

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

2002 DEC - 4 02 02 04

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

12FE4MS

EMMA RIES POLITICAL CITIZENSHIP GROUP

ADDRESS (number and street)

1101 S BRICK ST #101

Check if different than previously reported. (ACC)

ALPHARETTA GA 30201

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00025395

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:

- 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)

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

- Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)

Election on

11 05 2002 In the State of GA

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

- General (30G)
Runoff (30R)
Special (30S)

Election on

11 05 2002 In the State of GA

5. Covering Period

10 01 2002 through 11 25 2002

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

Robin Lunnay

Signature of Treasurer

Robin Lunnay

Date

12 03 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

Table with 7 columns and 1 row for Office Use Only.

FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

PNA RESPONSIBLE CITIZENS GROUP

Report Covering the Period:

From:

10.01.2002

To:

11.25.2002

**COLUMN A
This Period**

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

6. (a) Cash on Hand January 1, 2002

57,096

(b) Cash on Hand at Beginning of Reporting Period

201,606

(c) Total Receipts (from Line 19)

303,029

(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)

505,330

7. Total Disbursements (from Line 30)

152,251

152,251

8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))

353,079

353,079

9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)

0

10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)

0

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
990 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FED Form 3X (Revised 1/01)

Write or Type Committee Name

PMA RESPONSIBLE CITIZENS GROUP

Report Covering the Period:

From:

10/01/2002

To:

11/25/2002

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)	1,354.00	
(ii) Unitemized	1,681.24	
(ii) TOTAL (add Lines 11(a)(i) and (ii)	3,037.24	1,482.59
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(i), (b), and (c)) (Carry Totals to Line 32, page 4)	3,037.24	1,482.59
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 36, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Accounts for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	3,037.24	1,482.59
20. Total Federal Receipts (subtract Line 18 from Line 19)	3,037.24	1,482.59

DETAILED SUMMARY PAGE
of Disbursements

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditure	7,511	6,978
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7,511	6,978
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,500,000	1,500,000
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441e(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. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	1,507,511	1,506,978
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	1,500,000	1,500,000
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	3,003,709	2,805,500
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	3,003,709	2,805,500
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7,511	6,978
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35)	7,511	6,978

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1 OF 6

(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"/> 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)

PMA RESPONSIBLE CITIZENS GROUP

Full Name (Last, First, Middle Initial)

A. ORTIZ PATRICK

Mailing Address

RIVERBANK SQUARE

City

ALA

State Zip Code

ALA 37158

FEC ID number of contributing federal political committee

000025395

Name of Employer

PMA RESOURCES

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

11/25/2002

Amount of Each Receipt this Period

150.00

EMPLOYEE PAYROLL DEDUCTION

B. STEERBA JEFFRY

Mailing Address

RIVERBANK SQUARE

City

ALA

State Zip Code

ALA 37158

FEC ID number of contributing federal political committee

000025395

Name of Employer

PMA RESOURCES

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

970.00

Date of Receipt

11/25/2002

Amount of Each Receipt this Period

80.00

EMPLOYEE PAYROLL DEDUCTION

C. ORTIZ PATRICK

Mailing Address

RIVERBANK SQUARE

City

ALA

State Zip Code

ALA 37158

FEC ID number of contributing federal political committee

000025395

Name of Employer

PMA RESOURCES

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11/25/2002

Amount of Each Receipt this Period

300.00

EMPLOYEE PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page for one number only)

360.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 2 OF 6

(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (in full)

PNM RESPONSIBLE CITIZENS GROUP

Full Name (Last, First, Middle Initial)

A. DYERS, JOHN

Mailing Address

ALVARADO SQUARE

City

ALB

State

NM

Zip Code

87158

FEC ID number of contributing federal political committee.

C00025395

Name of Employer

PNM

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

4,310.00

Date of Receipt

11 25 2002

Amount of Each Receipt this Period

75.00

EMPLOYEE PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. PABILLA, EDUARDO

Mailing Address

ALVARADO SQUARE

City

ALB

State

NM

Zip Code

87158

FEC ID number of contributing federal political committee.

C00025395

Name of Employer

PNM

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.55

Date of Receipt

11 25 2002

Amount of Each Receipt this Period

60.00

EMPLOYEE PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. REEL, WILLIAM

Mailing Address

ALVARADO SQUARE

City

ALB

State

NM

Zip Code

87158

FEC ID number of contributing federal political committee.

C00025395

Name of Employer

PNM RESPONSIBLES

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3,710.01

Date of Receipt

11 25 2002

Amount of Each Receipt this Period

75.00

EMPLOYEE PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

210.00

210.00

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 3 OF 6

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
18	14	15	19
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)

PAWA RESPONSIBLE CITIZENS GROUP

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER J DELVIN

Mailing Address

ALVARADO SQUARE

City

ALB

State

NM

Zip Code

87158

FEC ID number of contributing federal political committee.

C00025395

Name of Employer

PAWA

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2358.1

Date of Receipt

11 25 2002

Amount of Each Receipt this Period

95.00

EMPLOYEE PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. FLYNN, ROGER

Mailing Address

ALVARADO SQUARE

City

ALB

State

NM

Zip Code

87158

FEC ID number of contributing federal political committee.

C00025395

Name of Employer

PAWA

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

343.10

Date of Receipt

11 25 2002

Amount of Each Receipt this Period

60.00

EMPLOYEE PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. GOEHR, SARITA

Mailing Address

ALVARADO SQUARE

City

ALB

State

NM

Zip Code

87158

FEC ID number of contributing federal political committee.

