Receipt this Period  
**2000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jon Reardon**

Mailing Address **7595 Laurie Ln N**

City **Saginaw** State **MI** Zip Code **48609-4943**

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

Name of Employer Occupation  
**Hoyt Nursing & Rehab Centre Owner/Administrator**

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 04 / 2011**

**Transaction ID : SA11AI.4264**

Amount of Each Receipt this Period  
**250.00**

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

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

**4750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Lynnette Rhodes**

Mailing Address 1330 Hickory Island St

City Haslett State MI Zip Code 48840-8944

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

Name of Employer L & S Associates Inc Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2011

**Transaction ID : SA11AI.4276**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lisa Shiffman**

Mailing Address 6212 Bromley Ct.

City West Bloomfield State MI Zip Code 48322

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

Name of Employer Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2011

**Transaction ID : SA11AI.4149**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 5000 Town Ctr Apt 2603

City Southfield State MI Zip Code 48075-1117

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

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2011

**Transaction ID : SA11AI.4275**

Amount of Each Receipt this Period  
5000.00

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

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

15000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**JoAnne E Smith**

Mailing Address 31858 Staman Cir

City Farmington Hills State MI Zip Code 48336-1848

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

Name of Employer . Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2011

**Transaction ID : SA11AI.4245**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Lance Stokes**

Mailing Address 2750 Bay Dr

City West Bloomfield State MI Zip Code 48324-2028

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

Name of Employer ECI, Inc. Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2011

**Transaction ID : SA11AI.4274**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Gary Torgow**

Mailing Address 14661 Ludlow St

City Oak Park State MI Zip Code 48237-4112

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

Name of Employer Sterling Group Occupation Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : SA11AI.4310**

Amount of Each Receipt this Period  
2000.00

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Gary Torgow</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2011
Mailing Address 14661 Ludlow St		<b>Transaction ID : SA11AI.4316</b>
City Oak Park	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Sterling Group	Occupation Chief Executive Officer	Election Cycle-to-Date 3500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Malke Torgow</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2011
Mailing Address 14661 Ludlow St		<b>Transaction ID : SA11AI.4317</b>
City Oak Park	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer .	Occupation Homemaker	Election Cycle-to-Date 1500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Marianne Udow-Phillips</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2011
Mailing Address 2280 Gale Rd		<b>Transaction ID : SA11AI.4260</b>
City Ann Arbor	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer University of Michigan Health System	Occupation Director	Election Cycle-to-Date 5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**David R Victor**

Mailing Address American Education Institute  
401 S Old Woodward Ave #333

City Birmingham State MI Zip Code 48009

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

Name of Employer American Education Institute Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2011

**Transaction ID : SA11AI.4267**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jackie Victor**

Mailing Address 4835 2nd Ave # 2

City Detroit State MI Zip Code 48201-1227

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

Name of Employer Avalon International Breads Occupation Bakery Owner

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2011

**Transaction ID : SA11AI.4268**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Patricia Wheeler**

Mailing Address 188 E. 78th St.

City New York State NY Zip Code 10075

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

Name of Employer Speed Channel Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2011

**Transaction ID : SA11AI.4153**

Amount of Each Receipt this Period  
5200.00

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

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

7200.00

193100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 37
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of WSUSOM**

Mailing Address **PO Box 44406**

City **Detroit** State **MI** Zip Code **48244**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 16 / 2011**

**Transaction ID : SA11C.4375**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 324 NATIONAL POLITICAL ACTIVITIES COMM.**

Mailing Address **500 HULET DRIVE**

City **BLOOMFIELD TWP.** State **MI** Zip Code **48302**

FEC ID number of contributing federal political committee. **C C00093989**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 07 / 2011**

**Transaction ID : SA11C.4160**

Amount of Each Receipt this Period  
**5000.00**

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**6000.00**

**6000.00**

**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 28 OF 37			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2011
Mailing Address 14 Arrow St.			Amount of Each Disbursement this Period 410.80 <b>Transaction ID : SB17.4155</b>
City Cambridg	State MA	Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fee		Candidate Name	Category/ Type
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>B. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2011
Mailing Address 14 Arrow St.			Amount of Each Disbursement this Period 197.50 <b>Transaction ID : SB17.4156</b>
City Cambridg	State MA	Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fee		Candidate Name	Category/ Type
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>C. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2011
Mailing Address 14 Arrow St.			Amount of Each Disbursement this Period 270.59 <b>Transaction ID : SB17.4327</b>
City Cambridg	State MA	Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fee		Candidate Name	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	878.89
<b>TOTAL</b> 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 29 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2011
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 326.69 <b>Transaction ID : SB17.4328</b>
City Cambrid	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2011
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 396.98 <b>Transaction ID : SB17.4329</b>
City Cambrid	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2011
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 98.75 <b>Transaction ID : SB17.4330</b>
City Cambrid	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	822.42
<b>TOTAL</b> 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 30 OF 37	
	<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

