

**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

Grand Traverse Cty. Democratic Committee

ADDRESS (number and street)
▼

P.O. Box 1828

☐Check if different
than previously
reported. (ACC)

Traverse City

MI

49685

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00402842

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

07

01

2005

through

12

31

2005

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

Leslie Cook

Signature of Treasurer

Electronically Filed by Leslie Cook

Date

04

20

2006

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							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Grand Traverse Cty. Democratic Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		12485.45
(b) Cash on Hand at Beginning of Reporting Period	17106.32	
(c) Total Receipts (from Line 19)	13329.59	31883.03
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	30435.91	44368.48
7. Total Disbursements (from Line 31)	20521.83	34454.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9914.08	9914.08
9. Debts and Obligations owed TO 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 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. 02/2003)

Page 3

Write or Type Committee Name

Grand Traverse Cty. Democratic Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	5

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	1996.00	5576.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	10947.00	25360.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	12943.00	30936.50
(b) Political Party Committees	25.00	25.00
(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) ➤	12968.00	30961.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
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)	345.06	865.06
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	16.53	56.47
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	13329.59	31883.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13329.59	31883.03

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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	4220.12	7145.94
(ii) Non-Federal Share.....	15875.71	26882.46
(b) Other Federal Operating Expenditures.....	426.00	426.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	20521.83	34454.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
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))..	20521.83	34454.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	4646.12	7571.94

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
33. Total Contributions (other than loans) from Line 11(d), page 3)	12968.00	30961.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12968.00	30961.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4646.12	7571.94
37. Offsets to Operating Expenditures (from Line 15, page 3)	345.06	865.06
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4301.06	6706.88

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial) Dawn Campbell Mailing Address 406 Wadsworth City State Zip Code Traverse City MI 49684 FEC ID number of contributing federal political committee. C Name of Employer Munson Medical Center Occupation Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 242.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.7652 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	0	5	25.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	7		0	8		2	0	0	5																							
25.00																																
B. Full Name (Last, First, Middle Initial) Dawn Campbell Mailing Address 406 Wadsworth City State Zip Code Traverse City MI 49684 FEC ID number of contributing federal political committee. C Name of Employer Munson Medical Center Occupation Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 257.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.7887 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">15.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	9		2	0	0	5	15.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	7		0	9		2	0	0	5																							
15.00																																
C. Full Name (Last, First, Middle Initial) Rolayne Casler Mailing Address 7552 N. Long Lake Rd. City State Zip Code Traverse City MI 49684 FEC ID number of contributing federal political committee. C Name of Employer Casler, Rolayne Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.7890 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">15.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	9		2	0	0	5	15.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	7		0	9		2	0	0	5																							
15.00																																

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)

Michael Dettmer

Mailing Address 7003 Leorie Dr.

City State Zip Code
 Traverse City MI 49686

FEC ID number of contributing federal political committee.

C

Name of Employer
Dettmer, MichaelOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 8 / 2 0 0 5

Transaction ID: SA11A1.8198

Amount of Each Receipt this Period

426.00

In-kind-not on behalf of Fed. Cand.

B. Full Name (Last, First, Middle Initial)

Candace Gorman

Mailing Address 542 S. Dearborn

City State Zip Code
 Chicago IL 60605

FEC ID number of contributing federal political committee.

C

Name of Employer
Gorman, CandaceOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.7946

Amount of Each Receipt this Period

10.00

C. Full Name (Last, First, Middle Initial)

Laura Herman

Mailing Address 547 Washington St.

City State Zip Code
 Traverse City MI 49686

FEC ID number of contributing federal political committee.

