

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
2010 OCT 19 AM 9:24  
FEC MAIL CENTER

Office Use Only

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

12FE4M5

BRANCH COUNTY REPUBLICAN COMMITTEE

JON HOUTZ

ADDRESS (number and street) PO BOX 127

Check if different than previously reported. (ACC)

COLDWATER MI 49034-0127

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

C00000992

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) (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) |
|--|---------------------------------------|--|

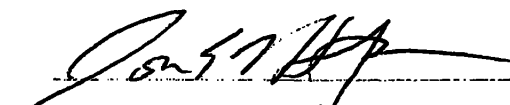
Election on [ ] / [ ] / [ ] in the State of [ ]

5. Covering Period 07 01 2010 through 09 30 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 JON E HOUTZ

Signature of Treasurer



Date

10 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							
-----------------	--	--	--	--	--	--	--

**FEC FORM 3X**  
Rev. 12/2004

10030454296

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

*BRANCH COUNTY Republican Committee*

Report Covering the Period:

From:

*07 01 2000*

To:

*09 30 2010*

10030454297

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, <i>2010</i>	<i>2829.13</i>
(b) Cash on Hand at Beginning of Reporting Period.....	<i>2557.48</i>
(c) Total Receipts (from Line 19).....	<i>8785.02</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<i>11342.50</i>
7. Total Disbursements (from Line 31).....	<i>7069.67</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<i>4272.83</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	



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

*BRANCH COUNTY Republican Committee*

Report Covering the Period: From: *07 01 2010* To: *09 30 2010*

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

10030454298

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)).....▶

*8784.37*  
*8784.37*

*8784.37*  
*8784.37*

- (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 33, page 5).....▶

*8784.37*

*8784.37*

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

*65*

*226*

18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

*8785.02*

*8786.63*

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

*8785.02*

*8786.63*

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

10030454299

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 .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	706967	734293
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	706967	734293
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	706967	734293
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	706967	734293

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Ex-  
penditures**

**COLUMN A  
Total This Period**

**COLUMN B  
Calendar Year-to-Date**

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

878437  
878437  
706967  
706967

878437  
878437  
734293  
734293

10030454300

**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"/> 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

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)

**BRANCH COUNTY REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

A.

**Coldwater Township Hall**

Mailing Address

**319 SPRAGUE Rd**

City

**Coldwater**

State

**MI**

Zip Code

**49036**

Purpose of Disbursement

**Hall Rental**

Candidate Name

Category/  
Type

Date of Disbursement

**07 07 2010**

Amount of Each Disbursement this Period

**30000**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

**STATE OF MICHIGAN**

Mailing Address

**570 N. MARSHALL Rd.**

City

**Coldwater**

State

**MI**

Zip Code

**49036**

Purpose of Disbursement

**Food License**

Candidate Name

Category/  
Type

Date of Disbursement

**07 13 2010**

Amount of Each Disbursement this Period

**2800**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

**Hole in one International**

Mailing Address

**6195 Ridgeview Court, Suite A**

City

**Reno, Nevada**

State

Zip Code

**89519**

Purpose of Disbursement

**INSURANCE**

Candidate Name

Category/  
Type

Date of Disbursement

**07 15 2010**

Amount of Each Disbursement this Period

**17100**

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).....▶

**49900**

10030454301

**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 <u>2</u> OF <u>7</u>
	<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 type="checkbox"/> 29	<input type="checkbox"/> 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)  
BRANCH COUNTY Republican COMMITTEE

A. Full Name (Last, First, Middle Initial) U.S. Postmaster

Mailing Address W. Pearl St.

City Coldwater State MI Zip Code 49036

Purpose of Disbursement FEC Report

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement 07 / 17 / 2010

Amount of Each Disbursement this Period 341

B. Full Name (Last, First, Middle Initial) BRANCH COUNTY FAIR

Mailing Address 262 SPRAGUE ST.

City Coldwater State MI Zip Code 49036

Purpose of Disbursement Booth RENT

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement 08 / 03 / 2010

Amount of Each Disbursement this Period 260.00

C. Full Name (Last, First, Middle Initial) QUALITY QUICK PRINT

Mailing Address 11 S. Hudson St.

City Coldwater State MI Zip Code 49036

Purpose of Disbursement OFFICE PRINTING

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement 08 / 03 / 2010

Amount of Each Disbursement this Period 78.19

SUBTOTAL of Disbursements This Page (optional)..... 341.60

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

10030454302

**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 type="checkbox"/> 29	<input type="checkbox"/> 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)

BRANCH COUNTY REPUBLICAN COMMITTEE

Full Name (Last, First, Middle Initial)

