

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

Fannie Lou Hamer PAC

ADDRESS (number and street) 19600 W. McNichols

Check if different than previously reported. (ACC)

Detroit MI 48219

2. **FEC IDENTIFICATION NUMBER** C00294918

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 (12G) | |

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) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 01 01 2009 through 06 30 2009

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 Karen Green

Signature of Treasurer Electronically Filed by Karen Green Date 11 13 2009

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 | | | | | | | |
|-----------------|--|--|--|--|--|--|--|

FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Fannie Lou Hamer PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 9 | | 21990.12 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 9 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 21990.12 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 8750.00 | 8750.00 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 30740.12 | 30740.12 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 11438.28 | 11438.28 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 19301.84 | 19301.84 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Fannie Lou Hamer PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| 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) | 6700.00 | 6700.00 |
| (ii) Unitemized | 2050.00 | 2050.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 8750.00 | 8750.00 |
| (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) | 8750.00 | 8750.00 |
| 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.) | 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 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)) | 8750.00 | 8750.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 8750.00 | 8750.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

| 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..... | 5732.27 | 5732.27 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 5732.27 | 5732.27 |
| 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..... | 5706.01 | 5706.01 |
| 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)).. | 11438.28 | 11438.28 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 11438.28 | 11438.28 |

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) | 8750.00 | 8750.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 8750.00 | 8750.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 5732.27 | 5732.27 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 5732.27 | 5732.27 |

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

| | | |
|---|---|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 14 |
| | <input checked="" 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)
Fannie Lou Hamer PAC

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) NABIH H AYAD | Date of Receipt MM / DD / YYYY 05 / 21 / 2009 |
| | Mailing Address 49700 HUDSON DRIVE | Transaction ID: SA11AI.4368 |
| | City State Zip Code CANTON MI 48188 | Amount of Each Receipt this Period 600.00 |
| | FEC ID number of contributing federal political committee. C | KEEP SPIRIT MOVING |
| Name of Employer SELF | Occupation ATTORNEY | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 600.00 | |

| | | |
|---|---|---|
| B. | Full Name (Last, First, Middle Initial) GARY BROWN | Date of Receipt MM / DD / YYYY 05 / 21 / 2009 |
| | Mailing Address 3430 E JEFFERSON | Transaction ID: SA11AI.4369 |
| | City State Zip Code DETROIT MI 48207 | Amount of Each Receipt this Period 300.00 |
| | FEC ID number of contributing federal political committee. C | KEEP SPIRIT MOVING |
| Name of Employer SELF | Occupation ENTREPRENEUR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |

| | | |
|---|---|---|
| C. | Full Name (Last, First, Middle Initial) JOHN CHERRY | Date of Receipt MM / DD / YYYY 05 / 21 / 2009 |
| | Mailing Address PO BOX 624 | Transaction ID: SA11AI.4370 |
| | City State Zip Code FENTON MI 48430 | Amount of Each Receipt this Period 450.00 |
| | FEC ID number of contributing federal political committee. C | KEEP SPIRIT MOVING |
| Name of Employer STATE OF MICHIGAN | Occupation LT. GOV | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1350.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 14 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) ANDY DILLION | Date of Receipt MM / DD / YYYY 05 / 21 / 2009 |
| | Mailing Address PO BOX 16101 | Transaction ID: SA11AI.4371 |
| | City LANSING State MI Zip Code 48901 | Amount of Each Receipt this Period 300.00 |
| | FEC ID number of contributing federal political committee. C | KEEP SPIRIT MOVING |
| | Name of Employer STATE OF MICHIGAN Occupation DEM SPKR OF HOUSE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00 | |

| | | |
|-----------|---|---|
| B. | Full Name (Last, First, Middle Initial) ROBERT FICANO | Date of Receipt MM / DD / YYYY 05 / 21 / 2009 |
| | Mailing Address 600 CADILLAC SQ | Transaction ID: SA11AI.4372 |
| | City DETROIT State MI Zip Code 48226 | Amount of Each Receipt this Period 1500.00 |
| | FEC ID number of contributing federal political committee. C | KEEP SPIRIT MOVING |
| | Name of Employer COUNTY OF WAYNE Occupation WAYNE COUNTY EXEC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00 | |

| | | |
|-----------|---|---|
| C. | Full Name (Last, First, Middle Initial) JEROME & CAROLYNN FRANKEL | Date of Receipt MM / DD / YYYY 05 / 21 / 2009 |
| | Mailing Address 3391 LONE PINE RD | Transaction ID: SA11AI.4373 |
| | City W BLOOMFIELD State MI Zip Code 48323 | Amount of Each Receipt this Period 300.00 |
| | FEC ID number of contributing federal political committee. C | KEEP SPIRIT MOVING |
| | Name of Employer SELF Occupation PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2100.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 14 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

A. Full Name (Last, First, Middle Initial)
SAUNTEEL JENKINS

Mailing Address 1636 CAMPUS FARMS CIRCLE

City State Zip Code
DETROIT MI 48207

FEC ID number of contributing federal political committee. **C**

Name of Employer CITY OF DETROIT Occupation COUNCIL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 05 / 21 / 2009
Transaction ID: SA11AI.4378
Amount of Each Receipt this Period: 2500.00
KEEP SPIRIT MOVING

B. Full Name (Last, First, Middle Initial)
SAUNTEEL JENKINS

Mailing Address 1636 CAMPUS FARMS CIRCLE

City State Zip Code
DETROIT MI 48207

FEC ID number of contributing federal political committee. **C**

Name of Employer CITY OF DETROIT Occupation COUNCIL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2650.00

