

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED

2013 JUL 30 AM 8:20

Office Use Only

FEDERAL MAIL CENTER

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

IN OUR MOTHEIRS NAME

ADDRESS (number and street)

739 WILSON AVENUE



Check if different  
than previously  
reported. (ACC)

MUSKEGON

MI

49441-3040

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00526244

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)

☐ 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 (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the  
State of

State

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the  
State of

State

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

2013

through

MM / DD / YYYY

MM / DD / YYYY

2013

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

Julia Dennis

Signature of Treasurer

Julia Dennis

Date

MM / DD / YYYY

MM / DD / YYYY

2013

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**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

*IN OUR MOTHERS NAME*

Report Covering the Period:

From:

01 / 01 / 2013

To:

06 / 30 / 2013

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand  
January 1,

2013

9710

(b) Cash on Hand at  
Beginning of Reporting Period.....

9710

(c) Total Receipts (from Line 19) .....

000

000

(d) Subtotal (add Lines 6(b) and  
6(c) for Column A and Lines  
6(a) and 6(c) for Column B) .....

9710

9710

7. Total Disbursements (from Line 31) .....

000

000

8. Cash on Hand at Close of  
Reporting Period  
(subtract Line 7 from Line 6(d)) .....

9710

9710

9. Debts and Obligations Owed TO  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

000

10. Debts and Obligations Owed BY  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

000



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 (Rev. 06/2004)

Page 3

Write or Type Committee Name

*IN OUR MOTHERS NAME*

Report Covering the Period: From:

MM / DD / YYYY  
01 / 01 / 2013

To:

MM / DD / YYYY  
06 / 30 / 2013

## **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).....

000

000

(ii) Unitemized .....

000

000

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

000

000

(b) Political Party Committees .....

000

000

(c) Other Political Committees (such as PACs).....

000

000

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....

000

000

### 12. Transfers From Affiliated/Other Party Committees.....

000

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### 13. All Loans Received .....

000

000

### 14. Loan Repayments Received.....

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### 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

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000

### 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

000

000

### 17. Other Federal Receipts (Dividends, Interest, etc.).....

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### 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3) .....

000

000

(b) Levin Funds (from Schedule H5) .....

000

000

(c) Total Transfers (add 18(a) and 18(b))..

000

000

### 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

000

000

### 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

000

000

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

## **II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

**21. Operating Expenditures:**

(a) Allocated Federal/Non-Federal  
Activity (from Schedule H4)

(i) Federal Share .....

(ii) Non-Federal Share.....

(b) Other Federal Operating  
Expenditures .....

(c) Total Operating Expenditures  
(add 21(a)(i), (a)(ii), and (b)) .....

**22. Transfers to Affiliated/Other Party**

Committees.....

**23. Contributions to  
Federal Candidates/Committees  
and Other Political Committees.....**

**24. Independent Expenditures  
(use Schedule E) .....**

**25. Coordinated Party Expenditures  
(2 U.S.C. §441a(d))  
(use Schedule F).....**

**26. Loan Repayments Made.....**

**27. Loans Made.....**

**28. Refunds of Contributions To:**  
(a) Individuals/Persons Other  
Than Political Committees .....

(b) Political Party Committees .....

(c) Other Political Committees  
(such as PACs).....

(d) Total Contribution Refunds  
(add Lines 28(a), (b), and (c)).....

**29. Other Disbursements .....**

**30. Federal Election Activity (2 U.S.C. §431(20))**

(a) Allocated Federal Election Activity  
(from Schedule H6)

(i) Federal Share .....

(ii) "Levin" Share.....

(b) Federal Election Activity Paid Entirely  
With Federal Funds .....

(c) Total Federal Election Activity (add ..  
Lines 30(a)(i), 30(a)(ii) and 30(b))....

**31. Total Disbursements (add Lines 21(c), 22,  
23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..**

**32. Total Federal Disbursements**

(subtract Line 21(a)(ii) and Line 30(a)(ii)  
from Line 31).....

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# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

## **III. Net Contributions/Operating Ex-** **penditures**

### **COLUMN A** **Total This Period**

### **COLUMN B** **Calendar Year-to-Date**

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

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**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

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

*IN OUR MOTHERS NAME*

Full Name (Last, First, Middle Initial)

<b>A.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State Zip Code	
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

<b>B.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State Zip Code	
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

<b>C.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State Zip Code	
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

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

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

0.00  
 0.00

13031101612

**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

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

*IN OUR MOTHERS NAME*

Full Name (Last, First, Middle Initial)

<b>A.</b>		Date of Disbursement
Mailing Address		<input type="text"/>
City State Zip Code		
Purpose of Disbursement	<input type="text"/> Category/ Type	Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>B.</b>		Date of Disbursement
Mailing Address		<input type="text"/>
City State Zip Code		
Purpose of Disbursement	<input type="text"/> Category/ Type	Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>C.</b>		Date of Disbursement
Mailing Address		<input type="text"/>
City State Zip Code		
Purpose of Disbursement	<input type="text"/> Category/ Type	Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

0.00  
 0.00

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
---	-----------------

<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 7/22/13
---	-----------------------

<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
--	------------------

<input type="checkbox"/> USPS Priority Mail	Postmarked
---	------------

<input type="checkbox"/> USPS Express Mail	Postmarked
--	------------

☐ Postmark Illegible

☐ No Postmark

<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
--	-----------------

<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
---	-------------------------------

*JmP*

PREPARER

(7/2013)

7/30/13

DATE PREPARED

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