

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER

JUL -9 P 4 30

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: if typing, type over the lines.

12FE4M5

Fannie Lou Hamer Political Action Committee

ADDRESS (number and street)

19600 W. Henriehols

Check if different than previously reported. (AGC)

Detroit

MI

48219

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 00294918

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)

(a) 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)

Convention (12C)

General (12G)

Special (12S)

Runoff (12R)

Election on

MM / DD / YYYY

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

01 / 01 / 2003

through

03 / 31 / 2003

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

Edwin K. Washington

Signature of Treasurer

E. K. Washington

Date

07 / 02 / 2004

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

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 08/2003)

Write or Type Committee Name

Fannie Lou Hamer Political Action Committee

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. (a) Cash on Hand January 1. <input type="text" value="2003"/>		<input type="text" value="19525.61"/>
(b) Cash on Hand at Beginning of Reporting Period	<input type="text" value="19525.61"/>	
(c) Total Receipts (from Line 15)	<input type="text" value="478.93"/>	<input type="text" value="478.93"/>
(d) Subtotal (add Lines 5(b) and 5(c) for Column A and Lines 5(a) and 5(c) for Column B)	<input type="text" value="20003.64"/>	<input type="text" value="20003.64"/>
7. Total Disbursements (from Line 8)	<input type="text" value="92144.49"/>	<input type="text" value="92144.49"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 5(d))	<input type="text" value="10789.15"/>	<input type="text" value="10789.15"/>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	<input type="text" value="1000.00"/>	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 11A)

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 (Rev. 02/2003)

Write or Type Committee Name

Fannie Lou Hamer Political Action Committee

Report Covering the Period: From: **01 01 2003** To: **03 31 2003**

1. 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	325.00	
(i) Itemized (use Schedule A)	0	
(ii) Unitemized	0	
(b) TOTAL (add Lines 11(a)(i) and (ii))	325.00	325.00
(c) Political Party Committees	153.03	153.03
(d) Other Political Committees (such as PACs)	0	0
(e) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 6)	478.03	478.03
12. Transfers from Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))	0	0
19. Total Receipts (add Lines 11(e), 12, 13, 14, 15, 16, 17, and 18(c))	478.03	478.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	478.03	478.03

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 07/2013)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)	0	0
(i) Federal Share		
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	8389.49	8389.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8389.49	8389.49
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441b(7)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	825.00	825.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) "Levy" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	9214.49	9214.49
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(i) from Line 31)	9214.49	9214.49

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
35. Total Contributions (other than loans) (from Line 11(d), page 3)	478.03	478.03
34. Total Contribution Refunds (from Line 20(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 35)	478.03	478.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8389.49	8389.49
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8389.49	8389.49

**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 1 OF 3	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
Fannie Lou Hamer Political Action Committee

Full Name (Last, First, Middle Initial)
A. Monica Davis

Mailing Address
15710 Ashton

City State Zip Code
Detroit, Michigan 48223

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
02 12 2003

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Felicia Love

Mailing Address
6106 Plainview

City State Zip Code
Detroit, Michigan 48228

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
02 12 2003

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Marvel K. Cheeks

Mailing Address
16729 Trinity

City State Zip Code
Detroit, Michigan 48219

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
03 13 2003

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) **225.00**

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 2 OF 3
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (in full)
Fannie Lou Hamer Political Action Committee

Full Name (Last, First, Middle Initial)
A. Mary Cocanaugher

Mailing Address
14419 Coyle
City State Zip Code
Detroit, Michigan 48227

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date
25.00

Date of Receipt
03 / 13 / 2003

Amount of Each Receipt This Period
25.00

Full Name (Last, First, Middle Initial)
B. Marsha Lewis

Mailing Address
12821 St. Marys
City State Zip Code
Detroit, Michigan 48227

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date
25.00

Date of Receipt
03 / 13 / 2003

Amount of Each Receipt This Period
25.00

Full Name (Last, First, Middle Initial)
C. Dolores Blackmon-Bradley

Mailing Address
18653 Mendota
City State Zip Code
Detroit, Michigan 48221

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date
25.00

Date of Receipt
03 / 26 / 2003

Amount of Each Receipt This Period
25.00

SUBTOTAL of Receipts This Page (optional) _____

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

75.00

**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 3 OF 3	
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (in full)
Fannie Lou Hamer Political Action Committee

A. Full Name (Last, First, Middle Initial)
Loreno Holloway

Mailing Address
15480 Piedmont

City **Detroit, Michigan** **State** **Zip Code** **48223**

FEC ID number of contributing federal political committee. **C**

Name of Employer: _____ **Occupation:** _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
03 / 26 / 2003

Amount of Each Receipt this Period
25.00

B. 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

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) ▶ _____

TOTAL This Period (just page this line number only) ▶ _____

25.00

325.00

**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 1 OF 1

<input type="checkbox"/> 11a 13	<input checked="" type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 11d 16	<input type="checkbox"/> 17
------------------------------------	-----------------------------------------------	------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (in full)

Fannie Lou Hamer Political Action Committee

Full Name (Last, First, Middle Initial)

A. **MCHR**

Mailing Address

1654 Webb

City State Zip Code

Detroit, Michigan 48206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

02 / 12 / 2003

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. **MCHR**

Mailing Address

1651 Webb

City State Zip Code

Detroit, Michigan 48206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

153.03

Date of Receipt

03 / 26 / 2003

Amount of Each Receipt this Period

33.03

Full Name (Last, First, Middle Initial)

C.

