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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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**

C00024455 **030602** **N 2B7**

KAY ANN CHASE

FIRST CONGRESSIONAL DISTRICT D

DEMOCRATIC COMMITTEE

12492 PINERIDGE

CHARLEVOIX **MI 49720**

ADDRESS (number and street)

Check if different than previously reported. (AOC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00024455

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Report:

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) 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) 1/2-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on **11** / **03** / **2002** in the State of **MI**

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

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

Election on _____ in the State of _____

5. Covering Period **01** / **01** / **2002** through **10** / **14** / **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 **KAY ANN CHASE**

Signature of Treasurer *Kay Chase* Date **01** / **17** / **2003**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

FIRST CONGRESSIONAL DISTRICT DEMOCRATIC COMMITTEE

Report Covering the Period:

From:

10 / 01 / 2002

To:

10 / 10 / 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2002</u>		<u>465030</u>
(b) Cash on Hand at Beginning of Reporting Period	<u>59653</u>	
(c) Total Receipts (from Line 12)	<u>311000</u>	<u>353643</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>370653</u>	<u>818673</u>
7. Total Disbursements (from Line 30)	<u>346075</u>	<u>794095</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>24578</u>	<u>24578</u>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		

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

SATISFIED CRITERIA PRIOR TO 06/2001

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

FED Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

FIRST CONGRESSIONAL DISTRICT DEMOCRATIC Committee

Report Covering the Period:

From:

10/01/2002

To:

10/07/2002

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)	9500	
(ii) Unitemized	26500	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	36000	71000
(b) Political Party Committees	10000	12643
(c) Other Political Committees (such as PACs)	265000	270000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 82, page 4)	311000	353643
12. Transfers From Affiliates/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 Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	311000	353643
20. Total Federal Receipts (subtract Line 16 from Line 19)	311000	353643

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (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	26,500.00	61,000.00
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 Lines 28(a), (b), and (c))	810.75	1,840.95
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	3460.75	7,140.95
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)	3460.75	7,140.95
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	3,110.00	3,536.43
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(a)(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 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 OF	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16		

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)
First Congressional District Dem. Committee

A. Full Name (Last, First, Middle Initial)
Friends of Carl Levin

Mailing Address
P.O. Box 02089

City
WARREN

State
MI

Zip Code
48092

FEC ID number of contributing federal political committee.
C

Name of Employer
Occupation

Receipt For:
 Primary General
 Other (specify) DONATION

Aggregate Year-to-Date
100.00

Date of Receipt
7/09/2002

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Troopers PAC

Mailing Address
1715 Abby Rd Ste 8

City
E. LANSING

State
MI

Zip Code
48823

FEC ID number of contributing federal political committee.
C

Name of Employer
Occupation

Receipt For:
 Primary General
 Other (specify) DONATION

Aggregate Year-to-Date
2650.00

Date of Receipt
7/09/2002

Amount of Each Receipt this Period
2650.00

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) 2750.00

TOTAL This Period (last page this line number only) 2845.00

2002 Schedule A (FEC Form 3X) (Revised 1/01)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

23037940488
Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE OF
(check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (in Full)
First Congressional District Dem. Committee

Full Name (Last, First, Middle Initial)
A. **THOMAS, Deborah**
Mailing Address
14530 Harbor Island Dr.
City **Detroit** State **Mi** Zip Code **48215**
FEC ID number of contributing federal political committee: **C**
Name of Employer: _____ Occupation: _____
Receipt For:
 Primary General
 Other (specify) **Dues**
Aggregate Year-to-Date **20.00**

Date of Receipt
10 09 2002
Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. **McCarthy, Keanna**
Mailing Address
401 W. Division
City **Boysen City** State **Mi** Zip Code **49712**
FEC ID number of contributing federal political committee: **C**
Name of Employer: _____ Occupation: _____
Receipt For:
 Primary General
 Other (specify) **Donation**
Aggregate Year-to-Date **25.00**

Date of Receipt
10 09 2002
Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. **Quacchio, Nancy**
Mailing Address
18131 Magnolia
City **Southfield** State **Mi** Zip Code **48075**
FEC ID number of contributing federal political committee: **C**
Name of Employer: _____ Occupation: _____
Receipt For:
 Primary General
 Other (specify) _____
Aggregate Year-to-Date **50.00**