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2011
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 197.50 <b>Transaction ID : SB17.4332</b>
City Cambrid	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 79.00 <b>Transaction ID : SB17.4331</b>
City Cambrid	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address PO Box 0001		Amount of Each Disbursement this Period 11152.17 <b>Transaction ID : SB17.4348</b>
City Los Angeles	State CA	
Zip Code 90096	Purpose of Disbursement Room Rental & Setup	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11428.67
<b>TOTAL</b> 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 31 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Detroit Marriott Ren Cen</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 400 Renaissance Center		Amount of Each Disbursement this Period 2290.10
City Detroit	State MI Zip Code 48243	
Purpose of Disbursement Room Rental & Set Up	Candidate Name	Transaction ID : SB17.4348.0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Barclays</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address P.O. Box 13337		Amount of Each Disbursement this Period 2290.10
City Philadelphia	State PA Zip Code 19101	
Purpose of Disbursement Audio Visual Setup	Candidate Name	Transaction ID : SB17.4370
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Chase Creative Unlimited</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address 9282 General Dr. Ste 180		Amount of Each Disbursement this Period 2290.10
City Plymouth	State MI Zip Code 48170	
Purpose of Disbursement Audio Visual Setup	Candidate Name	Transaction ID : SB17.4370.0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2290.10
<b>TOTAL</b> 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 32 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. DNC Travel Offset Account</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2011
Mailing Address 430 S. Capitol St. SE		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Travel costs	
Candidate Name	Category/Type	Transaction ID : SB17.4171
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>B. First Financial Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2011
Mailing Address PO Box 42070		Amount of Each Disbursement this Period 527.88
City Middletown State OH Zip Code 45042	Purpose of Disbursement Hotel & Airfare	
Candidate Name	Category/Type	Transaction ID : SB17.4357
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>C. Detroit Marriott Ren Cen</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2011
Mailing Address 400 Renaissance Center		Amount of Each Disbursement this Period 171.48
City Detroit State MI Zip Code 48243	Purpose of Disbursement Hotel	
Candidate Name	Category/Type	Transaction ID : SB17.4357.0 <b>[MEMO ITEM]</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15527.88
<b>TOTAL</b> 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 33 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Delta Air</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2011
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 356.40
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Airfare	Transaction ID : SB17.4357.1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gary Shrewsbury Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address PO Box 12104		Amount of Each Disbursement this Period 730.80
City Lansing	State MI	
Zip Code 48901	Purpose of Disbursement Photography	Transaction ID : SB17.4337
Candidate Name	Category/Type	
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>c. Gary Shrewsbury Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address PO Box 12104		Amount of Each Disbursement this Period 91.00
City Lansing	State MI	
Zip Code 48901	Purpose of Disbursement Photography	Transaction ID : SB17.4364
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	821.80
<b>TOTAL</b> 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 34 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Inland Press</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address 2001 W. Lafayette		Amount of Each Disbursement this Period 1886.80
City Detroit	State MI	
Zip Code 48216	Purpose of Disbursement Invitation Printing	<b>Transaction ID : SB17.4335</b>
Candidate Name	Category/ Type	
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>B. Jewel Kosher Caterers</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011
Mailing Address PO Box 251544		Amount of Each Disbursement this Period 5325.00
City West Bloomfield	State MI	
Zip Code 48325	Purpose of Disbursement Catering	<b>Transaction ID : SB17.4175</b>
Candidate Name	Category/ Type	
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>c. Omega Sound</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address 7942 Robert		Amount of Each Disbursement this Period 375.00
City Taylor	State MI	
Zip Code 48180	Purpose of Disbursement Audio System rental	<b>Transaction ID : SB17.4333</b>
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7586.80
<b>TOTAL</b> 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 35 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Technicom Group</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 21 / 2011</b>
Mailing Address 14100 Oakland St.		Amount of Each Disbursement this Period <b>1865.35</b>
City Highland Park	State MI Zip Code 48203	
Purpose of Disbursement Postage	Category/Type	<b>Transaction ID : SB17.4169</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1865.35</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>41221.91</b>

**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 36 OF 37	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address 606 TOWNSEND ST.		Amount of Each Disbursement this Period 20000.00 <b>Transaction ID : SB18.4145</b>
City LANSING State MI Zip Code 48933	Purpose of Disbursement Transfer of Joint Fundraising Proceeds	
Candidate Name	Category/Type	
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>B. MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 606 TOWNSEND ST.		Amount of Each Disbursement this Period 60000.00 <b>Transaction ID : SB18.4367</b>
City LANSING State MI Zip Code 48933	Purpose of Disbursement Transfer of Joint Fundraising Proceeds	
Candidate Name	Category/Type	
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>C. MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address 606 TOWNSEND ST.		Amount of Each Disbursement this Period 23000.00 <b>Transaction ID : SB18.4369</b>
City LANSING State MI Zip Code 48933	Purpose of Disbursement Transfer of Joint Fundraising Proceeds	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	103000.00
<b>TOTAL</b> 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 37 OF 37	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW 2012 VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. STABENOW FOR US SENATE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2011
Mailing Address P.O. BOX 4945		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB18.4146</b>
City EAST LANSING State MI Zip Code 48826	Purpose of Disbursement Transfer of Joint Fundraising Proceeds	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 00		

Full Name (Last, First, Middle Initial) <b>B. STABENOW FOR US SENATE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address P.O. BOX 4945		Amount of Each Disbursement this Period 30000.00 <b>Transaction ID : SB18.4366</b>
City EAST LANSING State MI Zip Code 48826	Purpose of Disbursement Transfer of Joint Fundraising Proceeds	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 00		

Full Name (Last, First, Middle Initial) <b>C. STABENOW FOR US SENATE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address P.O. BOX 4945		Amount of Each Disbursement this Period 11500.00 <b>Transaction ID : SB18.4368</b>
City EAST LANSING State MI Zip Code 48826	Purpose of Disbursement Transfer of Joint Fundraising Proceeds	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	44500.00
<b>TOTAL</b> This Period (last page this line number only).....	147500.00