C

Name of Employer
Herman, LauraOccupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.7726

Amount of Each Receipt this Period

1010.00

SUBTOTAL of Receipts This Page (optional)

1446.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial) Steve Morse		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 8 / 2 0 0 5
Mailing Address 1133 Dracka Rd.		
City	State	Zip Code
Traverse City	MI	49684
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.7764
		Amount of Each Receipt this Period 100.00
Name of Employer Morse, Steve		Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		241.00

B. Full Name (Last, First, Middle Initial) Grant Parsons		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 8 / 2 0 0 5
Mailing Address 6936 Mission Ridge		
City	State	Zip Code
Traverse City	MI	49686
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.7779
		Amount of Each Receipt this Period 100.00
Name of Employer Parsons, Ringsmuth, Attys.		Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		220.00

C. Full Name (Last, First, Middle Initial) Grant Parsons		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 9 / 2 0 0 5
Mailing Address 6936 Mission Ridge		
City	State	Zip Code
Traverse City	MI	49686
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.8065
		Amount of Each Receipt this Period 15.00
Name of Employer Parsons, Ringsmuth, Attys.		Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		235.00

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial) Grant Parsons		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 6936 Mission Ridge		Transaction ID: SA11A1.8066	
City Traverse City	State MI	Zip Code 49686	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Parsons, Ringsmuth, Attys.	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

B. Full Name (Last, First, Middle Initial) Paulette Parsons		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5	
Mailing Address 6936 Mission Ridge		Transaction ID: SA11A1.8068	
City Traverse City	State MI	Zip Code 49686	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Parsons, Paulette	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

C. Full Name (Last, First, Middle Initial) Maureen Riley		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 9 / 2 0 0 5	
Mailing Address 1228 Clinch St		Transaction ID: SA11A1.8083	
City Traverse City	State MI	Zip Code 49684	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00	
Name of Employer Retired	Occupation Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00		

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial) June Thaden Mailing Address 520 Highland Pk Dr. City State Zip Code Traverse City MI 49686 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Librarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 247.00			Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 8 / 2 0 0 5 Transaction ID: SA11A1.7831 Amount of Each Receipt this Period 40.00
B. Full Name (Last, First, Middle Initial) June Thaden Mailing Address 520 Highland Pk Dr. City State Zip Code Traverse City MI 49686 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Librarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 262.00			Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 9 / 2 0 0 5 Transaction ID: SA11A1.8117 Amount of Each Receipt this Period 15.00
C. Full Name (Last, First, Middle Initial) June Thaden Mailing Address 520 Highland Pk Dr. City State Zip Code Traverse City MI 49686 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Librarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 287.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 5 Transaction ID: SA11A1.8118 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

Full Name (Last, First, Middle Initial)

A. Susie Tobin

Mailing Address 7777 Truesdale Lane

City State Zip Code
 Traverse City MI 49686

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tobin, Susie

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 8 / 2 0 0 5

Transaction ID: SA11A1.7838

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Sally Viskochil

Mailing Address 222 Washington #4

City State Zip Code
 Traverse City MI 49684

FEC ID number of contributing
federal political committee.

C

Name of Employer
Viskochil, Sally

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.7843

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Kent Walton

Mailing Address 6331 Peninsula Dr.

City State Zip Code
 Traverse City MI 49686

FEC ID number of contributing
federal political committee.

C

Name of Employer
Walton, Smith, Phillips, e-
tal.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 8 / 2 0 0 5

Transaction ID: SA11A1.7845

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial) Tim Wiley		Date of Receipt MM / DD / YYYY 07 / 09 / 2005	
Mailing Address 547 Terrace Drive		Transaction ID: SA11A1.8135	
City Traverse City	State MI	Zip Code 49686	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer Tim Wiley	Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional)

20.00

TOTAL This Period (last page this line number only)

1996.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 33

(check only one)

<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)

Grand Traverse Cty. Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Roscommon Cty Dem Pty

Mailing Address P.O. Box 1001

City

Houghton Lake

State

MI

Zip Code

48629

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	5

Transaction ID: SA11B.8141

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

25.00

TOTAL This Period (last page this line number only)

25.00

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

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

FOR LINE NUMBER: PAGE 14 / 33

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)

Leelanau Cty. Democratic Committee

Mailing Address 1966 S. Lake Leelanau Trl.

City State Zip Code
 Lake Leelanau MI 49659

FEC ID number of contributing
federal political committee.