Date of Receipt: 05 / 21 / 2009
Transaction ID: SA11AI.4381
Amount of Each Receipt this Period: 150.00
KEEP SPIRIT MOVING

C. Full Name (Last, First, Middle Initial)
CHARLES PUGH

Mailing Address PO BOX 441035

City State Zip Code
DETROIT MI 48244

FEC ID number of contributing federal political committee. **C**

Name of Employer nONE Occupation REPORTER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 21 / 2009
Transaction ID: SA11AI.4374
Amount of Each Receipt this Period: 300.00
KEEP SPIRIT MOVING

SUBTOTAL of Receipts This Page (optional) ► 2950.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 9 / 14 | |
| | (check only one) | | | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

| | | | | |
|---|--|--------------------------|--|------------------------------------|
| A. | Full Name (Last, First, Middle Initial) REGINALD TURNER | | Date of Receipt | |
| | Mailing Address 500 WOODWARD STE 3500 | | M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 9 | |
| | City | State | Zip Code | Transaction ID: SA11AI.4375 |
| | DETROIT | MI | 48226 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | | C | 300.00 |
| | Name of Employer SELF | | Occupation ATTORNEY | KEEP |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | 300.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 300.00 |
| TOTAL This Period (last page this line number only) | 6700.00 |

**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 10 / 14

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

| | | | |
|-----------|--|--|---------|
| A. | Full Name (Last, First, Middle Initial) BUSINESS LOWMAN ADVANCE SERVICE | Transaction ID: SB21B.4313 Date of Disbursement 06 / 13 / 2009 | |
| | Mailing Address 19600 W.McNichols | | |
| | City Detroit State MI Zip Code 48219 | Amount of Each Disbursement this Period | 3750.00 |
| | Purpose of Disbursement RENT Candidate Name | Category/Type | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. | Full Name (Last, First, Middle Initial) BUSINESS TAXMASTERS | Transaction ID: SB21B.4314 Date of Disbursement 05 / 27 / 2009 | |
| | Mailing Address 17560 Annchester | | |
| | City Detroit State MI Zip Code 48219 | Amount of Each Disbursement this Period | 1666.75 |
| | Purpose of Disbursement ACCOUNTING SERVICES Candidate Name | Category/Type | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 5416.75 |
| TOTAL This Period (last page this line number only) | 5416.75 |

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)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input 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"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

A.

Full Name (Last, First, Middle Initial)
EMMA BELL

Transaction ID: SB29.4383
Date of Disbursement

Mailing Address 12345
MAIDEN

/ /

City State Zip Code
DETROIT MI 48213

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRACTUAL ASSISTANCE FOR FUNDRAISER

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
MICHIGAN MICHIGAN CHRONICLE

Transaction ID: SB29.4404
Date of Disbursement

Mailing Address 379 LEDYARD

/ /

City State Zip Code
DETROIT MI 48201

Amount of Each Disbursement this Period

Purpose of Disbursement
NEWSPAPER ADS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
CHURCH MT. MORIAH BAPTIST CHURCH

Transaction ID: SB29.4382
Date of Disbursement

Mailing Address 13100 Woodward

/ /

City State Zip Code
Highland Park MI 48203

Amount of Each Disbursement this Period

Purpose of Disbursement
BUS TRANSPORTATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 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)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input 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"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) CHURCH MT. MORIAH BAPTIST CHURCH</p> <p>Mailing Address 13100 Woodward</p> <p>City Highland Park State MI Zip Code 48203</p> <p>Purpose of Disbursement RENTAL HALL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.4394</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="214.58"/></p> |
| <p>B. Full Name (Last, First, Middle Initial) BUSINESS SAM'S CLUB</p> <p>Mailing Address 39800 Ford Rd</p> <p>City Canton State MI Zip Code 48185</p> <p>Purpose of Disbursement REFRESHMENTS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.4397</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="170.46"/></p> |
| <p>C. Full Name (Last, First, Middle Initial) BUSINESS SAM'S CLUB</p> <p>Mailing Address 39800 Ford Rd</p> <p>City Canton State MI Zip Code 48185</p> <p>Purpose of Disbursement REFRESHMENTS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.4399</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="40.51"/></p> |

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 13 / 14

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input 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"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

A.

Full Name (Last, First, Middle Initial)
BILL SANDERS

Transaction ID: SB29.4385
Date of Disbursement

Mailing Address P O BOX 13130

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 2 | 1 | | 2 | 0 | 0 | 9 |

City State Zip Code
DETROIT MI 48213

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

Purpose of Disbursement
PHOTOGRAPHER

| |
|--|
| |
|--|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
TAMACO TAMACO GRAPHICS

Transaction ID: SB29.4406
Date of Disbursement

Mailing Address 7330 W OUTER DRIVE

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 0 | | 2 | 0 | 0 | 9 |

City State Zip Code
DETROIT MI 48219

Amount of Each Disbursement this Period

| |
|---------|
| 2299.00 |
|---------|

Purpose of Disbursement
PRINT LEAFLETS

| |
|-----|
| 004 |
|-----|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

| |
|---------|
| 2549.00 |
|---------|

TOTAL This Period (last page this line number only) ►

| |
|---------|
| 5174.55 |
|---------|

METHOD OF ALLOCATION FOR:

- SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only