C00025395

Name of Employer

PAWA

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

461.55

Date of Receipt

11 25 2002

Amount of Each Receipt this Period

90.00

EMPLOYEE PAYROLL DEDUCTIONS

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

195.00

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 4 OF 6

11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)

PANA RESPONSIBLE CITIZENS GROUP

Full Name (Last, First, Middle Initial)

A. BORSKY, BARBARA

Mailing Address

ALVAREZ SQUARE

City

ALB

State

NY

Zip Code

87158

FEC ID number of contributing federal political committee.

C000025395

Name of Employer

PANA RESPONSIBLE

Occupation

Date of Receipt

11 25 2002

Amount of Each Receipt this Period

66.00

EMPLOYEE PAYROLL DEDUCTION

Receipt For:

Primary General Other (specify)

Aggregate Year-to-Date

399.62

Full Name (Last, First, Middle Initial)

B. WEISBERG, ERNEST

Mailing Address

ALVAREZ SQUARE

City

ALB

State

NY

Zip Code

87158

FEC ID number of contributing federal political committee.

C000025395

Name of Employer

PANA RESPONSIBLE

Occupation

Date of Receipt

11 25 2002

Amount of Each Receipt this Period

120.00

EMPLOYEE PAYROLL DEDUCTION

Receipt For:

Primary General Other (specify)

Aggregate Year-to-Date

655.00

Full Name (Last, First, Middle Initial)

C. LOVACK, JIM

Mailing Address

ALVAREZ SQUARE

City

ALB

State

NY

Zip Code

87158

FEC ID number of contributing federal political committee.

C000025395

Name of Employer

PANA RESPONSIBLE

Occupation

Date of Receipt

11 25 2002

Amount of Each Receipt this Period

25.00

EMPLOYEE PAYROLL DEDUCTION

Receipt For:

Primary General Other (specify)

Aggregate Year-to-Date

417.50

SUBTOTAL of Receipts This Page (optional)

211.00

TOTAL This Period (last page this line number only)

211.00

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 5 OF 6
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 16	<input type="checkbox"/> 12 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)
PANA RESPONSIBLE CITIZENS GROUP

A. Full Name (Last, First, Middle Initial)
MURKIN, MUR

Mailing Address
ALVARADO SQUARE

City ALB State NM Zip Code 87158

FEC ID number of contributing federal political committee
C00025395

Name of Employer PANA RESOURCES Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
366.62

Date of Receipt
11 / 25 / 2002

Amount of Each Receipt This Period
60.00

EMPLOYEE PAYROLL DEDUCTION

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

Mailing Address
ALVARADO SQUARE

City ALB State NM Zip Code 87158

FEC ID number of contributing federal political committee
C00025395

Name of Employer PANA RESOURCES Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
111.55

Date of Receipt
11 / 25 / 2002

Amount of Each Receipt This Period
75.00

EMPLOYEE PAYROLL DEDUCTION

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

Mailing Address
ALVARADO SQUARE

City ALB State NM Zip Code 87158

FEC ID number of contributing federal political committee
C00025395

Name of Employer PANA RESOURCES Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
11 / 25 / 2002

Amount of Each Receipt This Period
75.00

EMPLOYEE PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional) 210.00

TOTAL This Period (last page this line number only) 210.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOIA LINE NUMBER: (check only one)	PAGE 6 OF 6
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 11d 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)
PANA RESPONSIBLE CITIZENS GROUP

A. Full Name (Last, First, Middle Initial)
COBB, ALICE

Mailing Address
AVARADO SQUARE

City ALB State NM Zip Code 87158

FEC ID number of contributing federal political committee.
C000025395

Name of Employer PANA RESOURCES Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date 32000

Date of Receipt
11 / 25 / 2000

Amount of Each Receipt this Period
6000

EMPLOYEE PAYROLL DEDUCTIONS

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

Mailing Address
AVARADO SQUARE

City ALB State NM Zip Code 87158

FEC ID number of contributing federal political committee.
C1

Name of Employer PANA Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date 29503

Date of Receipt
11 / 25 / 2000

Amount of Each Receipt this Period
6000

EMPLOYEE PAYROLL DEDUCTIONS

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 12000

TOTAL This Period (last page this line number only) 13500

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 1 OF 2

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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"/> 29

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NAME OF COMMITTEE (in Full)

PNM RESPONSIBLE CITIZENS GROUP

Full Name (Last, First, Middle Initial)

A.

Mailing Address: WILSON, HEATHER
P.O. Box 14070

City: ALB State: NM Zip Code: 87191

Purpose of Disbursement: CAMPAIGN DONATION

Candidate Name: HEATHER WILSON

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: NM District: 1

Date of Disbursement

10/21/2002

Amount of Each Disbursement this Period

1000.00

Category/Type
011

B.

Mailing Address: POWER PAU
701 PENNSYLVANIA NW

City: WASHINGTON State: DC Zip Code: 20004-2496

Purpose of Disbursement: DONATION

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

10/18/2002

Amount of Each Disbursement this Period

500.00

Category/Type
011

C.

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) ▶

1500.00

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

1500.00

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 2 OF 2

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

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)

PMA RESPONSIBLE CITIZENS GROUP

Full Name (Last, First, Middle Initial)

A.

COMPASS BANK
 Mailing Address

505 MARQUETTE NW
 City State Zip Code

ALB NM 87101

Purpose of Disbursement
SERVICE FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) SERVICE FEE

State: District:

Date of Disbursement

10/15/2002

Amount of Each Disbursement this Period

0.01

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) SERVICE FEE

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) SERVICE FEE

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (4 lines)

TOTAL This Period (last page this line number only)

0.01
0.01

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>12/4/02</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<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>[Signature]</i>	<i>[Signature]</i>
PREPARER	DATE PREPARED