REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Oct 23 9 56 AM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
BROOKE HOLDINGS, INC. Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
5901 Executive Drive

CITY, STATE and ZIP CODE
Lansing, Michigan 48911

2. FEC IDENTIFICATION NUMBER
C00254953

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

☒ Twelfth day report preceding General (Type of Election) election on 11/5/96 in the State of MT

☐ Thirtieth day 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 10-01-96 through 10-16-96		
6. (a) Cash on Hand January 1, 19 96		$ 12,898.37
(b) Cash on Hand at Beginning of Reporting Period	$ 12,450.65	
(c) Total Receipts (from Line 19)	$ 3,168.56	$ 21,470.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 15,619.21	$ 34,368.83
7. Total Disbursements (from Line 30)	$ 3,000.00	$ 21,749.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 12,619.21	$ 12,619.21
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-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Robert A. Fritts

Signature of Treasurer
Robert A. Fritts

Date
10-22-96

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 9/93)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: Brooke Holdings, Inc. Political Action Committee

REPORT COVERING PERIOD FROM 10-01-96 TO 10-16-96

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	2,645.78	12,605.13
ii. Unitemized	522.78	8,865.33
iii. Total (add i and ii) ➤	3,168.56	21,470.46
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	3,168.56	21,470.46
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	3,168.56	21,470.46
20. Total Federal Receipts (subtract line 18 from line 19) ➤	3,168.56	21,470.46
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	-0-	49.62
c. Total Operating Expenditures (add a i, a ii, and b) ➤		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,000.00	21,700.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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 a, b and c) ➤		
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	3,000.00	21,749.62
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	3,000.00	21,749.62
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	3,168.56	21,470.46
33. Total Contribution Refunds (from line 28d)	-0-	-0-
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,168.56	21,470.46
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	-0-	49.62
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-
37. Net Operating Expenditures (subtract line 36 from 35) ➤	-0-	49.62

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 5

FOR LINE NUMBER 11ai

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)

Brooke Holdings, Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Bruce Fisher 832 SW 295th Street Federal Way WA 98023 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date > $ 516.46	(a) % of monthly payroll	133.33
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Redrick 5175 Woodbridge Avenue Powell OH 43065 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date > $ 1,308.49	(a) % of monthly payroll	156.58
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Richard Sax 8266 E. Del Cadena Scottsdale AZ 85258 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date > $ 600.00	(a) one time monthly	-0-
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert Mogren 3101 W. 75th Street Prairie Village KS 66208 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date > $ 1,008.33	(a) % of monthly payroll	133.33
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James Pietrzak 3546 Florian Terrace Palm Harbor FA 34685 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date > $ 1,059.02	(a) % of monthly payroll	122.82
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Herbert May 20 Wamesit Road Newton MA 02168 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date > $ 800.00	(a) one time monthly	80.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Clifford Harris 6454 Central Avenue Indianapolis IN 46220 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date > $ 981.36	(a) % of monthly payroll	-0-

SUBTOTAL of Receipts This Page (optional) 626.06

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

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11ai

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NAME OF COMMITTEE (In Full)

Brooke Holdings, Inc. Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Joseph Sulzinger, 17515 River Hill Drive, Dallas TX 75287	Jackson National Life Insurance Company / Regional Manager	(a) % of monthly payroll	300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 1,388.14		
B. Jack Scardina, 15925 Burt Street, Omaha NE 68118	Jackson National Life Insurance Company / Regional Manager	(a) one time monthly	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 900.00		
C. Henry Nametz, 2305 Holly Oak Drive, Danville CA 94506	Jackson National Life Insurance Company / Regional Manager	(a) % of monthly payroll	110.45
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 846.46		
D. Alan Hahn, 16867 Thorngate Road, East Lansing MI 48823	Jackson National Life Insurance Company / Senior Vice President	(a) % of monthly payroll	61.54
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 584.63		
E. David LeRoux, One Lenfell Lane, Essex Falls NJ 07021	Jackson National Life Insurance Company / Senior Vice President	(a) % of monthly payroll	61.54
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 584.63		
F. John Knutson, 1422 W. Cutler Road, DeWitt MI 48820	Jackson National Life Insurance Company / Chief Operating Officer	(a) one time monthly	92.30
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 458.45		
G. Paul Pheffer, 261 Rampart Way #202, East Lansing MI 48823	Jackson National Life Insurance Company / Chief Financial Officer	(a) one time monthly	-0-
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 323.04		

SUBTOTAL of Receipts This Page (optional) 725.83

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11ai

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NAME OF COMMITTEE (In Full)

