

RECEIVED  
FEC MAIL  
OPERATIONS CENTER

11<sup>th</sup> District Democratic Committee  
18104 Vacri Lane  
Livonia, Michigan 48152  
734-422-1455

2002 DEC 11 A 11:03

December 5, 2002

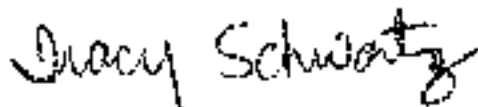
Re: Quarterly Report  
October 15, 2002  
Fec I.D# C00280941

To Whom It May Concern:

We are in receipt of your correspondence dated 11/30/02. Enclosed please find a hard copy of the report in question, with acknowledgement from e-file from December 4, 2002, and a letter with the original problem outlined.

Thank you for your attention in this matter, we will assume everything is complete.

Sincerely,



Tracy Schwartz  
E-file Coordinator

FEDERAL ELECTION COMMISSION  
999 E STREET, NW ROOM #709  
WASHINGTON, DC 20463

**WESTERN UNION MAILGRAM**



104357000629 11/30/02  
EM16105

LGS1 - LGSA

*Leslie Assoc.  
248 855-4405  
Attn: Terry  
Schubert*

BARBARA JOHNSON  
11th DISTRICT DEMOCRATIC COMMITTEE  
18104 Vacri Ln  
Livonia MI 48152-3124

November 29, 2002

IDENTIFICATION NUMBER: C00280941

REFERENCE: OCTOBER QUARTERLY REPORT (07/01/02 - 09/30/02)

DEAR TREASURER:

IT HAS COME TO THE ATTENTION OF THE FEDERAL ELECTION COMMISSION (FEC) THAT YOU MAY HAVE FAILED TO FILE THE ABOVE REFERENCED REPORT OF RECEIPTS AND EXPENDITURES AS REQUIRED BY THE FEDERAL ELECTION CAMPAIGN ACT, AS AMENDED. YOU WERE PREVIOUSLY NOTIFIED OF THE DUE DATE FOR THIS REPORT.

IT IS IMPORTANT THAT YOU FILE THIS REPORT IMMEDIATELY WITH THE FEC, 999 E STREET, N.W., WASHINGTON, D.C., 20463. A COPY OF THE REPORT OR RELEVANT PORTIONS MUST ALSO BE FILED WITH THE SECRETARY OF STATE OR EQUIVALENT STATE OFFICER, UNLESS THE STATE IS EXEMPT FROM THE FEDERAL REQUIREMENT TO RECEIVE AND MAINTAIN PAPER COPIES.

DUE TO RECENT EVENTS, THE US POSTAL SERVICE IS EXPERIENCING DELAYS IN THE DELIVERY OF MAIL FOR THE WASHINGTON, DC AREA. CONSEQUENTLY, THE FEC IS NOT IN RECEIPT OF ALL INCOMING MAIL. THE COMMISSION RECOMMENDS THAT YOU SUBMIT YOUR REPORT AND CONSIDER USING ALTERNATE DELIVERY SERVICES SUCH AS OVERNIGHT DELIVERY OR DELIVERY BY COURIER. YOU CAN VERIFY THE COMMISSION'S RECEIPT OF ANY DOCUMENTS SUBMITTED BY YOUR COMMITTEE ON THE FEC WEBSITE AT WWW.FEC.GOV.

THE FAILURE TO TIMELY FILE THIS REPORT MAY RESULT IN CIVIL MONEY PENALTIES, AN AUDIT OR LEGAL ENFORCEMENT ACTION. THE CIVIL MONEY PENALTY CALCULATION FOR LATE REPORTS DOES NOT INCLUDE A GRACE PERIOD AND BEGINS ON THE DAY FOLLOWING THE DUE DATE FOR THE REPORT.

IF YOU HAVE ANY QUESTIONS REGARDING THIS MATTER, PLEASE CONTACT JULIE L. PERRY ON OUR TOLL FREE NUMBER (800)424-9530. OUR LOCAL NUMBER IS (202)694-1130.

SINCERELY,

JOHN D. GIBSON  
ASSISTANT STAFF DIRECTOR  
REPORTS ANALYSIS DIVISION

**Tracy Schwartz**

From: Fecfile1 FEC Filing Server [http://db@nicovainf2.sdrdc.com]  
 Sent: Tuesday, December 03, 2002 10:47 PM  
 To: tschwartz@kesslercpa.com  
 Subject: FEC Electronic Filing Results

## DISCLOSE -- FEC Financial Disclosure Filing Acknowledgement

This is to acknowledge the receipt and acceptance of your electronic filing via the DISCLOSE protocol.

