

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

Jan 16 11 40 AM '98

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (In full)

C00024455                      120597                      N 266

KAY ANN CHASE  
FIRST CONGRESSIONAL DISTRICT D  
DEMOCRATIC COMMITTEE  
12492 PINERIDGE  
CHARLEVUIX                      MI 49720

2. FEC IDENTIFICATION NUMBER  
C 00024455

3.  This committee has qualified as a multicandidate committee. (see FEC FORM 1M)  
*SATISFIED CRITERIA PRIOR TO 1-01-94*

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

- Monthly Report Due On:
- February 20     June 20                       October 20
- March 20         July 20                       November 20
- April 20          August 20                 December 20
- May 20            September 20            January 31
- 12-Day Pre-Election Report for the \_\_\_\_\_  
(Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 30-Day Post-Election Report following the General Election  
on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?     YES     NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07-01-97</u> through <u>12-31-97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ <u>1240.63</u>
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>879.69</u>	
(c) Total Receipts (from Line 19)	\$ <u>284.00</u>	\$ <u>284.00</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>1163.69</u>	\$ <u>1524.63</u>
7. Total Disbursements (from Line 30)	\$ <u>842.62</u>	\$ <u>1203.56</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>321.07</u>	\$ <u>321.07</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>-0-</u>	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>-0-</u>	

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  
KAY ANN CHASE

Signature of Treasurer  
Kay Ann Chase

Date  
1/06/98

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

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FEC FORM 3X  
(revised 9/88)

# DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
<u>1st Congressional District Democratic Committee</u>	FROM <u>07-01-97</u>	TO <u>12-31-97</u>
Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
<b>Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	30.00	30.00
ii. Unitemized	134.00	134.00
iii. Total (add i and ii) >	164.00	164.00
b. Political Party Committees	120.00	120.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contributions (add a ii, b and c) >	284.00	284.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	284.00	284.00
20. Total Federal Receipts (subtract line 18 from line 19) >	284.00	284.00
<b>Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0.00	0.00
ii. Non-Federal Share	0.00	0.00
b. Other Federal Operating Expenditures <u>BANK CHARGES</u>	13.22	29.16
c. Total Operating Expenditures (add a i, a ii, and b) >	13.22	29.16
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	200.00	200.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
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 a, b and c) >	629.50	914.90
29. Other Disbursements	842.62	1263.56
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	842.62	1263.56
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		
<b>Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans)(from line 11d)	284.00	284.00
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	284.00	284.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	13.22	29.16
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures (subtract line 36 from 35) >	13.22	29.16

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER 23

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)

1st Congressional District Democratic Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Date (month, day, year)	Date (month, day, year)	Amount of Each Disbursement This Period
<p><u>STUPAK FOR Congress</u> <u>P.O. Box 143</u> <u>Menominee MI 49858</u></p>	<p><u>GOVT FUNDS</u> <u>1ST CONGRESSIONAL DISTRICT</u> <u>REPRESENTATIVE</u></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>FUNDRAISING</u></p>	<p><u>9/18/97</u></p>	<p><u>200.00</u></p>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

200.00

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

15<sup>th</sup> Congressional District Democratic Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<p><u>CARROLL VOIP</u> <u>P.O. Box 63</u> <u>10943 Platte St</u> <u>Itasca, MI 48450</u></p>	<p><u>Postage &amp; EXPENSES</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>STATE CENTER</u></p>	<p><u>01/31/97</u></p>	<p><u>174.00</u></p>
<p>B. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>C. Full Name, Mailing Address and ZIP Code <u>Chip-In - Casino/Motel</u> <u>P.O. Box 35-1-W 399 Hwy 24</u> <u>Harris, MI 48845-0351</u></p>	<p><u>BREAKFAST EXP.</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>STATE CENTER</u></p>	<p><u>01/15/99</u></p>	<p><u>455.40</u></p>
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>H. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>I. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>

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

629.40

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

829.40

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER 11.00

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NAME OF COMMITTEE (In Full)

1st Congressional District Democratic Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Clinton County Democratic Comm</u> <u>15378 Vaekleish Dr</u> <u>hansons mi 48906</u>		<u>8/21/95</u>	<u>120.00</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>off Jack Dinkov (S.P)</u>	Occupation	Aggregate Year-to-Date > \$ <u>120.00</u>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) .....	<u>120.00</u>
TOTAL This Period (last page this line number only) .....	<u>150.00</u>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2  
FOR LINE NUMBER 11.3

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NAME OF COMMITTEE (In Full)

1ST CONGRESSIONAL DISTRICT DEMOCRATIC COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DON COOPER 621 S. MAGAZINE ST SOUTH STE MARIE MI 49783 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): TRUGS	Self Employed Occupation: CPA Aggregate Year-to-Date \$ 30.00	8-25/95	30.00
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