C C00395434

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 5 / 2 0 0 5

Transaction ID: SA15.8143

Amount of Each Receipt this Period

200.00

rent

B. Full Name (Last, First, Middle Initial)

Michigan Democratic State Central 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 ▼

365.06

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 4 / 2 0 0 5

Transaction ID: SA15.8144

Amount of Each Receipt this Period

145.06

rebate

SUBTOTAL of Receipts This Page (optional)

345.06

TOTAL This Period (last page this line number only)

345.06

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 15 / 33

<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)

Grand Traverse Cty. Democratic Committee

Full Name (Last, First, Middle Initial)

A. Michael Dettmer

Mailing Address 7003 Leorie Dr.

City
Traverse City

State
MI

Zip Code
49686

Purpose of Disbursement
In-kind-not on behalf of Fed. Cand.

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8199

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2005

Amount of Each Disbursement this Period

426.00

SUBTOTAL of Disbursements This Page (optional)

426.00

TOTAL This Period (last page this line number only)

426.00

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

_____ Presidential-Only Election Year (28% Federal)

_____ Presidential and Senate Election Year (36% Federal)

 X Senate-Only Election Year (21% Federal)

_____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 17 / 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 SBC-Ameritech

Mailing Address

444 Michigan Avenue

City	State	Zip Code
Detroit	MI	48226

001

Purpose of Disbursement:
PhoneCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14130.46

Date

M	M
0	7

 /

D	D
0	5

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8150

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

41.56

156.33

197.89

B. Full Name (Last, First, Middle Initial)
 Sam's

Mailing Address

U.S. 37

City	State	Zip Code
Traverse City	MI	49684

003

Purpose of Disbursement:
FoodCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
0	7

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8226

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

265.12

265.12

C. Full Name (Last, First, Middle Initial)
 G. J.'s Rentals, Inc.

Mailing Address

216 E. 15th St.

City	State	Zip Code
Traverse City	MI	49684

003

Purpose of Disbursement:
RentalCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
0	7

 /

D	D
0	8

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8227

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

123.05

123.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

41.56

156.33

197.89

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 18 / 33
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 Pleva's Meats

Mailing Address

P.O. Box 42

City State Zip Code

Cedar MI 49621

003

Purpose of Disbursement:
FoodCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 07 / 08 / 2005

Transaction ID: H4.8230

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

11.83

11.83

B. Full Name (Last, First, Middle Initial)
 Copy Central

Mailing Address

314 E. 8th Street

City State Zip Code

Traverse City MI 49684

001

Purpose of Disbursement:
newsletter printingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14400.50

Date 07 / 18 / 2005

Transaction ID: H4.8151

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

56.71

213.33

270.04

C. Full Name (Last, First, Middle Initial)
 Copy Central

Mailing Address

314 E. 8th Street

City State Zip Code

Traverse City MI 49684

001

Purpose of Disbursement:
printingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14462.25

Date 07 / 18 / 2005

Transaction ID: H4.8152

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

12.97

48.78

61.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

69.68

262.11

331.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 19 / 33
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
Holiday Inn

Mailing Address

615 E. Front St.

 City State Zip Code
Traverse City MI 49686

003

 Purpose of Disbursement:
Facility rent-not on behalf of Fed. Cand
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

15496.24

 Date M M / D D / Y Y Y Y
0 7 / 1 8 / 2 0 0 5

Transaction ID: H4.8153

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.14		816.85		1033.99

B. Full Name (Last, First, Middle Initial)
U.S. Postal Service

Mailing Address

202 S. Union

 City State Zip Code
Traverse City MI 49684

001

 Purpose of Disbursement:
Postage-Young Dems
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

15606.64

 Date M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 5

Transaction ID: H4.8154

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.18		87.22		110.40

C. Full Name (Last, First, Middle Initial)
Michael Dettmer

Mailing Address

7003 Leorie Dr.

 City State Zip Code
Traverse City MI 49686

003

 Purpose of Disbursement:
Food/rental-not on behalf of Fed Cand.
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16006.64

 Date M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 5

Transaction ID: H4.8156

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.00		316.00		400.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
324.32		1220.07		1544.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 20 / 33
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
U.S. Postal Service

 Mailing Address
202 S. Union

 City State Zip Code
Traverse City MI 49684

001

 Purpose of Disbursement:
stamps
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16014.04