Your filing was received and accepted by our system at 12/03/2002 - 22:46:30, and was assigned the Filing ID of: FEC-66218

Please make a note of this, as it will be necessary to refer to this information in the future.

Thank you for using DISCLOSE.

For your reference, the output of the validation check was as follows:

FEC File Validator Version 4.00.14

Developed for the Federal Election Commission  
 by NTC Technologies, Inc. 1996-2000

## ==== Identification Section =====

Committee ID: CG0280941  
 Committee Name: 11TH DISTRICT DEMOCRATIC COMMITTEE  
 Filing Type: F3XN  
 From/Through: 20020701 - 20020930  
 Software/Ver#: FECEfile4 / Ver# 4.00

## ==== Results Section =====

>>>----> FEC data file passed validation. <-----

Alert: 00001 warnings and/or potential missing information encountered

## ==== Summary Page Totals Section =====

Cover/Summary Page Totals for Form: F3X

Line No.	Column A	Column B
6A 2002		65,845.03
6B	29,702.73	
6C	13,145.08	21,145.88
6D	43,848.61	86,991.71
7	23,691.96	67,835.06
8	19,156.65	19,156.65
9	0.00	
10	0.00	
11A1	0.00	0.00
11A2	10.00	10.00
11A3	10.00	10.00
11B	0.00	3,000.00
11C	0.00	0.00
11D	10.00	3,010.00
12	23,000.00	18,000.00
13	0.00	0.00

14	0.00	0.00
15	135.88	135.88
16	0.00	0.00
17	0.00	0.00
18	0.00	0.00
19	13,145.88	21,145.88
20	13,145.88	21,145.88
21A1	0.00	0.00
21A2	0.00	0.00
21B	8,691.96	12,212.46
21C	8,591.96	12,212.46
22	0.00	60,622.60
23	15,000.00	15,000.00
24	0.00	0.00
25	0.00	0.00
26	0.00	0.00
27	0.00	0.00
28A	0.00	0.00
28B	0.00	0.00
28C	0.00	0.00
28D	0.00	0.00
29	0.00	0.00
30	23,691.96	67,835.06
31	23,691.96	67,835.06
32	10.00	3,010.00
33	0.00	0.00
34	10.00	3,010.00
35	8,691.96	12,212.46
36	135.88	135.88
37	8,556.08	12,076.58

\*\*\* Errors & Warnings Section \*\*\*\*\*

Validation Errors & Warnings\*

ERROR (Level 15, 13, 8) Messages...

No Errors

WARNING (Level 4) Messages...

Form{Item}: SB23 {MICHIGAN DEMOCRATIC PARTY-FEDERAL}  
 Field Name: #012 Election Type Code  
 Warning Election Code invalid: 02002 {Description missing}  
 MD5 checksum:  
 301e69d29deac85fb1734532c5b086f8

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FED MAIL OPERATIONS CENTER

2007 DEC 11 A 11:03

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

W.T.H. District Democratic Committee

18104 Yacht Lane

ADDRESS (number and street)

[Empty address lines]

Check if different than previously reported. (ACC)

Livonia

MI

48152

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00280941

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

Feb 20 (M2)  
 Mar 20 (M3)  
 Apr 20 (M4)

May 20 (M5)  
 Jun 20 (M6)  
 Jul 20 (M7)

Aug 20 (M8)  
 Sep 20 (M9)  
 Oct 20 (M10)

Nov 20 (M11) (Non-Election Year Only)  
 Dec 20 (M12) (Non-Election Year Only)  
 Jan 31 (YE)

(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)

(c) 12-Day PRE-Election Report for the:

Primary (12P)  
 Convention (12C)

General (12G)  
 Special (12S)

Runoff (12R)

Election on

[Empty date boxes]

In the State of

[Empty state box]

(d) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

[Empty date boxes]

In the State of

[Empty state box]

5. Covering Period

07/01/02

through

09/30/02

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

Barbara E. Johnson

Signature of Treasurer

[Handwritten signature of Barbara E. Johnson]

Date

[Empty date boxes]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6487g.

