

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
MAIL ROOM

Oct 20 9 14 AM '96

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>Midland County Republican Committee</b>	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>PO Box 100</b>	2. FEC IDENTIFICATION NUMBER <b>C00109116</b>
CITY, STATE and ZIP CODE <b>Midland, MI 48640</b>	3. <input checked="" type="checkbox"/> 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	<b>1 July 96 through 30 Sept 96</b>		<b>5,588.34</b>
6. (a) Cash on Hand January 1, 19 <b>96</b>			<del>17,952.27</del>
(b) Cash on Hand at Beginning of Reporting Period		\$ 17,952.27	
(c) Total Receipts (from Line 1B)		\$ 1,955-	\$ 29,080-
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 19,907.27	\$ 34,668.34
7. Total Disbursements (from Line 3D)		\$ 5,164.47	\$ 24,970.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 14,782.80	\$ 9,677.86
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$ —	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$ —	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

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 <b>John C. Levy</b>	Date <b>13 Oct 96</b>
Signature of Treasurer <i>[Signature]</i>	

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

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FEC FORM 3X

(revised 8/93)

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

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM	TO	
<i>Midland County Republicans Committee</i>			
<b>I. Receipts</b>			
11. Contributions (other than loans) From:	COLUMN A Total This Period	COLUMN B Calendar Year	
e. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	600-	16,300-	11(a)(i)
ii. Unitemized	1355-	12,790-	11(a)(ii)
ii. Total (add i and ii)	1955-	29,090-	11(b)
b. Political Party Committees			11(c)
c. Other Political Committees (such as PACs)			11(d)
d. Total Contributions (add a iii, b and c)	1955-	29,090	12
12. Transfers From Affiliated/Other Party Committees			13
13. All Loans Received			14
14. Loan Repayments Received			15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	862.64	862.64	16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17. Other Federal Receipts (Dividends, Interest, etc.)			18
18. Transfers from Nonfederal Account for Joint Activity	<del>2,817.64</del>	<del>31,897.64</del>	19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	<del>2,817.64</del>	<del>31,897.64</del>	20
20. Total Federal Receipts (subtract line 18 from line 19)	<del>2,817.64</del>	<del>31,897.64</del>	
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share	5,164.47	24,325.48	21(b)
b. Other Federal Operating Expenditures	5,164.47	24,325.48	21(c)
c. Total Operating Expenditures (add a i, a ii, and b)	5,164.47	24,325.48	22
22. Transfers to Affiliated/Other Party Committees		645 (in kind)	23
23. Contributions to Federal Candidates/Committees and Other Political Committees			24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c)			28(d)
28. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 28)	5,164.47	24,970.48	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	5,164.47	24,970.48	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	1,955	29,090	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	1,955	29,090	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	5,164.47	24,970.48	35
36. Offsets to Operating Expenditures (from line 15)	862.64	862.64	36
37. Net Operating Expenditures (subtract line 36 from 35)	4,301.83	24,107.84	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 119

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)

**MIDLAND COUNTY REPUBLICAN HEADQUARTERS**

A. Full Name, Mailing Address and ZIP Code J. DANIEL CLIVE, M.D. LAWDICE C. CLIVE 2391 PERRINE RD. MIDLAND, MI 48640 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation <b>PHYSICIAN</b> Aggregate Year-to-Date > \$	Date (month, day, year) <b>7-9-96</b>	Amount of Each Receipt this Period <b>\$300.00</b>
B. Full Name, Mailing Address and ZIP Code F.R. LEHMAN 2201 MAPLELEAF DRIVE MIDLAND, MI 48640 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation <b>RETIRED</b> Aggregate Year-to-Date > \$	Date (month, day, year) <b>7-11-96</b>	Amount of Each Receipt this Period <b>\$300.00</b>
C. Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) .....

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2  
FOR LINE NUMBER 216

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NAME OF COMMITTEE (In Full)

Midland County Republican Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Aeritech Saginaw, MI	phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-3-96 8-7-96 9-18-96	110- 150- 512-
B. Full Name, Mailing Address and ZIP Code AT&T Saginaw, MI	Purpose of Disbursement Long distance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-9-96	Amount of Each Disbursement This Period 30-
C. Full Name, Mailing Address and ZIP Code L&H Leasing PO Box 71 Midland, MI 48640	Purpose of Disbursement rent 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 Kelly Services 142 Ashlan Midland, MI 48640	Purpose of Disbursement wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-3-96 7-15-96 7-16-96 7-31-96	Amount of Each Disbursement This Period 155.04 330.46 114.24 220.32
E. Full Name, Mailing Address and ZIP Code Consumer Power Saginaw, MI 48602	Purpose of Disbursement utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-3-96 <del>7-3-96</del> 8-7-96	Amount of Each Disbursement This Period 157- <del>225-</del> 86-
F. Full Name, Mailing Address and ZIP Code Office Supply Co. 420 Cambridge Midland, MI 48640	Purpose of Disbursement supply's Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-3-96 9-10-96	Amount of Each Disbursement This Period 65 37.23
G. Full Name, Mailing Address and ZIP Code Midland Investment Co. 3800 Eastman Ave. Midland, MI 48640	Purpose of Disbursement rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-19-96	Amount of Each Disbursement This Period 725-
H. Full Name, Mailing Address and ZIP Code A.S. Arbury 115 Jerome Midland, MI 48640	Purpose of Disbursement insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-24-96 7-24-96	Amount of Each Disbursement This Period 204- 204-
I. Full Name, Mailing Address and ZIP Code Post Master 2900 Road Midland, MI 48640	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-25-96 8-14-96 8-28-96	Amount of Each Disbursement This Period 32- 32- 32-

SUBTOTAL of Disbursements This Page (optional)

3,196.31

TOTAL This Period (last page this line number only)

3,196.31

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2  
FOR LINE NUMBER 216

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NAME OF COMMITTEE (in Full)

Midland County Republican Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gardener's Pat Light 2840 E. Gardenville Midland, MI 48640	Mowing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-12-96	57.64
B. Full Name, Mailing Address and ZIP Code Qualatex 421 Bayless Midland, MI 48640	Rug Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-22-96	90-
C. Full Name, Mailing Address and ZIP Code Bill's Upholstery 133 Ashman Midland, MI 48640	window treatment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-23-96	807.60
D. Full Name, Mailing Address and ZIP Code Kelly Services 142 Ashman Midland, MI 48640	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-28-96 9-16-96	367.20 422.48
E. Full Name, Mailing Address and ZIP Code CONSUELO POWER Saginaw, MI	utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-10-96	221.24
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)

1968.16

TOTAL This Period (last page this line number only)

5164.47

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

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Records DATE OF RECEIPT

Other (Specify): POSTMARKED  
and/or DATE OF RECEIPT

*SES* *10-20-96*

PREPARER

DATE PREPARED