

**In Our Mother's Name
739 Wilson Avenue
Muskegon, MI 49441-3040**

RECEIVED
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January 9, 2015

FEC
999 E Street, NW
Washington, DC 20463

To Whom It May Concern:

During this election cycle, no contributions were solicited or accepted, and no expenditures were made. Hence, I believed that I could submit a quarterly report. Upon reviewing the notice sent the email recently, I immediately wrote reports and sent them in.

Sincerely,


Julia Dennis
Treasurer

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

IN OUR MOTHERS NAME

Report Covering the Period: From:

To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="9810"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9810"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="000"/>	<input type="text" value="000"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="9810"/>	<input type="text" value="9810"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="000"/>	<input type="text" value="000"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9810"/>	<input type="text" value="9810"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="000"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="000"/>	

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 (Rev. 06/2004)

Page 3

Write or Type Committee Name

IN OUR MOTHERS NAME

Report Covering the Period: From:

MM / DD / YYYY
10 / 01 / 2014

To:

MM / DD / YYYY
10 / 31 / 2014

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).....

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.....

0.60

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.).....

0.00

0.00

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 Transfers (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)).....▶

0.00

0.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0.00

0.00

STUBBINS - WALKER - LEONARD

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share		0 0 0	0 0 0
(ii) Non-Federal Share.....		0 0 0	0 0 0
(b) Other Federal Operating Expenditures		0 0 0	0 0 0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		0 0 0	0 0 0
22. Transfers to Affiliated/Other Party Committees		0 0 0	0 0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees		0 0 0	0 0 0
24. Independent Expenditures (use Schedule E)		0 0 0	0 0 0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		0 0 0	0 0 0
26. Loan Repayments Made		0 0 0	0 0 0
27. Loans Made		0 0 0	0 0 0
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0 0 0	0 0 0
(b) Political Party Committees		0 0 0	0 0 0
(c) Other Political Committees (such as PACs)		0 0 0	0 0 0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0 0 0	0 0 0
29. Other Disbursements		0 0 0	0 0 0
30. Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share		0 0 0	0 0 0
(ii) "Levin" Share.....		0 0 0	0 0 0
(b) Federal Election Activity Paid Entirely With Federal Funds		6 0 0	0 0 0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		6 0 0	0 0 0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..		0 0 0	0 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)		6 0 0	0 0 0

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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 0 0	0 0 0
34. Total Contribution Refunds (from Line 28(d))	0 0 0	0 0 0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0 0 0	0 0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0 0 0	0 0 0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0 0 0	0 0 0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0 0 0	0 0 0

COUNTDOWN : WINN : LEON

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

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

FOR LINE NUMBER:		PAGE		OF	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17			

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)

IN OUR MOTHERS NAME

Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		<input type="text"/>	
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
<input type="text"/>		<input type="text"/>	
Name of Employer	Occupation		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/>		
Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		<input type="text"/>	
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
<input type="text"/>		<input type="text"/>	
Name of Employer	Occupation		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/>		
Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		<input type="text"/>	
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
<input type="text"/>		<input type="text"/>	
Name of Employer	Occupation		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/>		
SUBTOTAL of Receipts This Page (optional).....▶		<input type="text"/>	
TOTAL This Period (last page this line number only).....▶		<input type="text"/>	

COUNTDOWN

**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 type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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NAME OF COMMITTEE (In Full)
IN OUR MOTHERS NAME

A.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ *0.00*

TOTAL This Period (last page this line number only)..... ▶ *0.00*

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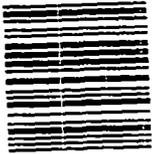
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739 Wilson Ave
Muskegon, MI 49441

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999 E. STREET, NW
Washington, DC 20463

Label 22B, July 2013

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 The FEC added this page to the end of this filing to indicate how it was received.

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<input checked="" type="checkbox"/> USPS Priority Mail	Postmarked 11/9/15
<input type="checkbox"/> USPS Priority Mail Express	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

RAD
 PREPARER

11/15/15
 DATE PREPARED

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