Office Use Only

FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name:

11th District Democratic Committee C00280941

Report Covering the Period:

From:

07 ' 07 ' 02

To:

09 ' 30 ' 02

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>02</u>		<u>6584583</u>
(b) Cash on Hand at Beginning of Reporting Period .....	<u>2970273</u>	
(c) Total Receipts (from Line 18) .....	<u>1314588</u>	<u>8114588</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<u>4284961</u>	<u>8699171</u>
7. Total Disbursements (from Line 30) .....	<u>2369196</u>	<u>6783506</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<u>1915665</u>	<u>1915665</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<u>00</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<u>00</u>	

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 800-424-0530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

11th District Democratic Committee C00280941

Report Covering the Period:

From:

07 01 02

To:

09 30 02

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 (see Schedule A)	1,000	
(ii) Unitemized	00	
(iii) TOTAL (add		
Lines 11(a)(i) and (ii))	00	1,000
(b) Political Party Committees	00	30,000
(c) Other Political Committees (such as PACs)	00	00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)	1,000	30,000
12. Transfers From Affiliated/Other Party Committees	13,000.00	18,000.00
13. All Loans Received	00	00
14. Loan Repayments Received	00	00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	1,358.88	1,358.88
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	00	00
17. Other Federal Receipts (Dividends, Interest, etc.)	00	00
18. Transfers from Nonfederal Account for Joint Activity	00	00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	13,145.88	21,145.88
20. Total Federal Receipts (subtract Line 18 from Line 19)	13,145.88	21,145.88

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Revised 1/01)

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	00	00
(ii) Non-Federal Share	00	00
(b) Other Federal Operating Expenditures	869,196	1,221,246
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	869,196	1,221,246
22. Transfers to Affiliated/Other Party Committees	1500,000	4,062,260
23. Contributions to Federal Candidates/Committees and Other Political Committees	00	1,500,000
24. Independent Expenditures (use Schedule E)	00	00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	00	00
26. Loan Repayments Made	00	00
27. Loans Made	00	00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	00	00
(b) Political Party Committees	00	00
(c) Other Political Committees (such as PACs)	00	00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	00	00
29. Other Disbursements	00	00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 26, 27, 28(d), and 29)	8,369,196	6,783,506
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	2,369,196	6,783,506
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	10,000	30,100,000
33. Total Contribution Refunds (from Line 28(d))	00	00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	10,000	30,100,000
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	869,196	1,221,246
36. Offsets to Operating Expenditures (from Line 15, page 3)	13,588	13,588
37. Net Operating Expenditures (subtract Line 36 from Line 35)	855,608	1,207,658



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 1 OF 1	
	<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)  
11th District Democratic Comm. 000280941

Full Name (Last, First, Middle Initial)  
A. Edna J. Barte

Date of Receipt  
8 / 9 / 02

Mailing Address  
470 N. Fox Hills Dr. Apt. 2  
Bloomfield Hills, MI 48304

Amount of Each Receipt this Period  
1000

FEC ID number of contributing federal political committee  
C

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) Contribution  
Aggregate Year-to-Date  
1000

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

Date of Receipt

Mailing Address  
City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee  
C

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify)  
Aggregate Year-to-Date

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

Date of Receipt

Mailing Address  
City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee  
C

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify)  
Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional)   
TOTAL This Period (last page this line number only)   
1000

**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 / OF /
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<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)  
**11th District Democratic Comm. Co02180941**

A. Full Name (Last, First, Middle Initial)  
**Ex. Comm. 11th District Dem. Party**

Date of Receipt  
**7/2/02**

Mailing Address  
**18104 Vacri Lane**

City  
**Xivonia**

State  
**Mi.**

Zip Code  
**48152**

Amount of Each Receipt this Period  
**1200.00**

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

Name of Employer  
Occupation

Refund of non federal transfers of 1/12/01 3000.00, 5/22/01 3000.00, 9/19/01 3000 and 12/26/01 3000.00 of bing receipts. All monies is hereby permissible per Angel Williamson 10/2/02

Receipt For:  
 Primary  General  
 Other (specify) **1200.00**

Aggregate Year-to-Date **1200.00**

B. Full Name (Last, First, Middle Initial)  
**11th District Dem. Comm. Sp. Binga Lic. A03003**

Date of Receipt  
**8/09/02**

Mailing Address  
**3101 Glen castle**

City  
**Farm. Hills,**

State  
**Mi.**

Zip Code  
**48336**

Amount of Each Receipt this Period  
**1000.00**

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) **1000.00**

Aggregate Year-to-Date **1000.00**

**Tr. of Binga proceeds to general fund**

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

Date of Receipt

Mailing Address

City

State

Zip Code

Amount of Each Receipt this Period

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional)

**13000.00**

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	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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
11th District Dem. Comm. C00280941

Full Name (Last, First, Middle Initial)  
United States Treasury

Date of Receipt  
9 / 20 / 02

Mailing Address  
City Austin, Texas State Zip Code

Amount of Each Receipt this Period  
135.88

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) Refund of monthly taxes for wagering  
Aggregate Year-to-Date 135.88

