

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED  
FEC MAIL  
OPERATIONS CENTER

2005 AUG - 6 AM 9:29  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

ALTI COR POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 7575 FULTON EAST

Check if different than previously reported. (ACC) ADA MI 49355

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 0 0 0 3 4 8 8 4

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 Year-End 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)<br>(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)<br>(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 MM / MM / YYYY in the State of XX

- (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 MM / MM / YYYY in the State of XX

5. Covering Period MM / MM / YYYY through MM / MM / YYYY

01 / 01 / 2005 through 06 / 30 / 2005

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 K. KENNETH TARBELL

Signature of Treasurer K. Kenneth Tarbell Date MM / MM / YYYY

07 / 29 / 2005

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

25038864272

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**ALTICOR POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:   /  To:   /   
 From:   /  To:   /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="YYYYYY"/> <input type="text" value="2005"/>		<input type="text" value="624342"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="624342"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="258390"/>	<input type="text" value="258390"/>
(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="882732"/>	<input type="text" value="882732"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="640000"/>	<input type="text" value="640000"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="242732"/>	<input type="text" value="242732"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value=""/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value=""/>	

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

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**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)

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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)

**ALTICOR POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A.**

**KENT COUNTY REPUBLICAN COMMITTEE**

Mailing Address

**353 FULLER N.E.**

City

**GRAND RAPIDS**

State

**MI**

Zip Code

**49503**

Purpose of Disbursement

**LINCOLN DAY DINNER TABLE**

Candidate Name

Category/  
Type

Date of Disbursement

**03 / 06 / 2005**

Amount of Each Disbursement this Period

**40000**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

**MIKE FERGUSON FOR CONGRESS**

Mailing Address

**16 Mt. BETHEL RD. #353**

City

**WARREN**

State

**NJ**

Zip Code

**07059**

Purpose of Disbursement

Candidate Name

**MIKE FERGUSON**

Category/  
Type

Date of Disbursement

**03 / 08 / 2005**

Amount of Each Disbursement this Period

**150000**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **NJ**

District: **7**

Full Name (Last, First, Middle Initial)

**C.**

**MCCOTTER CONGRESSIONAL FUND**

Mailing Address

**P.O. BOX 530788**

City

**LIVONIA**

State

**MI**

Zip Code

**48153**

Purpose of Disbursement

Candidate Name

**THADDEUS MCCOTTER**

Category/  
Type

Date of Disbursement

**03 / 08 / 2005**

Amount of Each Disbursement this Period

**100000**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **MI**

District: **11**

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

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

**290000**

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**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 2

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

**ALTIOR POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HASTERT FOR CONGRESS COMMITTEE**

Mailing Address

**P.O. Box 625**

City

**BATAVIA**

State

**IL**

Zip Code

**60510**

Purpose of Disbursement

Candidate Name

**DENNIS HASTERT**

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **IL**

District: **14**

Date of Disbursement

**04 / 05 / 2005**

Amount of Each Disbursement this Period

**150000**

**B. MIKE R FUND**

Mailing Address

**1321 E. MICHIGAN AVE.**

City

**LANSING**

State

**MI**

Zip Code

**48912**

Purpose of Disbursement

Candidate Name

**MIKE ROBERS**

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **MI**

District: **B**

Date of Disbursement

**06 / 28 / 2005**

Amount of Each Disbursement this Period

**100000**

**C. MICHIGAN LEAD FUND**

Mailing Address

**1454 CIMARRON DR.**

City

**HOLLAND**

State

**MI**

Zip Code

**46423**

Purpose of Disbursement

Candidate Name

**PETER HOEKSTRA**

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

**06 / 28 / 2005**

Amount of Each Disbursement this Period

**100000**

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

**350000**

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

**640000**

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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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FEDEX* Shipping Date  
*7/29/05*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*JAD*  
 PREPARER  
 (3/2005)

*8/1/05*  
 DATE PREPARED

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