A. NORMAN Foods		Date of Disbursement
Mailing Address 86 DIVISION ST.		08 ' 07 ' 2010
City BATTLE CREEK MI	State MI	Zip Code 49017
Purpose of Disbursement EAT STAND EXPENSE	Category/ Type	Amount of Each Disbursement this Period 571.74
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. AUNT MILLIES BAKERY		Date of Disbursement
Mailing Address 189 W. GARFIELD AVE		08 ' 07 ' 2010
City COLDWATER MI	State MI	Zip Code 49036
Purpose of Disbursement EAT STAND EXPENSE	Category/ Type	Amount of Each Disbursement this Period 115.50
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. BRANCH COUNTY REPUBLICAN EAT STAND		Date of Disbursement
Mailing Address P.O. Box 127		08 ' 07 ' 2010
City COLDWATER MI	State MI	Zip Code 49036
Purpose of Disbursement EAT STAND EXPENSE	Category/ Type	Amount of Each Disbursement this Period 600.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

1287.24

10030454303



**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 <u>4</u> OF <u>7</u>
	<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	

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)  
BRANCH COUNTY REPUBLICAN COMMITTEE

Full Name (Last, First, Middle Initial) <u>NORMAN Foods</u>		Date of Disbursement <u>08</u> / <u>10</u> / <u>2010</u>
Mailing Address <u>86 DIVISION ST.</u>		Amount of Each Disbursement this Period <u>44442</u>
City <u>BATTLE CREEK</u>	State <u>MI</u>	
Zip Code <u>49017</u>		Category/ Type <input type="checkbox"/>
Purpose of Disbursement <u>EAT STAND EXPENSE</u>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <u>NORMAN Foods</u>		Date of Disbursement <u>08</u> / <u>12</u> / <u>2010</u>
Mailing Address <u>86 DIVISION ST.</u>		Amount of Each Disbursement this Period <u>64595</u>
City <u>BATTLE CREEK</u>	State <u>MI</u>	
Zip Code <u>49036</u>		Category/ Type <input type="checkbox"/>
Purpose of Disbursement <u>EAT STAND EXPENSE</u>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <u>NORMAN Foods</u>		Date of Disbursement <u>08</u> / <u>15</u> / <u>2010</u>
Mailing Address <u>86 DIVISION ST.</u>		Amount of Each Disbursement this Period <u>83256</u>
City <u>BATTLE CREEK</u>	State <u>MI</u>	
Zip Code <u>49036</u>		Category/ Type <input type="checkbox"/>
Purpose of Disbursement <u>EAT STAND EXPENSE</u>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	<u>192293</u>
TOTAL This Period (last page this line number only).....▶	

10030454304

**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 5 OF 7

<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 type="checkbox"/> 29	<input type="checkbox"/> 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)

BRANCH COUNTY REPUBLICAN COMMITTEE

Full Name (Last, First, Middle Initial)

A. MIKE TERPENING

Date of Disbursement

08' 15' 2010

Mailing Address

E. Chicago Rd

City

QUINCY

State

MI

Zip Code

49082

Purpose of Disbursement

EAT STAND EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

800.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. SHOPPERS GUIDE

Date of Disbursement

08' 18' 2010

Mailing Address

57 S. MONROE ST

City

COLDWATER

State

MI

Zip Code

49036

Purpose of Disbursement

DISPLAY ADS

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

201.93

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. BARB BRADY

Date of Disbursement

09' 09' 2010

Mailing Address

75 OAKWOOD DR

City

COLDWATER

State

MI

Zip Code

49036

Purpose of Disbursement

PRINTING OF SIGNS.

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

221.00

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).....▶

1222.93

10030454305

**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 6 OF 7

<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 type="checkbox"/> 29	<input type="checkbox"/> 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)

BRANCH COUNTY REPUBLICAN COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRANCH COUNTY FAIR

Mailing Address  
202 SPRAGUE ST.

City Coldwater State MI Zip Code 49036

Purpose of Disbursement  
FAIR RENT expense

Candidate Name

Category/  
Type

Date of Disbursement

09 ' 09 ' 2010

Amount of Each Disbursement this Period

1082.97

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. AMERIGAS

Mailing Address  
681 E. Chicago Rd.

City Coldwater State MI Zip Code 49036

Purpose of Disbursement  
GAS BILL

Candidate Name

Category/  
Type

Date of Disbursement

09 ' 09 ' 2010

Amount of Each Disbursement this Period

58.00

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FARMERS MUTUAL FIRE INSURANCE

Mailing Address  
36 DIVISION ST.

City Coldwater State MI Zip Code 49036

Purpose of Disbursement  
FIRE INSURANCE

Candidate Name

Category/  
Type

Date of Disbursement

09 ' 09 ' 2010

Amount of Each Disbursement this Period

365.00

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).....▶

15059.7

10030454306

**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"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	7 / 7
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 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)  
**BRANCH COUNTY Republican Committee**

**A.**

Full Name (Last, First, Middle Initial) **HAL NOTTINGHAM**

Mailing Address **136 E Chicago Rd**

City **Coldwater** State **MI** Zip Code **49036**

Purpose of Disbursement **OFFICE Supplies**

Candidate Name **90**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement **09 / 09 / 2010**

Amount of Each Disbursement this Period **260.00**

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

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

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

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **260.00**

**TOTAL** This Period (last page this line number only) ..... ▶ **7039.67**

10030454307

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)  
10/12/10

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

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
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

  
PREPARER

10/19/10  
DATE PREPARED

10030454308