Full Name (Last, First, Middle Initial)

Date of Receipt

Mailing Address  
City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)   
Aggregate Year-to-Date

Full Name (Last, First, Middle Initial)

Date of Receipt

Mailing Address  
City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)   
Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional)	<u>135.88</u>
TOTAL This Period (last page this line number only)	<u>135.88</u>

**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 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"/> 28

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NAME OF COMMITTEE (In Full)  
11th District Dem. Comm. C10280941

**A**

Full Name (Last, First, Middle Initial): Postal Service

Mailing Address: Livonia Mall

City: Livonia State: Mi. Zip Code: 48152-9998

Purpose of Disbursement: Postage / FEE Report

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

Office Bought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) Postage

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

Date of Disbursement: 7 / 08 / 03

Amount of Each Disbursement this Period: 518

Category/Type: 00.1

**B**

Full Name (Last, First, Middle Initial): United States Treasury

Mailing Address: Internal Rev. Service

City: Cincinnati, Ohio State: \_\_\_\_\_ Zip Code: 45999-0100

Purpose of Disbursement: Monthly taxes on wagering (bingo) Jan.-June

Candidate Name: Form 730

Office Bought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) Taxes/IRS

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

Date of Disbursement: 7 / 11 / 03

Amount of Each Disbursement this Period: 16583

Category/Type: 00.1

**C**

Full Name (Last, First, Middle Initial): Internal Revenue Service Center

Mailing Address: \_\_\_\_\_

City: Ogden, UT. State: \_\_\_\_\_ Zip Code: 84201

Purpose of Disbursement: Taxes / Form 1120 Pol. for year 2001

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

Office Bought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) Taxes IRS

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

Date of Disbursement: 7 / 13 / 2002

Amount of Each Disbursement this Period: 50670.0

Category/Type: 00.1

SUBTOTAL of Disbursements This Page (optional): 52380.1

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 <u>2</u> OF <u>5</u>	
	<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

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)  
11th District Democratic Comm. Cno 8809#1

**A. Internal Revenue**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
Service Center

City Cincinnati, Ohio State \_\_\_\_\_ Zip Code 45999-0101

Purpose of Disbursement  
Occupational Tax Form 11c

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

Category/Type 001

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) Tax/IRS

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

Date of Disbursement: 7 / 73 / 02

Amount of Each Disbursement this Period: 5.000

**B. Internal Revenue**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City Cincinnati, Ohio State \_\_\_\_\_ Zip Code 45999-0101

Purpose of Disbursement  
Monthly Tax (July) Form 730

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

Category/Type 001

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) Monthly tax

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

Date of Disbursement: 8 / 79 / 02

Amount of Each Disbursement this Period: 14.94

**C. Vicki Barnett**

Full Name (Last, First, Middle Initial) Vicki Barnett

Mailing Address  
29271 Glencastle Ct

City Lawn Hills, MI State MI Zip Code 48336

Purpose of Disbursement  
Reimbursement for printing of district notices

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

Category/Type 001

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) Reimbursement for printing

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

Date of Disbursement: 8 / 78 / 02

Amount of Each Disbursement this Period: 157.30

SUBTOTAL of Disbursements This Page (optional) 222.24

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 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

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NAME OF COMMITTEE (in Full)  
*11th District Democratic Comm. Co. 280941*

**A. Internal Revenue Service**

Full Name (Last, First, Middle Initial): *Internal Revenue Service*

Mailing Address: \_\_\_\_\_

City: *Cincinnati* State: *Ohio* Zip Code: *45999-0100*

Purpose of Disbursement: *Monthly Tax Form 730*

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *Monthly Tax*

Date of Disbursement: *9/23/02*

Amount of Each Disbursement this Period: *2838*

Category/Type: *001*

**B. Internal Revenue Service**

Full Name (Last, First, Middle Initial): *Internal Revenue Service*

Mailing Address: \_\_\_\_\_

City: *Cincinnati* State: *Ohio* Zip Code: *45999-*

Purpose of Disbursement: *Monthly taxes (Feb 28 - June 30)*

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *Tax plus penalties and interest*

Date of Disbursement: *9/20/02*

Amount of Each Disbursement this Period: *11984*

Category/Type: *001*

**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) \_\_\_\_\_

Date of Disbursement: \_\_\_\_\_

Amount of Each Disbursement this Period: \_\_\_\_\_

Category/Type: \_\_\_\_\_

SUBTOTAL of Disbursements This Page (optional): *20822*

TOTAL This Period (last page use 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 4 OF 5	
<input checked="" type="checkbox"/> 21a	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 25	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (in full)  
**11th District Democratic Comm. C00280941**