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)

TOTAL This Period (last page this line number only)

153.03
153.03

SCHEDULE C (FEC Form 3X)

LOANS

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

PAGE 1 OF 1
FOR LINE 19 OF FORM 3X

NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

LOAN SOURCE Full Name (Last, First, Middle Initial)
Frankie James

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
5365 W. Outer Drive, Detroit, MI 48235

City State ZIP Code

Original Amount of Loan **5000.00**

Cumulative Payment To Date **4000.00**

Balance Outstanding at Close of This Period **1000.00**

TERMS

Date Incurred **10 / 01 / 1997**

Date Due

Interest Rate **% (APR)**

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 1000.00
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 1000.00
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 1000.00
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 1000.00

SUBTOTALS This Period This Page (optional) **1000.00**

TOTALS This Period (last page is this line only) **1000.00**

Carry outstanding balances only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

Use separate schedule(s) for each category of line Detailed Summary Page	FOR LINE NUMBER (check only one)							
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30a	<input type="checkbox"/> 30b	

PAGE OF

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NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

A.

Full Name (Last, First, Middle Initial) **AT&T**

Date of Disbursement: **01 / 04 / 2003**

Mailing Address: **P.O. Box 9001310**

City: **Louisville, KY** State: Zip Code: **40290-1310**

Purpose of Disbursement: **OE** Category Type

Amount of Each Disbursement this Period: **49.49**

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **District**

B.

Full Name (Last, First, Middle Initial) **L. Advance Services & Inv.**

Date of Disbursement: **01 / 04 / 2003**

Mailing Address: **P.O. Box 27785**

City: **Detroit, MI** State: Zip Code: **48227**

Purpose of Disbursement: **OE** Category Type

Amount of Each Disbursement this Period: **3750.00**

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **District**

C.

Full Name (Last, First, Middle Initial) **SBC/Ameritech**

Date of Disbursement: **01 / 04 / 2003**

Mailing Address: **Bill Payment Center**

City: **Saginaw, MI** State: Zip Code: **48663-0003**

Purpose of Disbursement: **OE** Category Type

Amount of Each Disbursement this Period: **330.74**

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **District**

SUBTOTAL of Disbursements This Page (optional) **2130.23**

TOTAL This Period (last page this line number only)

**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
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25		
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30a	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (in Full)
Fannie Lou Hamer PAC

Full Name (Last, First, Middle Initial) A. Edwin Washington		Date of Disbursement 01 / 04 / 2003
Mailing Address 15717 Rosemont		Amount of Each Disbursement this Period 350.00
City Detroit, MI	State Zip Code 48223-1329	
Purpose of Disbursement Gubernatorial Prayer Breakfast reimburse		Candidate Name
Category/Type JP		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) B. State of Michigan		Date of Disbursement 01 / 06 / 2003
Mailing Address P.O. Box 20126		Amount of Each Disbursement this Period 525.00
City Lansing, MI	State Zip Code 48901-0726	
Purpose of Disbursement Late Fee		Candidate Name
Category/Type OE		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) C. PR Newswire		Date of Disbursement 01 / 25 / 2003
Mailing Address		Amount of Each Disbursement this Period 175.00
City	State Zip Code	
Purpose of Disbursement Clinton Rally announcement		Candidate Name
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District		

BUBTOTAL of Disbursements This Page (optional)	1050.00
TOTAL This Period (last page this line number only)	

**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

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of raising contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (in Full)
Fannie Lou Hamer PAC

Full Name (Last, First, Middle Initial)

A. Mays Printing

Mailing Address

Livernois

City State Zip Code

Detroit, MI 48221

Purpose of Disbursement

Slates

Candidate Name

PA
Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

02 / 09 / 2003

Amount of Each Disbursement this Period

1100.00

Full Name (Last, First, Middle Initial)

B. Mays Printing

Mailing Address

Livernois

City State Zip Code

Detroit, MI 48221

Purpose of Disbursement

Slates

Candidate Name

PA
Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

02 / 12 / 2003

Amount of Each Disbursement this Period

690.00

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address

P.O. Box 9001310

City State Zip Code

Louisville, KY 40290-13109

Purpose of Disbursement

Long Distance

Candidate Name

QE
Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

02 / 15 / 2003

Amount of Each Disbursement this Period

20.15

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1810.15

**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

<input checked="" 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"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29	<input type="checkbox"/> 30	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Fannie Lou Hamer PAC

Full Name (Last, First, Middle Initial)
A. SBC/Ameritech

Date of Disbursement
02 / 16 / 2003

Mailing Address
Bill Payment Ctr.