 Date M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 5

Transaction ID: H4.8157

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.55

5.85

7.40

B. Full Name (Last, First, Middle Initial)
SBC-Ameritech

 Mailing Address
444 Michigan Avenue

 City State Zip Code
Detroit MI 48226

001

 Purpose of Disbursement:
phone
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16152.49

 Date M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 5

Transaction ID: H4.8158

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

29.07

109.38

138.45

C. Full Name (Last, First, Middle Initial)
Granholt for Governor

 Mailing Address
P.O. Box 17127

 City State Zip Code
Lansing MI 48901

011

 Purpose of Disbursement:
Contribution to State Candidate
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19152.49

 Date M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 5

Transaction ID: H4.8162

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

630.00

2370.00

3000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

660.62

2485.23

3145.85

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 21 / 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 Traverse Area District Library

Mailing Address

610 Woodmere Ave.

City	State	Zip Code
Traverse City	MI	49686

001

Purpose of Disbursement:
 Facility rent-Young Dems

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19232.49

Date

M	M
0	8

 /

D	D
1	0

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8165

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.80

63.20

80.00

B. Full Name (Last, First, Middle Initial)
 Park Place Hotel

Mailing Address

300 S. State St.

City	State	Zip Code
Traverse City	MI	49684

003

Purpose of Disbursement:
 Facility rent-not on behalf of Fed Cand.

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19732.49

Date

M	M
0	8

 /

D	D
1	0

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8167

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.00

395.00

500.00

C. Full Name (Last, First, Middle Initial)
 Copy Central

Mailing Address

314 E. 8th Street

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 Printng

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19761.38

Date

M	M
0	8

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8168

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.07

22.82

28.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

127.87

481.02

608.89

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 22 / 33
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 Lynn Larson

Mailing Address

2735 Forest Lodge Rd.

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 Office supplies

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19830.04

Date

M	M
0	8

 /

D	D
1	7

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8169

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.42

54.24

68.66

B. Full Name (Last, First, Middle Initial)
 Gordon Food Service

Mailing Address

1781 Barlow St.

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 office supplies

Category/
Type

Activity or Event Identifier:
 Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
0	8

 /

D	D
1	7

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8232

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

14.00

14.00

C. Full Name (Last, First, Middle Initial)
 Office Max

Mailing Address

3111 S. Airport Rd.

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 Office Supplies

Category/
Type

Activity or Event Identifier:
 Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
0	8

 /

D	D
1	7

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8233

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

54.66

54.66

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.42

54.24

68.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 23 / 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 SBC-Ameritech

Mailing Address

444 Michigan Avenue

City	State	Zip Code
Detroit	MI	48226

001

Purpose of Disbursement:
phoneCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19928.75

Date

M	M
0	8

 /

D	D
2	4

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8170

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

20.73

77.98

98.71

B. Full Name (Last, First, Middle Initial)
 Pat Noland

Mailing Address

955 E. 8th St.

City	State	Zip Code
Traverse City	MI	49686

001

Purpose of Disbursement:
office remodelCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20128.75

Date

M	M
0	9

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8171

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

42.00

158.00

200.00

C. Full Name (Last, First, Middle Initial)
 Margaret Forgione

Mailing Address

605 W. 7th St.

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
office remodelCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20150.99

Date

M	M
0	9

 /

D	D
1	8

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8172

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.67

17.57

22.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

67.40

253.55

320.95

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 24 / 33
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 June Thaden

Mailing Address

520 Highland Pk Dr.

City	State	Zip Code
Traverse City	MI	49686

001

Purpose of Disbursement:
 office supplies

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20228.20

Date

M	M
0	9

 /

D	D
1	8

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8173

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.21

61.00

77.21

B. Full Name (Last, First, Middle Initial)
 Jo-Ann Fabrics

Mailing Address

Munson Avenue

City	State	Zip Code
Traverse City	MI	49686

001

Purpose of Disbursement:
 Office remodel

Category/
Type

Activity or Event Identifier:
 Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
0	9

 /

D	D
1	8

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8236

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

22.24

22.24

C. Full Name (Last, First, Middle Initial)
 Sam's

Mailing Address

U.S. 37

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 Printer cartridge

Category/
Type

Activity or Event Identifier:
 Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
0	9