Date of Receipt
10 09 2002
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) **95.00**
TOTAL This Period (last page this line number only)

2002-10-09 10:09:00 AM

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 OF

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

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NAME OF COMMITTEE (in Full)

First Congressional District Dem. Committee

Full Name (Last, First, Middle Initial)

A Friends of Mike Pousi

Date of Disbursement

10/10/2002

Mailing Address

27 N. Basin Dr

City

Negaunee

State

MI

Zip Code

49866

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

011

Amount of Each Disbursement This Period

100.00

Candidate Name

MIKE POUSI

Category Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) v

State: MI

District:

Full Name (Last, First, Middle Initial)

B. Committee to Elect Jennifer Elkins

Date of Disbursement

10/10/2002

Mailing Address

P O Box 454

City

LAKE

State

MI

Zip Code

49632

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

011

Amount of Each Disbursement This Period

100.00

Candidate Name

JENNIFER ELKINS

Category Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) v

State: MI

District:

Full Name (Last, First, Middle Initial)

C. STUPAK for Congress

Date of Disbursement

10/10/2002

Mailing Address

P O Box 143

City

Menominee

State

MI

Zip Code

49853

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

011

Amount of Each Disbursement This Period

2650.00

Candidate Name

BAFF STUPAK

Category Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) v

State: MI

District: 1

SUBTOTAL of Disbursements This Page (optional)

2850.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

FOR LINE NUMBER: (check only one)		PAGE		OF	
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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

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NAME OF COMMITTEE (In Full)
First Congressional District Dem. Committee

A. **LAURIE STUPAK For State Rep**
 Mailing Address: **PO Box 873**
 City: **Menominee** State: **MI** Zip Code: **49858**
 Purpose of Disbursement: **CAMPAIGN CONTRIBUTION** Category/Type: **Q111**
 Candidate Name: **LAURIE STUPAK**
 Office Sought: **State Rep** Disbursement For: Primary General
 State: **MI** District: _____

Date of Disbursement: **11/01/2002**
 Amount of Each Disbursement this Period: **250.00**

B. **Andy Neumann For State Senate**
 Mailing Address: **Rm 13 356 106 Thunderbay Center**
 City: **Alpena** State: **MI** Zip Code: **49707**
 Purpose of Disbursement: **CAMPAIGN CONTRIBUTION** Category/Type: **Q111**
 Candidate Name: **Andy Neumann**
 Office Sought: House Senate President Disbursement For: Primary General
 State: **MI** District: _____

Date of Disbursement: **11/01/2002**
 Amount of Each Disbursement this Period: **250.00**

C. **SUPPORTERS OF GARY McDowell**
 Mailing Address: **PO Box 303**
 City: **Rudyard** State: **MI** Zip Code: **49780**
 Purpose of Disbursement: **CAMPAIGN CONTRIBUTION** Category/Type: **Q111**
 Candidate Name: **GARY McDowell**
 Office Sought: **State Rep** Disbursement For: Primary General
 State: **MI** District: _____

Date of Disbursement: **11/01/2002**
 Amount of Each Disbursement this Period: **100.00**

SUBTOTAL of Disbursements This Page (optional) **600.00**

TOTAL This Period (last page this line number only)

Tabular Summary Page

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

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NAME OF COMMITTEE (In Full)

FIRST CONGRESSIONAL DISTRICT DEMOCRATIC COMMITTEE

Full Name (Last, First, Middle Initial)

A. PARK-SHIP EXPRESS

Mailing Address

1-75 BUS SPUR

City

SAINT STE MARIE

State

MI

Zip Code

49783

Purpose of Disbursement

REPORT MAKING

Candidate Name

601
Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) REPORT

State:

District:

Date of Disbursement

11/17/75 200.00

Amount of Each Disbursement This Period

10.75

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

Amount of Each Disbursement This Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

10.75

3960.75

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 1-21-03
<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>He!</i>	1-23-03
PREPARER	DATE PREPARED