

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

MAY 13 A 9 03 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12P4605 GEASSROOTS EAST

ADDRESS (number and street) 123 FINNEY STREET Check if different than previously reported (ACC) 44100 PA IN 06021-2623

2. FEC IDENTIFICATION NUMBER 00-210600 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

Table with 4 columns: (a) Quarterly Reports (April 15, July 15, October 15, January 31, July 31, Termination), (b) Monthly Report Due On (Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31), (c) 12-Day PRE-Election Report for the (Primary, General, Special), (d) 30-Day POST-Election Report for the (General, Runoff, Special). Includes 'Election on' and 'in the State of' fields.

5. Covering Period 01/01/2004 through 03/31/2004

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 RONALD WEAVER Treasurer Signature of Treasurer [Signature] Date 05/05/2004

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Write or Type Committee Name

GROSSMANS FORST

Report Covering the Period:

From:

01 01 2004

To:

03 31 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1. 2300		3,171.83
(b) Cash on Hand at Beginning of Reporting Period	3,171.83	
(c) Total Receipts (from Line 19)	0.00	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3,171.83	3,171.83
7. Total Disbursements (from Line 31)	746.74	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2,425.09	2,425.09
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)		

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

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Write or Type Committee Name

BRUCE PAT'S EAST

Report Covering the Period:

From:

01 01 2004

To:

03 31 2004

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)	<i>0.00</i>	
(ii) Unitemized		
(ii) TOTAL (add Lines 11(a)(i) and (ii))	<i>0.00</i>	<i>0.00</i>
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(i), (b), and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)		
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	<i>0.00</i>	<i>0.00</i>
20. Total Federal Receipts (subtract Line 18(c) from Line 19)		

DETAILED SUMMARY PAGE
of Disbursements

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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	746.74	746.74
(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 H5)		
(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))	746.74	746.74
32. Total Federal Disbursements (subtract Lines 21(a)(i) and Line 30(a)(ii) from Line 31)	746.74	746.74

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER (check only one)

PAGE 3 OF 4

<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"/> 30a

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)
GRASSROOT EAST

A. Full Name (Last, First, Middle Initial) **JOHNY W. SRAWCHUK** Date of Disbursement **03/15/2004**

Mailing Address **24 MACDONALD ROAD**

City **COLLINGSWOOD** State **CT** Zip Code **06415**

Purpose of Disbursement **CRITERIA** Amount of Each Disbursement this Period **007**

Candidate Name **RUB. SIMMONS** Category/Type **007**

Office Sought: House Senate President Disbursement For: Primary General Other (specify) **▼**

State **CT** District **2**

B. Full Name (Last, First, Middle Initial) **ERIC J. ADRIAN** Date of Disbursement **03/12/2004**

Mailing Address **258 OCEAN AVENUE**

City **NEW LONDON** State **CT** Zip Code **06320**

Purpose of Disbursement **RELATIONSHIP BUILDING** Amount of Each Disbursement this Period **003**

Candidate Name **RUB. SIMMONS** Category/Type **003**

Office Sought: House Senate President Disbursement For: Primary General Other (specify) **▼**

State **CT** District **2**

C. Full Name (Last, First, Middle Initial) **FRANK CRANE** Date of Disbursement **01-03-2004**

Mailing Address **P.O. BOX 1650**

City **BRIDGEPORT** State **CT** Zip Code **06601-1650**

Purpose of Disbursement **BRANK FEES** Amount of Each Disbursement this Period **001**

Candidate Name **RUB. SIMMONS** Category/Type **001**

Office Sought: House Senate President Disbursement For: Primary General Other (specify) **▼**

State **CT** District **2ND**

SUBTOTAL of Disbursements This Page (optional) **796.74**

TOTAL This Period (last page this line number only) **796.74**

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
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<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<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
<i>ser</i> PREPARER	5-13-04 DATE PREPARED