 /

D	D
1	8

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8237

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

77.21

77.21

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.21

61.00

77.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 25 / 33
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 SBC-Ameritech

Mailing Address

444 Michigan Avenue

City	State	Zip Code
Detroit	MI	48226

001

Purpose of Disbursement:
phoneCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20319.26

Date

M	M
1	0

 /

D	D
0	3

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8174

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.12

71.94

91.06

B. Full Name (Last, First, Middle Initial)
 U.S. Postal Service

Mailing Address

202 S. Union

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
postage/box rentCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20401.26

Date

M	M
1	0

 /

D	D
2	4

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8175

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

17.22

64.78

82.00

C. Full Name (Last, First, Middle Initial)
 Gordon Food Service

Mailing Address

1781 Barlow St.

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
suppliesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20419.26

Date

M	M
1	0

 /

D	D
2	4

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8176

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.78

14.22

18.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

40.12

150.94

191.06

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 26 / 33
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)

Margaret Forgione

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20482.86

Mailing Address

605 W. 7th St.

City State Zip Code

Traverse City MI 49684

001

Purpose of Disbursement:
printer cartridgeCategory/
TypeActivity or Event Identifier:
Administrative

Date 10 / 24 / 2005

Transaction ID: H4.8177

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

13.36

50.24

63.60

B. Full Name (Last, First, Middle Initial)

Charlene Hamlyn

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20867.51

Mailing Address

1077 Bayside Dr.

City State Zip Code

Traverse City MI 49686

001

Purpose of Disbursement:
newsletter postage/suppliesCategory/
TypeActivity or Event Identifier:
Administrative

Date 10 / 24 / 2005

Transaction ID: H4.8178

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

80.78

303.87

384.65

C. Full Name (Last, First, Middle Initial)

Cartridge World

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Mailing Address

3311 S. South Airport Rd.

City State Zip Code

Traverse City MI 49684

001

Purpose of Disbursement:
Printer CartridgeCategory/
TypeActivity or Event Identifier:
Administrative

Date 10 / 24 / 2005

Transaction ID: H4.8238

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

63.60

63.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

94.14

354.11

448.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 27 / 33
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
Staples

Mailing Address

2632 Crossing Circle

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
suppleisCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 10 / 24 / 2005

Transaction ID: H4.8240

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

30.49

30.49

B. Full Name (Last, First, Middle Initial)
U.S. Postal Service

Mailing Address

202 S. Union

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
Newsletter postageCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 10 / 24 / 2005

Transaction ID: H4.8241

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

354.16

354.16

C. Full Name (Last, First, Middle Initial)
SBC-Ameritech

Mailing Address

444 Michigan Avenue

City	State	Zip Code
Detroit	MI	48226

001

Purpose of Disbursement:
phoneCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20971.65

Date 10 / 25 / 2005

Transaction ID: H4.8179

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

21.87

82.27

104.14

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

21.87

82.27

104.14

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 28 / 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)

Pat Noland

Mailing Address

955 E. 8th St.

City

State

Zip Code

Traverse City

MI

49686

001

Purpose of Disbursement:
office rentCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

32911.65

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	5

Transaction ID: H4.8180

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2507.40

9432.60

11940.00

B. Full Name (Last, First, Middle Initial)

Copy Central

Mailing Address

314 E. 8th Street

City

State

Zip Code

Traverse City

MI

49684

001

Purpose of Disbursement:
newsletter printingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33250.59

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	5

Transaction ID: H4.8181

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

71.18

267.76

338.94

C. Full Name (Last, First, Middle Initial)

Green Island

Mailing Address

116 S. Union

City

State

Zip Code

Traverse City

MI

49684

001

Purpose of Disbursement:
giftCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	0	5

Transaction ID: H4.8249

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

25.00

25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2578.58

9700.36

12278.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 29 / 33
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 Target

Mailing Address

3100 S. Airport W.

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 supplies

Category/
Type

Activity or Event Identifier:
 Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
1	1

