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**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than 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. 12FE4MS

00000978 030602 P 283

KUBERTIA A SMITH  
BRANCH COUNTY REPUBLICAN COMMITTEE  
PO BOX 127  
COLDWATER MI 49036

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER  CITY  STATE  ZIP CODE

01900942  IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Report

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on: [ ] : [ ] : [ ] In the State of [ ]

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on: [ ] : [ ] : [ ] In the State of [ ]

5. Covering Period 1 / 1 / 2002 through 3 / 31 / 2002

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 Roberta A Smith

Signature of Treasurer *Roberta A Smith* Date 4 / 9 / 2002

NOTE: Submission of false, ambiguous, 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**

FEC Form 302 (Revised 1/03)

Page 2

Write or Type Committee Name

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

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, [ ]	[ ]	[ ]
(b) Cash on Hand at Beginning of Reporting Period	[ ]	[ ]
(c) Total Receipts (from Line 10)	[ ]	[ ]
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(b) and 6(c) for Column B)	[ ]	[ ]
7. Total Disbursements (from Line 30)	[ ]	[ ]
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	[ ]	[ ]
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	[ ]	[ ]
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	[ ]	[ ]

This committee has qualified as a multicandidate committee. (see FEC FORM 114)

For further information contact:

Federal Election Commission  
990 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

FED Form 2X (Revised 1/01)

Page 3

Write or Type Committee Name

Report Covering the Period

From:

12/31/2001

To:

9/31/2002

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees: (i) Itemized (use Schedule A) ..... (ii) Unitemized ..... (iii) TOTAL (add Lines 11(a)(i) and (ii)) ..... ▶	5205.00	5205.00
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 32, page 4) ..... ▶		
12. Transfers From Affiliated/Other Party Committees .....		
13. All Loans Received .....		
14. Loan Repayments Received .....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....	556	556
18. Transfers from Nonfederal Account for Joint Activity .....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ..... ▶	5930.56	5930.56
20. Total Federal Receipts (subtract Line 18 from Line 19) ..... ▶		

2002-03-23 13:05

DETAILED SUMMARY PAGE  
of Disbursements

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share			
(ii) Non-Federal Share			
(b) Other Federal Operating Expenditures		1,225.80	1,225.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))			
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees			
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees			
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))			
29. Other Disbursements			
30. Total Disbursements (add Lines 21(a), 22, 23, 24, 25, 26, 27, 28(d), and 29)		1,225.80	1,225.80
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)			

22037534106

III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from Line 11(d), page 3)			
33. Total Contribution Refunds (from Line 28(d))			
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)			
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))			
36. Offset to Operating Expenditures (from Line 15, page 3)			
37. Net Operating Expenditures (subtract Line 36 from Line 35)			

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)				PAGE / OF 5	
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 28d	<input type="checkbox"/> 28e	<input type="checkbox"/> 28f

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)  
*Branch County Republican Committee*

Full Name (Last, First, Middle Initial)  
*Postmaster*

Date of Disbursement  
*11/10/2002*

City  
*Caldwaller* State *MI* Zip Code *49036*

Amount of Each Disbursement this Period  
*18.95*

Purpose of Disbursement  
*Mailing to Federal Election Com.*

Category/Type

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

Full Name (Last, First, Middle Initial)  
*Flip Johnson*

Date of Disbursement  
*11/11/2002*

City  
*Caldwaller* State *MI* Zip Code *49036*

Amount of Each Disbursement this Period  
*28.95*

Purpose of Disbursement  
*Mail meeting minutes*

Category/Type

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

Full Name (Last, First, Middle Initial)  
*Branch County Fair*

Date of Disbursement  
*11/15/2002*

City  
*Caldwaller* State *MI* Zip Code *49036*

Amount of Each Disbursement this Period  
*220.00*

Purpose of Disbursement  
*To resume work for 4-H fair*

Category/Type

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

SUBTOTAL of Disbursements This Page (optional)

*289.95*

TOTAL This Period (last page this line number only)

*289.95*

FILE Schedule B (Form 3X) (Required 1/01)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER (check only one)						PAGE <u>2</u> OF <u>5</u>
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27
	<input type="checkbox"/> 126	<input type="checkbox"/> 127	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	

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NAME OF COMMITTEE (in Full)  
*Grand County Republican Committee*

Full Name (Last, First, Middle Initial)  
*State of Michigan*

Date of Disbursement  

Month	Day	Year
4	15	2002

City *Lansing* State *Mi* Zip Code  
 Purpose of Disbursement  
*Region License for Lexista Day*  
 Candidate Name  
 Disbursement For  
 Primary  General  
 Other (specify)

Amount of Each Disbursement this Period  
*25.00*

Office Sought:  House  Senate  President  
 State: District:  
 Full Name (Last, First, Middle Initial)  
*Postmaster*

Date of Disbursement  

Month	Day	Year
11	22	2002

City *Coldwater* State *Mi* Zip Code *49036*  
 Purpose of Disbursement  
*Post Office Rent*  
 Candidate Name  
 Disbursement For  
 Primary  General  
 Other (specify)

Amount of Each Disbursement this Period  
*55.00*

Office Sought:  House  Senate  President  
 State: District:  
 Full Name (Last, First, Middle Initial)  
*North Center*