**A**

Full Name (Last, First, Middle Initial)  
**Sheldon Hall**

Mailing Address  
**33111 Plymouth Rd.**

City  
**Livonia** State **MI.** Zip Code **48150**

Purpose of Disbursement  
**Hall Rental Fee** Category/Type **009**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **Bingo**

State: District: **Bingo**

Date of Disbursement  
**9/22/02**

Amount of Each Disbursement this Period  
**425.00**

**B**

Full Name (Last, First, Middle Initial)  
**Sheldon Hall**

Mailing Address  
**33111 Plymouth Rd.**

City  
**Liv.** State **MI.** Zip Code **48150**

Purpose of Disbursement  
**Hall Rental Fee** Category/Type **009**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **Bingo**

State: District: **Bingo**

Date of Disbursement  
**9/29/02**

Amount of Each Disbursement this Period  
**425.00**

**C**

Full Name (Last, First, Middle Initial)  
**Bill's Print Shop**

Mailing Address  
**3040 Wayne Rd.**

City  
**Wayne** State **MI.** Zip Code **48184**

Purpose of Disbursement  
**Printing/Verification tickets** Category/Type **003**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **Bingo**

State: District: **Bingo**

Date of Disbursement  
**9/25/02**

Amount of Each Disbursement this Period  
**141.51**

SUBTOTAL of Disbursements This Page (optional) **991.51**

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

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NAME OF COMMITTEE (Inc/Etc)  
**11th District Democratic Comm. C00280941**

**A. Sheldon Hall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **33711 Plymouth Rd.**  
 City: **Livonia** State: **Mi.** Zip Code: **48150**  
 Purpose of Disbursement: **Hall Rental Fee** Category/Type: **003**  
 Disbursement For:  Primary  General  Other (specify) **Bingo**  
 Office Sought:  House  Senate  President  
 State: District: **Bingo**

Date of Disbursement: **9/30/02**  
 Amount of Each Disbursement this Period: **425.00**

**B. Advance Novelty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **29199 Six Mile Rd.**  
 City: **Livonia** State: **Mi.** Zip Code: **48152**  
 Purpose of Disbursement: **Purchase of bingo supplies** Category/Type: **003**  
 Disbursement For:  Primary  General  Other (specify) **Bingo**  
 Office Sought:  House  Senate  President  
 State: District: **Bingo**

Date of Disbursement: **9/30/02**  
 Amount of Each Disbursement this Period: **6109.8**

**C. Advance Novelty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **29199 Six Mile Rd.**  
 City: **Livonia** State: **Mi.** Zip Code: **48152**  
 Purpose of Disbursement: **Purchase of charity game tickets** Category/Type: **004**  
 Disbursement For:  Primary  General  Other (specify) **Bingo**  
 Office Sought:  House  Senate  President  
 State: District: **Bingo**

Date of Disbursement: **9/30/02**  
 Amount of Each Disbursement this Period: **996.00**

SUBTOTAL of Disbursements This Page (optional): **2031.98**  
 TOTAL This Period (last page this line number only): **7600.00**



**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	OF
	<input type="checkbox"/> 21a	<input checked="" 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"/> 28

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NAME OF COMMITTEE (in full)  
**11th District Dem. Comm. C00280941**

**A. Michigan Democratic Party / Federal**

Full Name (Last, First, Middle Initial)

Mailing Address: **166 Townsend**

City: **Lansing** State: **Mi.** Zip Code: **48933**

Purpose of Disbursement: **Contribution**

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **Contribution**

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

Date of Disbursement: **8/27/02**

Amount of Each Disbursement this Period: **1500.000**

Category/Type: **011**

**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) ..... ▶

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

**1500.000**

October 17, 2002

Please accept this return on paper. I have tried to call numerous times, I get sent from person to person to end up with a voice mail. I have left messages for numerous people and can't seem to get through.

I electronically filed the return on Monday Oct. 14, 2002, but got rejected because of a password. I have tried to get a password and nobody has returned my call to let me know how to go about this. I have also asked questions regarding the file because it says it was sent and I can't make any changes, so how do I file it again with a password? Again, no one has returned my call.

Please accept this return as is, and have someone call me regarding the next report, and getting a password.

Thank you for your attention in this matter.

Sincerely,

Tracy Schwartz  
#248-855-4224 ext. 102  
e-mail: tschwartz2@kesslercpa.com

No Response!  
Ever

I finally called  
back to get a  
password.

Federal Election Commission

### ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 12-6-02
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>AEI</i> PREPARER	12-11-02 DATE PREPARED