



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

May 13, 1999

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

RQ-3

JUN 1 2 23 PM '99

Roberta A. Smith, Treasurer
Branch County Republican Committee
P.O. Box 127
Coldwater, MI 49036

Identification Number: C00000992

Reference: 30 Day Post-General Report (10/21/98-11/15/98)

Dear Ms. Smith:

On April 21, 1999, you were notified that a review of the above-referenced report(s) raised questions as to specific contributions and/or expenditures, and the reporting of certain information required by the Federal Election Campaign Act.

Your May 10, 1999 response is incomplete because you have not provided all the requested information. For this response to be considered adequate, the following information is still required.

-The totals listed on Lines 30 and 31, Column B of the Detailed Summary Page(s) appear to be incorrect. Please be advised that you should add the "Calendar Year-to-Date" total from your previous report to the current "Total This Period" figure from Column A to derive the correct Column B total. Please amend your report and any subsequent reports that may be affected by this correction. *I am sorry but as I add the totals from Report 9-3 to 10-2 for this period of this report I come up with these totals*

-Please provide a Schedule B to support the entry reported on Line 28(e) of the Detailed Summary Page. Each refund made to a political committee must be itemized on Schedule B, regardless of the amount refunded. 2 U.S.C. §434(b).

If this information is not received by the Commission within fifteen (15) days from the date of this notice, the Commission may choose to initiate audit or legal enforcement action.

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUN 1 2 23 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

C00000992 101998 P 224
ROBERTA A SMITH
BRANCH COUNTY REPUBLICAN COMMI
TTEE
PO BOX 127
COLDWATER MI 49036

2. FEC IDENTIFICATION NUMBER
38-2567808
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
- 2-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 2-Day Post-Election Report following the General Election
on Nov 2 in the State of MI

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	Covering Period <u>10-21-97</u> through <u>11-15-98</u>		
6.	(a) Cash on Hand January 1, 19 <u>97</u>		\$ <u>14755.12</u>
	(b) Cash on Hand at Beginning of Reporting Period	\$ <u>18282.17</u>	
	(c) Total Receipts (from Line 19)	\$ <u>135.50</u>	\$ <u>12828.01</u>
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>18417.67</u>	\$ <u>27583.13</u>
7.	Total Disbursements (from Line 20)	\$ <u>9655.14</u>	\$ <u>18820.60</u>
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>8762.53</u>	\$ <u>8762.53</u>
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>0</u>	For further information contact: Federal Election Commission BE: E Street, NW Washington, DC 20463 Tel: Free 800-424-9530 Local 202-694-1100
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>0</u>	

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
Roberta A Smith

Signature of Treasurer
Roberta A Smith

Date
11-27-98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §457g.

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FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM	TO	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	0	0	11(a)(7)
ii. Unitemized	120.00	15,109.65	11(a)(8)
Total (add i and ii) >	120.00	15,109.65	11(a)(9)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a ii, b and c) >			11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	15.52	124.40	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	135.52	15,234.05	19
20. Total Federal Receipts (subtract line 18 from line 19) >	135.52	15,234.05	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22. Transfers to Affiliated/Other Party Committees		2,000.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)	1000	1000.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	32.00	32.00	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) >	32.00	32.00.00	28(d)
29. Other Disbursements	8438.54	14620.60	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	9655.54	15620.60	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	9655.54	15620.60	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	0	0	32
33. Total Contribution Refunds (from line 28d)	32.00.00	32.00.00	33
34. Net Contributions (other than loans) (subtract line 33 from line 32)	0		34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0		35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from line 35) >	4200	4200	37

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 117 OF
FOR LINE NUMBER

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 Com.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Com. to elect Ray Matoske Caldwell MI, 44036</i>	<i>County Commissioner</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-20-98</i>	<i>400</i>
<i>Com. to elect John Smulaska</i>	<i>Attorney General</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-20</i>	<i>800</i>
<i>Com. to elect Maura Conzu</i>	<i>State Supreme Court</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-20</i>	<i>500</i>
<i>Com. to elect Phil Hoffmann</i>	<i>State Senator</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-20</i>	<i>500</i>
<i>Com. to elect Steve Veas Halladale MI.</i>	<i>State Representative</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-20</i>	<i>1000</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)

3200

TOTAL This Period (last page this line number only)

3200

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 5-20-99
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>SEP</i>	 6-1-99
PREPARER	DATE PREPARED