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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

Progressive Womens Alliance of West Michigan

ADDRESS (number and street) PO Box 1315

Check if different than previously reported. (ACC)

Grand Rapids MI 49501 1315

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00400432

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly 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) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<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 01 01 2010 through 03 31 2010

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 Stacy Van Dyken

Signature of Treasurer *Stacy Van Dyken*

Date 04 12 2010

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  
(Rev. 12/2004)

10030303194

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
Progressive Womens Alliance of West Michigan

Report Covering the Period: From: 

M M	D D	Y Y Y Y
0 1	0 1	2 0 1 0

 To: 

M M	D D	Y Y Y Y
0 3	3 1	2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date				
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y Y Y Y</td></tr><tr><td>2 0 1 0</td></tr></table>	Y Y Y Y	2 0 1 0	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">5467.88</td></tr></table>	5467.88
Y Y Y Y						
2 0 1 0						
5467.88						
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="right">5467.88</td></tr></table>	5467.88				
5467.88						
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="right">4.04</td></tr></table>	4.04	<table border="1" style="width: 100%;"><tr><td align="right">4.04</td></tr></table>	4.04		
4.04						
4.04						
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="right">5471.92</td></tr></table>	5471.92	<table border="1" style="width: 100%;"><tr><td align="right">5471.92</td></tr></table>	5471.92		
5471.92						
5471.92						
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00		
0.00						
0.00						
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="right">5471.92</td></tr></table>	5471.92	<table border="1" style="width: 100%;"><tr><td align="right">5471.92</td></tr></table>	5471.92		
5471.92						
5471.92						
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00				
0.00						
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">3500.00</td></tr></table>	3500.00				
3500.00						

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

10030303195

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name  
Progressive Womens Alliance of West Michigan

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	W	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	W	Y
2	0	1	0

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	0.00	0.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	4.04	4.04
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	4.04	4.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4.04	4.04

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**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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	0.00

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

FE6AN026

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**SCHEDULE C (FEC Form 3X)**

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

FOR LINE 13 OF FORM 3X

**LOANS**

NAME OF COMMITTEE (In Full)

Progressive Womens Alliance of West Michigan

Transaction ID: SC/10.4706

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Joan Bowman

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address 220 W Saginaw Hwy  
#A-6

City Grand Ledge State MI ZIP Code 48837

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3500.00	0.00	3500.00

**TERMS**

Date Incurred: MM 01 DD 20 YY 2005  
Date Due: \_\_\_\_\_ Interest Rate: 0.0000 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____

<b>SUBTOTALS</b> This Period This Page (optional).....▶	3500.00
<b>TOTALS</b> This Period (last page in this line only).....▶	3500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

10030303200

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 4/13/10
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*Dr*

4/19/10

PREPARER  
(3/2005)

DATE PREPARED