Date of Disbursement  

Month	Day	Year
3	13	2002

City *Coldwater* State *Mi* Zip Code *49086*  
 Purpose of Disbursement  
*Rent for Lexista Day Banquet*  
 Candidate Name  
 Disbursement For  
 Primary  General  
 Other (specify)

Amount of Each Disbursement this Period  
*100.00*

SUBTOTAL of Disbursements This Page (optional) *180.00*

TOTAL This Period (Just page this line number only)

SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER (check only one)		PAGE 3 OF 5				
	<input checked="" type="checkbox"/> 017	<input type="checkbox"/> 22	<input type="checkbox"/> 25	<input type="checkbox"/> 24	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 29
	<input type="checkbox"/> 28	<input type="checkbox"/> 27	<input type="checkbox"/> 28A	<input type="checkbox"/> 28B	<input type="checkbox"/> 28C	<input type="checkbox"/> 28D	<input type="checkbox"/> 28E

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NAME OF COMMITTEE (in full)  
*Bronck County Republican Committee*

Full Name (Last, First, Middle Initial)  
*A. Filip Johnson*

Mailing Address  
*[Handwritten address]*

Date of Disbursement  
*9/14/2002*

City *Caldwells* State *MD* Zip Code *44036*

Purpose of Disbursement  
*Meeting Meeting Notice*

Candidate Name  
*[Handwritten]*

Category/Type  
*[Handwritten]*

Amount of Each Disbursement this Period  
*92.58*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *[Handwritten]*

State: *[Handwritten]* District: *[Handwritten]*

Full Name (Last, First, Middle Initial)  
*B. Quality Lunch Print*

Mailing Address  
*11 S. Hudson*

Date of Disbursement  
*9/25/2002*

City *Caldwells* State *MD* Zip Code *44036*

Purpose of Disbursement  
*Print ticket for Lincoln Day*

Candidate Name  
*[Handwritten]*

Category/Type  
*[Handwritten]*

Amount of Each Disbursement this Period  
*61.97*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *[Handwritten]*

State: *[Handwritten]* District: *[Handwritten]*

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

Mailing Address  
*[Handwritten]*

Date of Disbursement  
*9/25/2002*

City *Caldwells* State *MD* Zip Code *44036*

Purpose of Disbursement  
*Caldwells School Away Program*

Candidate Name  
*[Handwritten]*

Category/Type  
*[Handwritten]*

Amount of Each Disbursement this Period  
*60.00*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *[Handwritten]*

State: *[Handwritten]* District: *[Handwritten]*

SUBTOTAL OF DISBURSEMENTS This Page (upload) *198.93*

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)		PAGE 7 OF 9	
<input checked="" type="checkbox"/> 21a	<input type="checkbox"/> 29	<input type="checkbox"/> 7a	<input type="checkbox"/> 25
<input type="checkbox"/> 2b	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b
<input type="checkbox"/> 2c	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	

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NAME OF COMMITTEE (in full)  
*Branch County Republican Committee*

A. *Jacob Woods*

Full Name (Last, First, Middle Initial)

Mailing Address

City: *Blountville* State: *TN* Zip Code: *37628*

Purpose of Disbursement: *Dropson School Essay Winner*

Candidate Name

Category Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *9/25/2002*

Amount of Each Disbursement this Period: *100.00*

B. *Margy Miller*

Full Name (Last, First, Middle Initial)

Mailing Address

City: *Blountville* State: *TN* Zip Code: *37628*

Purpose of Disbursement: *Dropson School Essay Winner*

Candidate Name

Category Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *9/23/2002*

Amount of Each Disbursement this Period: *100.00*

C. *Jessie Ralph*

Full Name (Last, First, Middle Initial)

Mailing Address

City: *Union City* State: *MI* Zip Code: *49094*

Purpose of Disbursement: *Union City School Essay Winner*

Candidate Name

Category Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *9/25/2002*

Amount of Each Disbursement this Period: *100.00*

SUBTOTAL of Disbursements This Page (optional) *300.00*

TOTAL This Period (Just page this line number only)



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3 OF 3
	<input checked="" type="checkbox"/> 21b <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25	
	<input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28a <input type="checkbox"/> 28b <input type="checkbox"/> 29a <input type="checkbox"/> 29b	

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NAME OF COMMITTEE (in Full)

**A**

Full Name (Last, First, Middle Initial) Kristen Kelley

Mailing Address

City Caldwate State MA Zip Code 19034

Purpose of Disbursement CPK Super-Survey Worksheet

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 9/30/2012

Amount of Each Disbursement this Period: 100.00

Category/Type

**B**

Full Name (Last, First, Middle Initial) Branch Insurance Agency

Mailing Address 24 N Monroe

City Caldwate State MA Zip Code 19034

Purpose of Disbursement One day Legist Testimony

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 9/30/2012

Amount of Each Disbursement this Period: 50.00

Category/Type

**C**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional) 150.00

TOTAL This Period (first page that are subtotal only) 150.00

2012-09-30 11:23:23 AM

## Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received

<input type="checkbox"/>	Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/>	First Class Mail	POSTMARKED 4-9-02
<input type="checkbox"/>	Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/>	Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/>	Other (Specify)	Postmarked and/or Date of Receipt
<input type="checkbox"/>	Electronic Filing	
<p><u>        </u> PREPARER</p>		<p><u>4-16-02</u> DATE PREPARED</p>