

# 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  
Marquette County Democratic Party

ADDRESS (number and street) P.O. Box 189  
 Check if different than previously reported. (ACC)  
Marquette MI 49855

2. **FEC IDENTIFICATION NUMBER** C00385393  
**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 Quarterly 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) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
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 01 01 2007 through 06 30 2007

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 Christopher J Wagner  
Signature of Treasurer Electronically Filed by Christopher J Wagner Date 07 31 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Marquette County Democratic Party

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		177.27
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	177.27									
(c) Total Receipts (from Line 19) .....	1998.28	1998.28								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2175.55	2175.55								
7. Total Disbursements (from Line 31) .....	1511.70	1511.70								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	663.85	663.85								
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 <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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**

Write or Type Committee Name  
Marquette County Democratic Party

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	0.00	0.00
(i) Itemized (use Schedule A) .....	25.00	25.00
(ii) Unitemized .....	25.00	25.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....	25.00	25.00
12. Transfers From Affiliated/Other Party Committees .....	700.00	700.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	686.33	686.33
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.95	0.95
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	586.00	586.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	586.00	586.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1998.28	1998.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1412.28	1412.28

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1491.70	1491.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	1491.70	1491.70
22. Transfers to Affiliated/Other Party Committees.....	20.00	20.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(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
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1511.70	1511.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	1511.70	1511.70

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	25.00	25.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	25.00	25.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1491.70	1491.70
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	686.33	686.33
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	805.37	805.37

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 13
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<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)  
Marquette County Democratic Party

**A.** Full Name (Last, First, Middle Initial)  
Michigan Democratic State Cental Committee

Mailing Address 606 Townsend

City State Zip Code  
Lansing MI 48933

FEC ID number of contributing federal political committee. **C** C00031054

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	0	7

Transaction ID: SA12.5295

Amount of Each Receipt this Period  
700.00

Contribution Memberships from 2005

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	700.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 13
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Marquette County Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> SBC/ATT		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 7	
Mailing Address 444 Michigan Avenue		<b>Transaction ID:</b> SA15.5293	
City State Zip Code Detroit MI 48226	Amount of Each Receipt this Period 542.34		
FEC ID number of contributing federal political committee. C	refund of phone bill		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 542.34		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> SBC/ATT		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 7	
Mailing Address 444 Michigan Avenue		<b>Transaction ID:</b> SA15.5294	
City State Zip Code Detroit MI 48226	Amount of Each Receipt this Period 143.99		
FEC ID number of contributing federal political committee. C	Refund of phone bill		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 686.33		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	686.33
<b>TOTAL</b> This Period (last page this line number only) .....	686.33

# 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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Marquette County Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Luke Brothers Enterprises</b>		<b>Transaction ID:</b> SB21B.5269 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 297		Amount of Each Disbursement this Period 125.00
City Marquette State MI Zip Code 49855	Purpose of Disbursement Office Rent Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Luke Brothers Enterprises</b>		<b>Transaction ID:</b> SB21B.5270 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 7
Mailing Address P.O. Box 297		Amount of Each Disbursement this Period 125.00
City Marquette State MI Zip Code 49855	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Luke Brothers Enterprises</b>		<b>Transaction ID:</b> SB21B.5271 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 297		Amount of Each Disbursement this Period 125.00
City Marquette State MI Zip Code 49855	Purpose of Disbursement Office Rent Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	375.00
<b>TOTAL</b> 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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Marquette County Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Luke Brothers Enterprises</b>		<b>Transaction ID: SB21B.5273</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address P.O. Box 297		Amount of Each Disbursement this Period 125.00	
City Marquette State MI Zip Code 49855	Purpose of Disbursement Office rent Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Luke Brothers Enterprises</b>		<b>Transaction ID: SB21B.5275</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7	
Mailing Address P.O. Box 297		Amount of Each Disbursement this Period 125.00	
City Marquette State MI Zip Code 49855	Purpose of Disbursement Office Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Luke Brothers Enterprises</b>		<b>Transaction ID: SB21B.5279</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7	
Mailing Address P.O. Box 297		Amount of Each Disbursement this Period 125.00	
City Marquette State MI Zip Code 49855	Purpose of Disbursement Office Rent Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	375.00
<b>TOTAL</b> 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 10 / 13

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Marquette County Democratic Party

Full Name (Last, First, Middle Initial) <b>A. SBC/ATT</b>		<b>Transaction ID:</b> SB21B.5274 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 444 Michigan Avenue		Amount of Each Disbursement this Period 114.38	
City Detroit State MI Zip Code 48226	Purpose of Disbursement Phone Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. SBC/ATT</b>		<b>Transaction ID:</b> SB21B.5276 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7	
Mailing Address 444 Michigan Avenue		Amount of Each Disbursement this Period 119.05	
City Detroit State MI Zip Code 48226	Purpose of Disbursement Phone Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. U.S. Postal Service</b>		<b>Transaction ID:</b> SB21B.5277 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 7	
Mailing Address Federal Building		Amount of Each Disbursement this Period 57.40	
City Marquette State MI Zip Code 49855	Purpose of Disbursement Postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	290.83
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1040.83

# 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 11 / 13

<input type="checkbox"/> 21b	<input checked="" 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Marquette County Democratic Party

Full Name (Last, First, Middle Initial)

**A.** Michigan Democratic Party

Mailing Address 606 Townsend

City Lansing State MI Zip Code 48933

Purpose of Disbursement  
Alan & Josh Wernholm State Dem Membershp

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB22.5289

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Marquette County Democratic Party

NAME OF ACCOUNT Marquette County Democratic Party	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 7	TOTAL AMOUNT TRANSFERRED 334.00
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	Transaction ID: H3.5280	334.00
<b>ii) Generic Voter Drive</b> .....	Transaction ID:	
<b>iii) Exempt Activities</b> .....	Transaction ID:	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)	Transaction ID:	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Marquette County Democratic Party

NAME OF ACCOUNT Marquette County Democratic Party	DATE OF RECEIPT M M / D D / Y Y Y Y 03 / 21 / 2007	TOTAL AMOUNT TRANSFERRED 252.00
--	--	------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	252.00	Transaction ID: H3.5281
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	586.00
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	586.00