

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED  
FEDERAL ELECTION COMMISSION CENTER

NOV 26 2002 P 3 21  
Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

ADDRESS (number and street)

ANNE WALL  
ALLEN COUNTY RIGHT TO LIFE INC  
POLITICAL ACTION COMMITTEE  
3407 CONGRESS ST SUITE 2  
FORT WAYNE IN 46805

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

000235861

3. IS THIS REPORT

NEW

(N)

OR

AMENDED

(A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) Non-Election Year Only

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) Non-Election Year Only

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 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)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

10/01/2002

through

11/27/2002

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

ANNE M. WALL

Signature of Treasurer

Anne M. Wall

Date

11/26/2002

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 (Revised 1/01)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

ALLEN COUNTY RIGHT TO LIFE INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 10/01/2002 To: 10/25/2002

COLUMN A This Period

COLUMN B Calendar Year-to-Date

Table with 2 columns: Description and Amount. Rows include: (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period, (c) Total Receipts (from Line 18), (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B), 7. Total Disbursements (from Line 30), 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)), 9. Debts and Obligations Owed TO the Committee, 10. Debts and Obligations Owed BY the Committee.

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 (Revised 1/01)

Write or Type Committee Name

ALLEN COUNTY RIGHT TO LIFE INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 10/01/2002 To: 11/23/2002

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) .....	387.00	3,350.00
(ii) Unitemized .....	387.00	3,350.00
(ii) TOTAL (add Lines 11(a)(i) and (ii) .....	387.00	3,350.00
(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) .....	387.00	3,350.00
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 38, page 4) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, <u>Interest</u> , etc.) <i>Bank</i> .....	249.44	249.44
18. Transfers from Nonfederal Account for Joint Activity .....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	387.00	3,374.94
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	387.00	3,374.94

2007-2008  
**DETAILED SUMMARY PAGE**  
 of Disbursements

C00235861

FEC Form 9X (Revised 1/01)

Page 4

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 Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)	9,000	25,895
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §411a(c)) (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)	9,000	25,895
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)		
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from Line 14(d), page 3)		
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)		
35. Total Federal Operating Expenditures (add Line 21(s)(i) and Line 21(b))		
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35)		

SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 1  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**ALLEN COUNTY RIGHT TO LIFE INC  
POLITICAL ACTION COMMITTEE**

FEC IDENTIFICATION NUMBER  
**000235861**

Full Name (Last, First, Middle Initial) of Payee  
**ALLEN COUNTY RIGHT TO LIFE LIFELINES**

Purpose of Expenditure  
**Ad to endorse candidates**

Category/Type

Mailing Address  
**3409 Conestoga Dr. Ste. A**

City State Zip Code  
**FORT WAYNE IN 46808**

Name of Federal Candidate supported or opposed by expenditure:

Date  
**11/03/2002**

Amount  
**\$50.00**

Office Sought: House Senate Presidential  
State District  
Check One:  Support  Oppose

Full Name (Last, First, Middle Initial) of Payee  
**BANK ONE**

Purpose of Expenditure  
**BANK FEE**

Category/Type

Mailing Address  
City State Zip Code

Name of Federal Candidate supported or opposed by expenditure:

Date  
**11/03/2002**

Amount  
**500**

Office Sought: House Senate Presidential  
State District  
Check One:  Support  Oppose

Full Name (Last, First, Middle Initial) of Payee

Purpose of Expenditure

Category/Type

Mailing Address  
City State Zip Code

Name of Federal Candidate supported or opposed by expenditure:

Date

Amount

Office Sought: House Senate Presidential  
State District  
Check One:  Support  Oppose

(a) SUBTOTAL of Itemized Independent Expenditures **9000**

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures **9000**

Under penalty of perjury I certify that the independent expenditures reported herein were not made as solicitation, contribution, support with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing, dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Signature **Rene Wall**  
Date **11/03/2002**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

My Commission expires: \_\_\_\_\_

NOTARY PUBLIC

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
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input checked="" 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>See</i>	<i>12-2-02</i>
PREPARER	DATE PREPARED