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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

WTH DISTRICT Democratic Committee

ADDRESS (number and street)

18104 VACRI Lane

Check if different than previously reported. (AO)

Livonia

MI

48152

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00880941

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(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)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

____/____/____

in the State of

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

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

Election on

____/____/____

in the State of

5. Covering Period

7/01/01

through

12/31/01

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 E. Johnson

Signature of Treasurer

Barbara E. Johnson

Date

7/15/02

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

Office Use Only

FEC FORM 3X
(Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

11th District Democratic Comm.

Report Covering the Period:

From:

9 01 01

To:

12 31 01

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 01		43024.61
(b) Cash on Hand at Beginning of Reporting Period	538,848.3	
(c) Total Receipts (from Line 19)	18,000.00	39,500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	718,848.3	825,246.1
7. Total Disbursements (from Line 30)	603,840	1,667,878
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	658,458.3	658,458.3
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	00	

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

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 (Revised 1/01)

Page 3

Write or Type Committee Name

11th District Democratic Comm. C00280941

Report Covering the Period:

From:

7/01 01

To:

7/31 01

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)	00	
(ii) Unitemized	00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	00	00
(b) Political Party Committees	00	00
(c) Other Political Committees (such as PACs)	00	00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)	00	00
12. Transfers From Affiliated/Other Party Committees	18,000.00	39,500.00
13. All Loans Received	00	00
14. Loan Repayments Received	00	00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	00	00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	00	00
17. Other Federal Receipts (Dividends, Interest, etc.)	00	00
18. Transfers from Nonfederal Account for Joint Activity	00	00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	18,000.00	39,500.00
20. Total Federal Receipts (subtract Line 16 from Line 19)	18,000.00	39,500.00

**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	00	00	
(ii) Non-Federal Share	00	00	
(b) Other Federal Operating Expenditures	38 40	4328 78	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	38 40	4328 78	
22. Transfers to Affiliated/Other Party Committees	6,000 00	12,350 00	
23. Contributions to Federal Candidates/Committees and Other Political Committees	00	00	
24. Independent Expenditures (use Schedule E)	00	00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	00	00	
26. Loan Repayments Made	00	00	
27. Loans Made	00	00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	00	00	
(b) Political Party Committees	00	00	
(c) Other Political Committees (such as PACs)	00	00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	00	00	
29. Other Disbursements	00	00	
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	6,038 40	16,678 78	
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)	6,038 40	16,678 78	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from Line 11(d), page 3)	00	00	
33. Total Contribution Refunds (from Line 28(d))	00	00	
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	00	00	
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	38 40	4328 78	
36. Offsets to Operating Expenditures (from Line 15, page 3)	00	00	
37. Net Operating Expenditures (subtract Line 36 from Line 35)	38 40	4328 78	

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 checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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. Co0280941

A. Full Name (Last, First, Middle Initial)
11th District Dem Comm Sp. Bingo Lic. A03023

Date of Receipt
 8 / 18 / 01

Mailing Address
39271 Glencastle

City
Farm Hills, MI 48336

Amount of Each Receipt this Period
 4000.00

FEC ID number of contributing federal political committee.
 C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) *Transfer of bingo proceeds to general fund*

Aggregate Year-to-Date
 25500.00

B. Full Name (Last, First, Middle Initial)
11th District Dem Comm Sp. Bingo Lic. A03023

Date of Receipt
 7 / 9 / 01

Mailing Address
39271 Glencastle

City
Farm Hills, MI 48336

Amount of Each Receipt this Period
 500.00

FEC ID number of contributing federal political committee.
 C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) *Transfer of bingo proceeds to general fund*

Aggregate Year-to-Date
 30500.00

C. Full Name (Last, First, Middle Initial)
11th District Dem Comm Sp. Bingo Lic. A03023

Date of Receipt
 7 / 7 / 01

Mailing Address
39271 Glencastle

City
Farm Hills, MI 48336

Amount of Each Receipt this Period
 9000.00

FEC ID number of contributing federal political committee.
 C 39500.00

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) *Transfer of bingo proceeds to general fund.*

Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional) *18000.00*

TOTAL This Period (last page this line number only) *18000.00*

**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"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
11th District Democratic Comm. C00280941

A. Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address
Livonia Mall Livonia, MI. 48152-9998

City State Zip Code

Purpose of Disbursement
Postage / F.E.C. Report

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Mailing of F.E.C. Report**

State: District:

Date of Disbursement
9 20 01

Amount of Each Disbursement this Period
440

Category/Type
001

B. Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address
Livonia Mall, Livonia, MI. 48152-9998

City State Zip Code

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President

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

State: District:

Date of Disbursement
11 26 2001

Amount of Each Disbursement this Period
3400

Category/Type
001

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional) **3840**

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

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NAME OF COMMITTEE (In Full)
11th District Dem. Comm. C00280941

A

Full Name (Last, First, Middle Initial)
Executive Comm of the 11th District

Mailing Address
18104 Vaeri Lane

City **Kivonia** State **Mi.** Zip Code **48152**

Purpose of Disbursement
011
Category/Type

Candidate Name

Office Sought: House Senate President

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

State: District:

Date of Disbursement
9 19 01

Amount of Each Disbursement this Period
3000.00

B

Full Name (Last, First, Middle Initial)
Executive Comm of the 11th District

Mailing Address
18104 Vaeri Lane

City **Kivonia** State **Mi.** Zip Code **48152**

Purpose of Disbursement
011
Category/Type

Candidate Name

Office Sought: House Senate President

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

State: District:

Date of Disbursement
12 12 2001

Amount of Each Disbursement this Period
3000.00

C

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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) ▶

6,000.00

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR SHARED FEDERAL AND NON-FEDERAL ADMINISTRATIVE EXPENSES AND GENERIC VOTER DRIVE COSTS

NAME OF COMMITTEE (In Full)

11th District Dem Comm. C00280941

USE ONLY ONE SECTION

A. NATIONAL PARTY COMMITTEES

FIXED FEDERAL PERCENTAGE (Check the appropriate line and enter % in box to right) [] %

Presidential Year (65%)

All Other Years (60%)

B. HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

MINIMUM FEDERAL PERCENTAGE (65%) (If checked, enter 65% in box to right) [] %

OR

FUNDS EXPENDED:

- Estimated Direct Candidate Support - Federal [] %
- Estimated Direct Candidate Support - Non-Federal [] %

ADJUSTMENTS TO FUNDS EXPENDED:

Actual Direct Candidate Support - Federal [] %

Actual Direct Candidate Support - Non-Federal [] %

NOTE: Funds expended must be used if the Federal proportion is greater than 65% in any year.

C. SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:

- Estimated Direct Candidate Support - Federal [] %
- Estimated Direct Candidate Support - Non-Federal [] %

ADJUSTMENTS TO FUNDS EXPENDED:

Actual Direct Candidate Support - Federal [] %

Actual Direct Candidate Support - Non-Federal [] %

D. STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

Check all Offices appearing on the next General Election Ballot

- | | | |
|--|-------------------------------------|-----------------|
| 1. President | <input checked="" type="checkbox"/> | (1 Point) |
| 2. U.S. Senate | <input checked="" type="checkbox"/> | (1 Point) |
| 3. U.S. Congress | <input checked="" type="checkbox"/> | (1 Point) |
| 4. SUBTOTAL - Federal (ADD 1, 2, AND 3) | | |
| 5. Governor | <input type="checkbox"/> | (1 Point) |
| 6. Other Statewide Office(s) | <input checked="" type="checkbox"/> | (1 or 2 Points) |
| 7. State Senate | <input type="checkbox"/> | (1 Point) |
| 8. State Representative | <input checked="" type="checkbox"/> | (1 Point) |
| 9. Local Candidates | <input checked="" type="checkbox"/> | (1 or 2 Points) |
| 10. Extra Non-Federal Point | <input checked="" type="checkbox"/> | (1 Point) |
| 11. SUBTOTAL - Non-Federal (Add 5, 6, 7, 8, 9, and 10) | | |
| 12. TOTAL POINTS (Line 4 plus Line 11) | | |

NUMBER OF POINTS
1
1
1
3
2
1
2
1
6

33 %

FEDERAL ALLOCATION = Line 4 divided by Line 12

