

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
OCT 18 10 47 AM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
 0000000000 0000000000 p 248
 ROBIN CUSHING
 BRANCH COUNTY REPUBLICAN COMMITTEE
 200 LOW 127
 COLLATERAL WI 49006

2. FEC IDENTIFICATION NUMBER
 C-00000-972

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 _____ (Type of Election)
 election on _____ in the State of _____
- 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	7-1-94 through 9-30-94		
6. (a) Cash on Hand January 1, 1994			\$ 10,357.30
(b) Cash on Hand at Beginning of Reporting Period		\$ 14,217.30	
(c) Total Receipts (from Line 1B)		\$ 18,516.50	\$ 26,216.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 32,733.89	\$ 37,276.21
7. Total Disbursements (from Line 3D)		\$ 19,155.11	\$ 25,673.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 13,578.12	\$ 13,578.12
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 202-219-8420

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: ROBIN CUSHING

Signature of Treasurer: Robin Cushing Date: 9-30-94

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

94039511550

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

(revised 1/1/81)

NAME OF COMMITTEE		REPORT COVERING PERIOD FROM <u>7-1-92</u> TO <u>7-31-92</u>	
		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)	0	0
ii.	Unitemized	18485.50	26842.50
iii.	Total (add i and ii) >	18485.50	26842.50
b.	Political Party Committees	0	0
c.	Other Political Committees (such as PACs)	0	0
d.	Total Contributions (add a, iii, b and c) >	18485.50	26842.50
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.)	0	0
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17.	Other Federal Receipts (Dividends, Interest, etc.)	31.09	74.47
18.	Transfers from Nonfederal Account for Joint Activity	0	0
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	18516.59	26916.97
20.	Total Federal Receipts (subtract line 18 from line 19) >	18516.59	26916.97
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4):		
i.	Federal Share	0	0
ii.	Non-Federal Share	0	0
b.	Other Federal Operating Expenditures	12155.77	16698.15
c.	Total Operating Expenditures (add a, i, ii, and b) >	12155.77	16698.15
22.	Transfers to Affiliated/Other Party Committees	4000.00	4000.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	3000.00	3000.00
24.	Independent Expenditures (use Schedule E)	0	0
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (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 a, b and c) >	0	0
29.	Other Disbursements	0	0
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	19155.77	23698.15
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	19155.77	23698.15
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	18485.50	26842.50
33.	Total Contribution Refunds (from line 28d)	0	0
34.	Net Contributions (other than loans)(subtract line 33 from 32)	18485.50	26842.50
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	12155.77	16698.15
36.	Offsets to Operating Expenditures (from line 15)	0	0
37.	Net Operating Expenditures (subtract line 36 from 35) >	12155.77	16698.15

94037311531

11(b)(1)
11(b)(2)
11(a)(ii)
11(b)
11(c)
11(d)
12
13
14
15
16
17
18
19
20
21(a)(i)
21(a)(ii)
21(b)
21(c)
22
23
24
25
26
27
28(a)
28(b)
28(c)
28(d)
29
30
31
32
33
34
35
36
37

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE OF
FOR LINE NUMBER

22

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)

BRADY COUNTY REPUBLICAN COMMITTEE

9403931532

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
# 2201 E. FARMER STATE CENTER 5100 E. SPYGLASS SALEM, MO 64603	1992 AFFILIATION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	2-7-92	4000.00
B. 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
C. 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
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

BUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

4000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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)

BRANCH COUNTY REPUBLICAN COMMITTEE

9403931533

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>CHARLES W. BERTSIE P.O. Box 155 LAWSON, MI</i>	<i>CAMPAIGN CONTRIB</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>9-8-94</i>	<i>500.00</i>
<i>HOFFMAN FOR STATE SENATE P.O. Box 103 LAWSON, MI 49051</i>	<i>CAMPAIGN CONTRIB</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>9-9-94</i>	<i>500.00</i>
<i>NIEMI STATE FOR CONGRESS 209 E. WASHINGTON LAWSON, MI 49051</i>	<i>CAMPAIGN CONTRIB</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>9-9-94</i>	<i>1000.00</i>
<i>NIEMI FOR STATE REPRESENTATIVE LAWSON, MI 49051</i>	<i>CAMPAIGN CONTRIB</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>9-9-94</i>	<i>500.00</i>
<i>NIEMI FOR PROBATE JUDGE 3018 CANTON FIELD LAWSON, MI 49051</i>	<i>CAMPAIGN CONTRIB</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>9-9-94</i>	<i>500.00</i>
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)

3000.00

TOTAL This Period (last page this line number only)

2000.00

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

First Class Mail

POSTMARKED

10-14-94

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

MMR

PREPARER

10-18-94

DATE PREPARED

94039311554