City State Zip Code
Saginaw, MI 48663-0003

Purpose of Disbursement
Telephone

Candidate Name

Category/Type
OE

Amount of Each Disbursement this Period
118.60

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: District:

Full Name (Last, First, Middle Initial)
B. Office Depot

Date of Disbursement
02 / 20 / 2003

Mailing Address

City State Zip Code
Detroit, MI

Purpose of Disbursement
Chair

Candidate Name

Category/Type
OE

Amount of Each Disbursement this Period
83.77

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: District:

Full Name (Last, First, Middle Initial)
C. First Independence Bank

Date of Disbursement
02 / 28 / 2003

Mailing Address
44 Michigan Ave.

City State Zip Code
Detroit, MI 48226

Purpose of Disbursement
Service Charge

Candidate Name

Category/Type
OE

Amount of Each Disbursement this Period
3.08

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: District:

SUBTOTAL of Disbursements This Page (optional) **210.45**

TOTAL This Period (last page this line number only)

**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)

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

Other Disbursements

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NAME OF COMMITTEE (in Full)

Fannie Lou Hamer PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

Metro Foodlands

03 / 28 / 2003

Mailing Address

Grand River

City State Zip Code

Detroit, MI 48223

Purpose of Disbursement

Polli worker lunches

Candidate Name

FE
Category/
Type

Amount of Each Disbursement this Period

72.10

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

Well Bread

03 / 18 / 2003

Mailing Address

2100 Woodward

City State Zip Code

Detroit, MI 48201

Purpose of Disbursement

Deposit for fundraiser

Candidate Name

FE
Category/
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Marvel K. Cheeks

03 / 25 / 2003

Mailing Address

16729 Trinity

City State Zip Code

Detroit, MI 48219

Purpose of Disbursement

Returned Check

Candidate Name

RK
Category/
Type

Amount of Each Disbursement this Period

100.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1172.10

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

Use separate schedule(s) for each category of the Detailed Expenditure Page		FOR LINE NUMBER: (check only one)		PAGE		OF	
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30a	<input type="checkbox"/> 30b	<input type="checkbox"/> 30c

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NAME OF COMMITTEE (in Full)
Fannie Lou Hamer PAC

A.

Full Name (Last, First, Middle Initial) _____

Date of Disbursement:

Mailing Address: **First Independence Bank**

44 Michigan Ave. State _____ Zip Code _____

City: **Detroit, MI 48226**

Purpose of Disbursement: **Service Charge** Category/Type: **BK**

Candidate Name: _____

Amount of Each Disbursement this Period: **16.56**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

B.

Full Name (Last, First, Middle Initial) _____

Date of Disbursement:

Mailing Address: _____

State _____ Zip Code _____

City: _____

Purpose of Disbursement: _____ Category/Type: _____

Candidate Name: _____

Amount of Each Disbursement this Period: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

C.

Full Name (Last, First, Middle Initial) _____

Date of Disbursement:

Mailing Address: _____

State _____ Zip Code _____

City: _____

Purpose of Disbursement: _____ Category/Type: _____

Candidate Name: _____

Amount of Each Disbursement this Period: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

SUBTOTAL of Disbursements This Page (optional) **16.56**

TOTAL This Period (last page this line number only) **8389.49**

**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 01 OF 01

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 27 28a 28b 29c 29 30b

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NAME OF COMMITTEE (In Full)

Fannie Lou Hamer PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

02 / 20 / 2003

A.

Committee to Elect J. Watson

Mailing Address

City State Zip Code

Purpose of Disbursement
Non-Federal Contribution

Category/Type

Amount of Each Disbursement This Period

500.00

Candidate Name

J. Watson

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

03 / 02 / 2003

B.

Carter

Mailing Address
17560 Stahelin

City State Zip Code

Purpose of Disbursement
Non-Federal Contribution

Category/Type

Amount of Each Disbursement This Period

125.00

Candidate Name

J. Watson

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

03 / 04 / 2003

C.

BAMN

Mailing Address

City State Zip Code

Purpose of Disbursement
Non-Federal Contribution

Category/Type

Amount of Each Disbursement This Period

200.00

Candidate Name

J. Watson

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District:

SUBTOTAL of Disbursements This Page (optional)

825.00

TOTAL This Period (last page this line number only)

825.00

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 1 OF 1
FOR LINE 15 OF FORM 3X

NAME OF COMMITTEE (in Full)
Fannie Lou Hamer PAC

LOAN SOURCE Full Name (Last, First, Middle Initial)
Frankie James

Electron:
 Primary
 General
 Other (specify) _____

Mailing Address
5365 W. Outer Drive, Detroit, MI 48235

City State ZIP Code

Original Amount of Loan: 5000.00
Cumulative Payment To Date: 4000.00
Balance Outstanding at Close of This Period: 1000.00

TERMS

Date Incurred: 10/01/1997
Date Due: _____
Interest Rate: _____ % (APR)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____

SUBTOTALS This Period This Page (optional) → 1000.00

TOTALS This Period (last page in this line only) → 1000.00

Carry outstanding balance only to LINE 2, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

ga
PREPARER
(5/2004)

7/9/04
DATE PREPARED