

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2008 DEC -5 A 11: 04

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
 C00280941 102700 P
 BARBARA JOHNSON
 11TH DISTRICT DEMOCRATIC COMM
 ITTEE
 18104 VACR1
 LIVONIA MI 48152

2. FEC IDENTIFICATION NUMBER

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

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 Nov. 7 in the State of Michigan

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10-19-00</u> through <u>11-27-00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ <u>57290.37</u>
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>44988.78</u>	
(c) Total Receipts (from Line 13)	\$ <u>2000.00</u>	\$ <u>14000.00</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>46988.78</u>	\$ <u>71290.37</u>
7. Total Disbursements (from Line 30)	\$ <u>2731.61</u>	\$ <u>27033.20</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>44257.17</u>	\$ <u>44257.17</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 202-694-1100
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

Barbara F. Johnson

Signature of Treasurer

Barbara F. Johnson

Date

11/29/00

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

FEC FORM 3X

(revised 8/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE <i>11th District Democratic Comm. C00080941</i>		REPORT COVERING PERIOD FROM: <i>10-19-00</i> TO: <i>11-27-00</i>	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
I. Itemized (use Schedule A)	<i>2000.00</i>	<i>2000.00</i>	11(a)(i)
II. Unitemized	<i>0</i>	<i>0</i>	11(a)(ii)
III. Total (add I and II) >	<i>0</i>	<i>0</i>	11(b)
b. Political Party Committees	<i>0</i>	<i>0</i>	11(c)
c. Other Political Committees (such as PACs)	<i>0</i>	<i>0</i>	11(d)
d. Total Contributions (add a ii, b and c) >	<i>2000.00</i>	<i>2000.00</i>	12
12. Transfers From Affiliated/Other Party Committees	<i>0</i>	<i>1000.00</i>	13
13. All Loans Received	<i>0</i>	<i>0</i>	14
14. Loan Repayments Received	<i>0</i>	<i>0</i>	15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	<i>0</i>	<i>0</i>	16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	<i>0</i>	<i>0</i>	17
17. Other Federal Receipts (Dividends, Interest, etc.)	<i>0</i>	<i>0</i>	18
18. Transfers from Nonfederal Account for Joint Activity	<i>0</i>	<i>0</i>	19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	<i>2000.00</i>	<i>14000.00</i>	20
20. Total Federal Receipts (subtract line 18 from line 19) >	<i>2000.00</i>	<i>14000.00</i>	
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
I. Federal Share	<i>0</i>	<i>0</i>	21(a)(i)
II. Non-Federal Share	<i>0</i>	<i>0</i>	21(a)(ii)
b. Other Federal Operating Expenditures	<i>2731.61</i>	<i>6438.20</i>	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	<i>2731.61</i>	<i>6438.20</i>	21(c)
22. Transfers to Affiliated/Other Party Committees	<i>0</i>	<i>12595.00</i>	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	<i>0</i>	<i>8000.00</i>	23
24. Independent Expenditures (use Schedule E)	<i>0</i>	<i>0</i>	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(f)) (use Schedule F)	<i>0</i>	<i>0</i>	25
26. Loan Repayments Made	<i>0</i>	<i>0</i>	26
27. Loans Made	<i>0</i>	<i>0</i>	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	<i>0</i>	<i>0</i>	28(a)
b. Political Party Committees	<i>0</i>	<i>0</i>	28(b)
c. Other Political Committees (such as PACs)	<i>0</i>	<i>0</i>	28(c)
d. Total Contribution Refunds (add a, b and c) >	<i>0</i>	<i>0</i>	28(d)
29. Other Disbursements	<i>0</i>	<i>0</i>	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	<i>2731.61</i>	<i>27033.20</i>	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	<i>2731.61</i>	<i>27033.20</i>	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	<i>2000.00</i>	<i>2000.00</i>	32
33. Total Contribution Refunds (from line 28d)	<i>0</i>	<i>0</i>	33
34. Net Contributions (other than loans) (subtract line 33 from line 32)	<i>2000.00</i>	<i>2000.00</i>	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	<i>2731.61</i>	<i>6438.20</i>	35
36. Offsets to Operating Expenditures (from line 15)	<i>0</i>	<i>0</i>	36
37. Net Operating Expenditures (subtract line 36 from line 35) >	<i>2731.61</i>	<i>6438.20</i>	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11a.

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. C00230941

A. Full Name, Mailing Address and ZIP Code Avram R. Zelt 116 Marlin Drive Ocean Ridge, Florida 33435 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation <u>Retired</u> Aggregate Year-to-Date <u>> \$ 2000.00</u>	Date (month, day, year) <u>11/7/2000</u>	Amount of Each Receipt this Period <u>2000.00</u>
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 <u>> \$</u>	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 <u>> \$</u>	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 <u>> \$</u>	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 <u>> \$</u>	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 <u>> \$</u>	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 <u>> \$</u>	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 216

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 Dem. Comm. Coo280941

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster / Livonia Mall 29624 W. Seven Mile Liv., MI. 48152	Postage / FEE Report Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/00	6.53
B. Full Name, Mailing Address and ZIP Code Staples 29499 Orchard Lake Rd. Farm. Hills, MI. 48334	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Mailing to members</u>	10/31/00	125.68
C. Full Name, Mailing Address and ZIP Code Big Daddy's Parthenon 6799 Orchard Lake Rd. W. Bloomfield, MI. 48322	Purpose of Disbursement Refreshments for members and election day eve Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/7/2000	2600.00
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)

2731.61

TOTAL This Period (last page this line number only)

2731.61

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 type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 11-29-00
<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>SK1</i> PREPARER	12-5-00 DATE PREPARED