

FEC
FORM 3XREPORT OF RECEIPTS
AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL ROOM

2002 JUL 15 A 451

Office Use Only

1. NAME OF COMMITTEE (in full)	USE FEC MAILING LABEL OR TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FB4M5	
ROBERTA A SMITH BRANCH COUNTY REPUBLICAN COMM				
ADDRESS (number and street) ▼	TREE PO BOX 127 COLDWATER	MI 49036		
Check if different than previously reported. (ACG)				
2. FEC IDENTIFICATION NUMBER ▼	CITY ▲	STATE ▲	ZIP CODE ▲	
[C0000994]	3. IS THIS REPORT <input checked="" type="checkbox"/> NEW (N) <input type="checkbox"/> OR	<input checked="" type="checkbox"/> AMENDED (A)		
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On: Feb 20 (M21) Mar 20 (M31) Apr 20 (M41)	<input type="checkbox"/> May 20 (M5) <input type="checkbox"/> Jun 20 (M6) <input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Aug 20 (M8) <input type="checkbox"/> Sep 20 (M9) <input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
(a) Quarterly Reports:	(c) 12-Day PRE-Election Report for the: Election on	<input type="checkbox"/> Primary (12P) <input type="checkbox"/> Convention (12C)	<input type="checkbox"/> General (12G) <input type="checkbox"/> Special (12S)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> April 15 Quarterly Report (Q1) <input checked="" type="checkbox"/> July 15 Quarterly Report (Q2) <input type="checkbox"/> October 15 Quarterly Report (Q3) <input type="checkbox"/> January 31 Year-End Report (YE) <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) (MY) <input type="checkbox"/> Termination Report (TER)	(d) 30-Day POST-Election Report for the: Election on	<input type="checkbox"/> General (30G) <input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)	<input type="checkbox"/> in the State of

5. Covering Period **07/01/2002** through **07/31/2002**

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 **07/31/2002**

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

Office Use Only							
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FEC FORM 3X
(Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

*Branan County Republicans Committee*Report Covering the Period: From: **04/01/2002** To: **04/30/2002**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1.	<i>2,002</i>	<i>1,046.76 L.A.</i>
(b) Cash on Hand at Beginning of Reporting Period	<i>2,002</i>	<i>1,046.76 L.A.</i>
(c) Total Receipts (from Line 19)	<i>2,234.74</i>	<i>1,300.54 L.A.</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<i>2,196.50 L.A.</i>	<i>1,233.00 L.A.</i>
7. Total Disbursements (from Line 30)	<i>5,603.72</i>	<i>2,342.52 L.A.</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<i>1,600.00 L.A.</i>	<i>1,641.94 -828</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<i>0</i>	<i>0</i>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<i>0</i>	<i>0</i>

 This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Revised 1/01)

Page 3

Write or Type Committee Name

Broward County Republican Committee

Report Covering the Period: From:

04/01/2002

To:

06/30/2002

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	3,221.15	
(III) TOTAL (add Lines 11(a)(i) and (ii))	3,221.15	3,221.15
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(i), (ii), and (c)) (Carry Totals to Line 32, page 4)		
12. Transfers From Affiliated/Other Party Committees		
13. AS 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.)	12.92	2,847
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	3,234.07	13,442.12
20. Total Federal Receipts (subtract Line 19 from Line 19)		

DETAILED SUMMARY PAGE

of Dissuasions

Page 4

FEC Form 3X (Revised 1/01)

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		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5,626,221	2,332,57
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))	3,626,221	2,332,57
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(c), and 29)	5,626,221	2,332,57
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)	5,626,221	2,332,57
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(c), 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. Offsets 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 4

 21b 22 23 24 25
 26 27 28a 28b 28c 29

 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 Republicans Branch

Full Name (Last, First, Middle Initial)

A. *The Daily Reporter*

Mailing Address

Pearl St.

 City **Colchester Me** State **Vt** Zip Code **09034**

 Purpose of Disbursement *Invitational Banquet*

Candidate Name

 Category/
Type

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

 State: **Vt** District:

Full Name (Last, First, Middle Initial)

B. *John Tropho*

Mailing Address

44 N Park Hwy Mr 09082

 City **Colchester** State **Vt** Zip Code **09082**

Purpose of Disbursement

Invitational Banquet

Candidate Name

 Category/
Type

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

 State: **Vt** District:

Full Name (Last, First, Middle Initial)

C. *Ballinger*

Mailing Address

Barre Vt

 City **Barre** State **Vt** Zip Code **05641**

Purpose of Disbursement

Invitational Banquet

Candidate Name

 Category/
Type

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

 State: **Vt** District:

Date of Disbursement
04-21-02
Amount of Each Disbursement This Period
298.25
Date of Disbursement
04-21-02
Amount of Each Disbursement This Period
25.00
Date of Disbursement
04-19-02
Amount of Each Disbursement This Period
300.00
SUBTOTAL of Disbursements This Page (collated) **723.25**
TOTAL This Period (last page this line number only) **723.25**