Brooke Holdings, Inc. Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Alan Cook 1365 Silkwood Okemos MI 48864 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Senior Vice President Aggregate Year-to-Date > $ 253.88	(a) one time monthly	-0-
B. Clark Manning 2003 Birch Bluff Drive Okemos MI 48864 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Senior Vice President Aggregate Year-to-Date > $ 511.48	(a) one time monthly	53.84
C. George Napoles 2356 Emerald Forest Circle East Lansing MI 48823 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Senior Vice President Aggregate Year-to-Date > $ 457.64	(a) % of monthly payroll	53.84
D. Thomas J. Meyer 2318 Cheltingham Drive Lansing MI 48917 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Vice President Aggregate Year-to-Date > $ 352.26	(a) % of monthly payroll	37.08
E. Paul Hamzey 2815 Sombrosa Carlsbad CA 92009 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Director Aggregate Year-to-Date > $ 356.89	(a) one time monthly	28.18
F. Jay Elliott 14624 Powderhorn Fort Wayne IN 46804 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Senior Vice President Aggregate Year-to-Date > $ 360.00	(a) one time monthly	40.00
G. Connie Dalton 6038 Oak Park Trail Haslett MI 48840 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Vice President Aggregate Year-to-Date > $ 304.56	(a) one time monthly	33.84

SUBTOTAL of Receipts This Page (optional) 246.78

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

Brooke Holdings, Inc. Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Brion Johnson 1783 Elk Lane Okemos MI 48864 Receipt For: Primary General Other (specify):	Jackson National Life Insurance Company Occupation: Vice President Aggregate Year-to-Date > $ 346.14	(a) % of monthly payroll	38.46
B. Robert Tucker 1475 Mercer Drive Okemos MI 48864 Receipt For: Primary General Other (specify):	Jackson National Life Insurance Company Occupation: Manager Aggregate Year-to-Date > $ 281.26	(a) one time monthly	30.00
C. William Gray 955 Audubon East Lansing MI 48823 Receipt For: Primary General Other (specify):	Jackson National Life Insurance Company Occupation: Senior Vice President Aggregate Year-to-Date > $ 295.23	(a) % of monthly payroll	56.92
D. Andre Michaud 1226 Hampton Drive Jackson MI 49203 Receipt For: Primary General Other (specify):	Jackson National Life Insurance Company Occupation: Ass't. Vice President Aggregate Year-to-Date > $ 276.84	(a) % of monthly payroll	30.76
E. Rhonda Grant 6830 Holmes Highway Eaton Rapids MI 48827 Receipt For: Primary General Other (specify):	Jackson National Life Insurance Company Occupation: Ass't. Vice President Aggregate Year-to-Date > $ 265.81	(a) % of monthly payroll	27.98
F. Jerry Decius 121 Rivergate Lane DeWitt MI 48820 Receipt For: Primary General Other (specify):	Jackson National Life Insurance Company Occupation: Vice President Aggregate Year-to-Date > $ 224.00	(a)	22.00
G. Greg Cicotte P O Box 160 Belleville MI 48112 Receipt For: Primary General Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date > $ 450.20		153.82

SUBTOTAL of Receipts This Page (optional) > 359.94

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Brooke Holdings, Inc. Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Al Cicotte 1000 Cir 75 Parkway #650 Atlanta, GA 31139 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date $ 217.52		83.33
B. Ron Wright 100 Welford Road Lutherville, Maryland 21093 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date $ 200.00		200.00
C. Mike Wells 124 Reef Mall Marina Del Ray, CA 90292 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Jackson National Life Insurance Company Occupation: Regional Manager Aggregate Year-to-Date $ 403.84		403.84
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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) 687.17

TOTAL This Period (last page this line number only) 2,645.78

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Brooke Holdings, Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Sherrod Brown 111 Edgefield Drive Elyria, OH 44035	Brown - Congress Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10-01-96	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Levin for Congress P.O. Box 1092 Warren, MI 48090	Levin - Congress Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10-01-96	150.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lazio for Congress P.O. Box 5063 Bay Shore, NY 11706	Lazio - Congress Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10-10-96	250.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McCollum for Congress 1850 Lee Road Suite 326 Winter Park, FA 32789	McCullem - Congress Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10-10-96	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chrysler for Congress P.O. Box 1518 Brighton, MI 48116	Chrysler - Congress Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10-10-96	1,136.25
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Campbells Catering 4616 N. Grand River Lansing, MI 48906	Fundraiser - Chrysler Disbursement for: ☐ Primary ☐ General ☒ Other (specify) Chrysler Fundraiser	10-10-96	463.73
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	2,999.98
TOTAL This Period (last page this line number only)	

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.

☑	Hand Delivered	DATE OF RECEIPT 10-23-96
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

MN — PREPARER

10-23-96 — DATE PREPARED

FEC FORM 70-2 (12/92)