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Image# 12951420555

## **FEC** FORM 3X

# **REPORT OF RECEIPTS AND DISBURSEMENTS**

TOTIM OX	or Other Than An Au	thorized Committee	Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, over the lines.	type 12FE4M5
Newaygo County Demo	ocratic Executive Co	ommittee	
ADDRESS (number and street)	P.O. Box 146		
Check if different			
than previously reported. (ACC)	Newaygo		MI 49337
2. FEC IDENTIFICATION NU	MBER ▼ C	TY 🛦	STATE ▲ ZIP CODE ▲
C C00452854		IS THIS REPORT X (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:		7 20 (M5) Aug 20 (M8) Nov 20 (M1 (Non-Election Year Only) 20 (M6) Sep 20 (M9) Dec 20 (M1 (Non-Election
(a) Quarterly Reports:	Ap	r 20 (M4) Jul	Year Only)  20 (M7) Oct 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (Q			
July 15 Quarterly Report (Q2	(c) 12-Day PRE-Election Report for the:	Primary (12P)  Convention (120)	General (12G) Runoff (12R)  Special (12S)
October 15 Quarterly Report (Q3	3)		
January 31 Year-End Report (YE	E) Elect	ion on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Election  Report for the:	General (30G)	Runoff (30R) Special (30S
Termination Report (TER)		ion on	in the State of
5. Covering Period 01	/ 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through	03 / 31 / 2012
I certify that I have examined this	s Report and to the best of	of my knowledge and beli	ef it is true, correct and complete.
Type or Print Name of Treasurer	Mrs. Susanmary Narvaez		
Signature of Treasurer Mrs. S	usanmary Narvaez	[Electronically Fi	led] Date 04 14 2012
NOTE: Submission of false, errone	ous, or incomplete informati	on may subject the person	signing this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE DF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name	_	
Newaygo County Democratic Exec	utive Committee	
Report Covering the Period: From: 0		03 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		17121.60
(b) Cash on Hand at  Beginning of Reporting Period	17121.60	
(c) Total Receipts (from Line 19)	0.00	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	17121.60	17121.60
7. Total Disbursements (from Line 31)	886.89	886.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	16234.71	16234.71
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multical	ndidate 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 (Rev. 06/2004)

Write or Type Committee Name

# Newaygo County Democratic Executive Committee

R	eport Covering the Period: From: 01	/ 01 / 2012 To:	03 31 2012
	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)	0.00	0.00
	(ii) Unitemized(iii) TOTAL (add	0.00	0.00
	Lines 11(a)(i) and (ii)▶	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
10	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)  Transfers From Affiliated/Other	0.00	0.00
12.	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
<b>.</b> -	to Federal Candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)  Transfers from Non-Federal and Levin Funds	0.00	0.00
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	0.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	0.00	0.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
1.	Operating Expenditures:  (a) Allocated Federal/Non-Federal  Activity (from Schedule H4)		outonaur rour to buto	
	(i) Federal Share	0.00	0.00	
	(ii) Non Fodoval Chara	0.00	0.00	
	(ii) Non-Federal Share(b) Other Federal Operating	0.00		
	Expenditures	886.89	886.89	
	(c) Total Operating Expenditures	886.89	886.89	
	(add 21(a)(i), (a)(ii), and (b))▶  Transfers to Affiliated/Other Party	000.09	000.09	
	Committees	0.00	0.00	
	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	
	Independent Expenditures	0.00	0.00	
	(use Schedule E) Coordinated Party Expenditures	0.00	0.00	
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	, , , 0.00	
	Loan Repayments Made	0.00	0.00	
	Loans MadeRefunds of Contributions To:	0.00	0.00	
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	(d) Total Contribution Refunds			
	(add Lines 28(a), (b), and (c))▶	0.00	0.00	
	Other Disbursements	0.00	0.00	
	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity			
	(from Schedule H6)			
	(i) Federal Share	0.00	0.00	
	(ii) "Levin" Share	0.00	0.00	
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
	Total Disbursements (add Lines 21(c), 22,			
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	886.89	886.89	
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	886.89	886.89	

#### **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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
1. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
i. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	886.89	886.89
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	886.89	886.89

### S ľ

SCHEDULE B (FEC Form 3X)		FOR LINE	FOR LINE NUMBER: PAGE 6 OF 6			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(CITCON OTT				
	Detailed Summary Page	X 21b		23 24 25 26		
		27		28b 28c 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)						
Newaygo County Democratic Exec	utive Committee					
Full Name (Last, First, Middle Initial)						
A-1 Bingo and supply			Date of Disbursement			
Mailing Address 827 Bridge N. W.			02	24 2012		
City	tate Zip Code		Transaction ID : SB21B.5160			
Grand Rapis	MI 49504		Transaction	JITID . 30210.3100		
Purpose of Disbursement June Texas Hold'em			Amount of E	Each Disbursement this Period		
Candidate Name		Category/ Type		400.00		
Office Sought: House Disburserr	nent For:	71		,		
	Primary General					
State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
B.			Date of Disl	bursement		
			M = M /	D D / Y Y Y Y		
Mailing Address						
City	State Zip Code					
Purpose of Disbursement						
			Amount of E	Each Disbursement this Period		
Candidate Name		Category/				
Office Sought: House Disbursem	pont For:	Type				
	Primary General					
	Other (specify) ▼					
State: District:	, in the second second					
Full Name (Last, First, Middle Initial)			Date of Disl			
C.						
Mailing Address			M = M /	D D / Y Y Y Y		
Mailing Address						
City	state Zip Code					
Purpose of Disbursement						
		L	Amount of E	Each Disbursement this Period		
Candidate Name		Category/ Type				
Office Sought: House Disburser				,		
	Primary General					
	Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)				400.00		
COSTOTAL OF DISDUISEMENTS THIS Page (Optional)						
TOTAL This Period (last page this line number only).		·····		400.00		