

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

2002 DEC -5 P 1:49

1. NAME OF COMMITTEE (In full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Alpena County Democratic Party

ADDRESS (number and street) 419 South Front Avenue
Alpena MI 49707-1107
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C00231316 B. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Year Only
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 10/01/2002 through 11/25/2002

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 Thomas L. Brindley
Signature of Treasurer [Signature] Date 11/25/2002

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Alfama County Democratic Party

Report Covering the Period:

From:

10/01/2002

To:

11/25/2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2002</u>		<u>22,237</u>
(b) Cash on Hand at Beginning of Reporting Period	<u>20,510</u>	
(c) Total Receipts (from Line 19)	<u>9</u>	<u>651.25</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>20,519</u>	<u>874.50</u>
7. Total Disbursements (from Line 30)	<u>27.00</u>	<u>694.00</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>17,810</u>	<u>178.50</u>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	<u>2,119.00</u>	

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

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)

Write or Type Committee Name

Alameda County Democratic Party

Report Covering the Period:

From:

10/01/2002

To:

11/25/2002

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)) .....		650.00
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) .....		650.00
12. Transfers From Affiliated/Other Party Committees .....		
13. All Loans Received .....		
14. Loan Repayments Received .....		
15. Credits 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.) .....		173
18. Transfers from Non-federal Account for Joint Activity .....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....		651.73
20. Total Federal Receipts (subtract Line 18 from Line 19) .....		651.73

SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 2  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (in Full) <b>Alpena County Democratic Party</b>	FEC IDENTIFICATION NUMBER <b>C 00231316</b>
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Full Name (Last, First, Middle Initial) of Payee <b>Star Publications Inc</b>	Purpose of Expenditure <b>Advertisement</b>	Category/Type
Mailing Address <b>PO Box 464</b>	Name of Federal Candidate supported or opposed by expenditure: <b>Carl Lewis</b>	
City <b>Alpena</b>	State <b>Mi</b>	Zip Code <b>49707</b>
Date <b>10 30 2002</b>	Amount <b>6.50</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> Presidential State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose

Full Name (Last, First, Middle Initial) of Payee <b>Star Publications Inc</b>	Purpose of Expenditure <b>Advertisement</b>	Category/Type
Mailing Address <b>PO Box 464</b>	Name of Federal Candidate supported or opposed by expenditure: <b>Bob Stropak</b>	
City <b>Alpena</b>	State <b>Mi</b>	Zip Code <b>49707</b>
Date <b>10 30 2002</b>	Amount <b>6.50</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose

Full Name (Last, First, Middle Initial) of Payee <b>Alpena News Publishing</b>	Purpose of Expenditure <b>Advertisement</b>	Category/Type
Mailing Address <b>130 Park Place</b>	Name of Federal Candidate supported or opposed by expenditure: <b>Carl Lewis</b>	
City <b>Alpena</b>	State <b>Mi</b>	Zip Code <b>49707</b>
Date <b>10 30 2002</b>	Amount <b>7.00</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> Presidential State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose

(a) SUBTOTAL of Itemized Independent Expenditures	<b>20.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>-</b>
(c) TOTAL Independent Expenditures	<b>20.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee.

Signature: **Thomas J. Brindley** Date: **12 04 2002**

2002 RELEASE UNDER E.O. 14176

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 2 OF 2  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Alfama County Democratic Party</b>	FEC IDENTIFICATION NUMBER <b>0</b>
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Full Name (Last, First, Middle Initial) of Payee <b>Alfama News Publishing</b>	Purpose of Expenditure <b>Arbor Viewmont</b>	Category/Type
Mailing Address <b>130 Park Place</b>	Name of Federal Candidate supported or opposed by expenditure <b>Bart Stupak</b>	
City <b>Alfama</b> State <b>Mi</b> Zip Code <b>49707</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Date ____/____/____	Amount <b>7.00</b>	

Full Name (Last, First, Middle Initial) of Payee	Purpose of Expenditure	Category/Type
Mailing Address	Name of Federal Candidate supported or opposed by expenditure	
City State Zip Code	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: _____ District: _____ Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Date	Amount	

Full Name (Last, First, Middle Initial) of Payee	Purpose of Expenditure	Category/Type
Mailing Address	Name of Federal Candidate supported or opposed by expenditure	
City State Zip Code	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: _____ District: _____ Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Date	Amount	

(a) SUBTOTAL of itemized Independent Expenditures	<b>7.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	<b>27.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_

**SCHEDULE D (FEC Form 3X)  
DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate  
schedule(s)  
for each  
numbered line)

PAGE OF  
FOR LINE NUMBER:  
(check only one)  9  
 10

NAME OF COMMITTEE (In Full)  
**Alpena County Democratic Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Alpena County Democratic Party**  
Nature of Debt (Purpose):  
  
Mailing Address  
**419 South First Avenue**  
City State Zip Code  
**Alpena Mi 49701**

Outstanding Balance Beginning This Period  
**241.900**  
Amount Incurred This Period  
**0**  
Payment This Period  
**0**  
Outstanding Balance at Close of This Period  
**241.900**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
  
Nature of Debt (Purpose):  
  
Mailing Address  
  
City State Zip Code

Outstanding Balance Beginning This Period  
  
Amount Incurred This Period  
  
Payment This Period  
  
Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
  
Nature of Debt (Purpose):  
  
Mailing Address  
  
City State Zip Code

Outstanding Balance Beginning This Period  
  
Amount Incurred This Period  
  
Payment This Period  
  
Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ..... **241.900**  
2) TOTALS This Period (last page this line number only) ..... **0**  
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... **241.900**  
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) **241.900**

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>12/15/02</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<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	
<i>NACD</i> PREPARER	<i>12/15/02</i> DATE PREPARED