 /

D	D
1	1

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8250

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

33.92

33.92

B. Full Name (Last, First, Middle Initial)
 U.S. Postal Service

Mailing Address

202 S. Union

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 postage

Category/
Type

Activity or Event Identifier:
 Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
1	1

 /

D	D
1	2

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8247

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.77

29.23

37.00

C. Full Name (Last, First, Middle Initial)
 Staples

Mailing Address

2632 Crossing Circle

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 office supplies

Category/
Type

Activity or Event Identifier:
 Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
1	1

 /

D	D
1	2

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8251

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

10.60

10.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 30 / 33
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 Margaret Forgione

Mailing Address
 605 W. 7th St.

City State Zip Code
 Traverse City MI 49684

001

Purpose of Disbursement:
 office supplies/postage

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33327.62

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 5

Transaction ID: H4.8182

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.18

60.85

77.03

B. Full Name (Last, First, Middle Initial)
 Interlochen Center for the Arts

Mailing Address
 4000 S. M-137

City State Zip Code
 Interlochen MI 49643

012

Purpose of Disbursement:
 memorial contribution

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33352.62

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 5

Transaction ID: H4.8183

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.25

19.75

25.00

C. Full Name (Last, First, Middle Initial)
 Green Island

Mailing Address
 116 S. Union

City State Zip Code
 Traverse City MI 49684

001

Purpose of Disbursement:
 gift

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33378.12

Date M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 5

Transaction ID: H4.8185

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.35

20.15

25.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

26.78

100.75

127.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 31 / 33
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
U.S. Postal Service

Mailing Address
202 S. Union

City State Zip Code
Traverse City MI 49684

001

Purpose of Disbursement:
stamps

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 5

Transaction ID: H4.8242

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

37.00

37.00

B. Full Name (Last, First, Middle Initial)
Staples

Mailing Address
2632 Crossing Circle

City State Zip Code
Traverse City MI 49684

001

Purpose of Disbursement:
office supplies

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 5

Transaction ID: H4.8243

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

30.49

30.49

C. Full Name (Last, First, Middle Initial)
Paper Central

Mailing Address
425 S. Airport Rd.

City State Zip Code
Traverse City MI 49684

001

Purpose of Disbursement:
office supplies

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 5

Transaction ID: H4.8244

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

9.54

9.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 32 / 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 Margaret Forgione

Mailing Address
 605 W. 7th St.

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 office supplies/postage

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33484.64

Date

M	M
1	1

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8187

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

22.37

84.15

106.52

B. Full Name (Last, First, Middle Initial)
 Margaret Forgione

Mailing Address
 605 W. 7th St.

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 mailing postage

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33630.27

Date

M	M
1	1

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8188

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

30.58

115.05

145.63

C. Full Name (Last, First, Middle Initial)
 U.S. Postal Service

Mailing Address
 202 S. Union

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
 Postage

Category/
Type

Activity or Event Identifier:
 Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date

M	M
1	1

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8252

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

145.63

145.63

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

52.95

199.20

252.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Grand Traverse Cty. Democratic Committee

A. Full Name (Last, First, Middle Initial)
 SBC-Ameritech

Mailing Address

444 Michigan Avenue

City	State	Zip Code
Detroit	MI	48226

001

Purpose of Disbursement:
phoneCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33748.19

Date

M	M
1	2

 /

D	D
0	3

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8189

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

24.76

93.16

117.92

B. Full Name (Last, First, Middle Initial)
 Pat Noland

Mailing Address

955 E. 8th St.

City	State	Zip Code
Traverse City	MI	49686

001

Purpose of Disbursement:
suppliesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33778.40

Date

M	M
1	2

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8190

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.34

23.87

30.21

C. Full Name (Last, First, Middle Initial)
 MI 4th Congressional District, Democratic Party, MI

Mailing Address

3137 Horseshoe Dr.

City	State	Zip Code
Traverse City	MI	49684

001

Purpose of Disbursement:
Tickets for 4th District DinnerCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

34028.40

Date

M	M
1	2

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	0	5

Transaction ID: H4.8256

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

52.50

197.50

250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

83.60

314.53

398.13

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

4220.12

15875.71

20095.83