SCHEDULE B (FEC Form SX)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FORM LINE NUMBER: (check only one)	PAGE 2 OF 4
	<input type="checkbox"/> 21b <input checked="" 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"/> 28c <input type="checkbox"/> 28	

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) <i>Brown County Republican Committee</i>		
Full Name (Last, First, Middle Initial) A. Linda Grant		
Mailing Address		
City <i>Ohio</i> State <i>Ohio</i> Zip Code		
Purpose of Disbursement <i>Linda Bengard Caline</i>		
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) □
State:	District:	
Full Name (Last, First, Middle Initial) B. Linda Grant		
Mailing Address		
City <i>Ohio</i> State <i>Ohio</i> Zip Code		
Purpose of Disbursement <i>Linda Bengard Caline</i>		
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) □
State:	District:	
Full Name (Last, First, Middle Initial) C. Shappie Grant		
Mailing Address <i>57 J Monroe</i>		
City <i>Colorado</i> State <i>MI</i> Zip Code <i>49036</i>		
Purpose of Disbursement <i>Linda Bengard</i>		
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) □
State:	District:	
SUBTOTAL of Disbursements This Page (optional) ►		
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 2 OF 4
 21c 22 23 24 25
 26 27 28a 28b 28c 29

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 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)

Bronx County Republican Committee

Full Name (Last, First, Middle initial)

 A. Lorraine DeWitt Frank

Mailing Address

11 S Edison

 City Coldwater State MI Zip Code 49036

 Purpose of Disbursement Personal Expenses

 Candidate Name Lorraine DeWitt

Date of Disbursement

05-03-2002

Amount of Each Disbursement this Period

119.48

 Office Sought House Senate President

 Disbursement For
 Primary General
 Other (specify)

State

District

Full Name (Last, First, Middle Initial)

 B. Jahn Wilson

Mailing Address

Union City Road

 City Coldwater State MI Zip Code 49036

Purpose of Disbursement

Candidate Name

Date of Disbursement

05-01-2002

Amount of Each Disbursement this Period

 Office Sought House Senate President

 Disbursement For
 Primary General
 Other (specify)

State

District

Full Name (Last, First, Middle Initial)

 C. State of Michigan

Mailing Address

Lansing

 City Lansing State MI Zip Code 48901

Purpose of Disbursement

Food License for County Fair

Candidate Name

Date of Disbursement

05-01-2002

Amount of Each Disbursement this Period

 Office Sought House Senate President

 Disbursement For
 Primary General
 Other (specify)

State

District

SUBTOTAL of Disbursements This Page (optional)

120.82

TOTAL This Period (last page this line number only)

120.82

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 _____
	<input checked="" type="checkbox"/> 215 <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25	
	<input type="checkbox"/> 126 <input type="checkbox"/> 27 <input type="checkbox"/> 286 <input type="checkbox"/> 288 <input type="checkbox"/> 290 <input type="checkbox"/> 29	

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NAME OF COMMITTEE (In P.A.)	<i>Branch County Republican Committee</i>	
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Full Name (Last, First, Middle Initial)

A. - <i>M. Miller</i>	Date of Disbursement
-----------------------	----------------------

Mailng Address <i>30501 Orchard Lake Rd</i>	Amount of Each Disbursement this Period <i>550.00</i>
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City <i>Farmington Hills</i>	State <i>MI</i>	Zip Code <i>48334</i>
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Purpose of Disbursement <i>Dinner for 11 from Restaurant</i>	Category/ Type
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Candidate Name	Category/ Type
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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) <i>▼</i>
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State: <i>District:</i>	Date of Disbursement <i>7/1/01 - 7/31/01</i>
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Full Name (Last, First, Middle Initial)	Date of Disbursement <i>7/1/01 - 7/31/01</i>
---	---

Meeting Address	Date of Disbursement <i>7/1/01 - 7/31/01</i>
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City	State	Zip Code
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Purpose of Disbursement	Category/ Type
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Candidate Name	Category/ Type
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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) <i>▼</i>
---	---

State: <i>District:</i>	Date of Disbursement <i>7/1/01 - 7/31/01</i>
----------------------------	---

Full Name (Last, First, Middle Initial)	Date of Disbursement <i>7/1/01 - 7/31/01</i>
---	---

Meeting Address	Date of Disbursement <i>7/1/01 - 7/31/01</i>
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City	State	Zip Code
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Purpose of Disbursement	Category/ Type
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Candidate Name	Category/ Type
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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) <i>▼</i>
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State: <i>District:</i>	SUBTOTAL of Disbursements This Page (optional) <i>250.00</i>
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TOTAL This Period (last page this line number only) <i>26.01</i>	7.00
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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 7-6-03
<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): Electronic Filing	Postmarked and/or Date of Receipt
J.K. PREPARER		7-15-03 DATE PREPARED