

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>Midland County Republican Committee</b>	<b>RECEIVED FEC MAIL ROOM</b>  <b>2001 FEB -1 A 9 16</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>P.O. Box 100</b>	2. FEC IDENTIFICATION NUMBER <b>000109116</b>
CITY, STATE and ZIP CODE <b>Midland, MI 48640</b>	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report
- Monthly Report Due On:  
 February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31
- 12-Day Pre-Election Report for the General (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 30-Day Post-Election Report following the General Election  
 on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?     YES     NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10-1-00</u> through <u>10-23-00</u>		
6. (a) Cash on Hand January 1, 19____		\$ 23,928.16
(b) Cash on Hand at Beginning of Reporting Period	\$ 37,032.95	
(c) Total Receipts (from Line 19)	\$ 0	\$ 50,978.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 37,032.95	\$ 74,906.80
7. Total Disbursements (from Line 30)	\$ 8,524.28	\$ 46,398.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 28,508.67	\$ 28,508.67
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-461-1500
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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:

**Scott I. Haines**

Signature of Treasurer



Date

**11/30/01**

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

**FEC FORM 3X**

(revised 9/23)

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

(revised 1/1/91)

NAME OF COMMITTEE Midland Co. Republican Comm.

REPORT COVERING PERIOD  
FROM 10-1-00 TO 10-23-00

**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	22,975.00	11(a)(i)
ii. Unitemized	0	27,205.00	11(a)(ii)
iii. Total [add i and ii] >	0	50,180.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions [add a iii, b and c] >	0	50,180.00	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.)	0	798.64	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts [add 11d, 12, 13, 14, 15, 16, 17, and 18] >	0	50,978.64	19
20. Total Federal Receipts [subtract line 18 from line 19] >	0	50,978.64	20

**II. Disbursements**

21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	1827.88	30,416.73	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] >	1827.88	30,416.73	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1715.00	5650.00	23
24. Independent Expenditures (use Schedule E)			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			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds [add a, b and c] >			28(d)
29. Other Disbursements <u>Non-Federal</u>	4981.40	10,331.40	29
30. Total Disbursements [add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29] >	8542.88	46,398.13	30
31. Total Federal Disbursements [subtract line 21 a i from line 30] >	3542.88	35,421.73	31

**III. Net Contributions/Operating Expenditures**

32. Total Contributions (other than loans) (from line 11d)	0	57,270.00	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) [subtract line 33 from 32]	0	57,270.00	34
35. Total Federal Operating Expenditures [add 21 a i and 21 b] >	3542.88	32,131.73	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures [subtract line 36 from 35] >	3542.88	32,131.73	37

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 11 OF 1  
FOR LINE NUMBER 23

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Midland Co. Republican Comm.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Abraham Senate 2000 Southfield, MI	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-2-00	\$ 1000.00
B. Full Name, Mailing Address and ZIP Code Chuck Yob for Congress Traverse City, MI	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-2-00	\$ 500.00
C. Full Name, Mailing Address and ZIP Code L & M Leasing Main St. Midland, MI 48640	Purpose of Disbursement: In-kind Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-11-00	\$ 215.00
D. 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
E. 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
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)

\$1715.00

TOTAL This Period (last page this line number only)

\$1715.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

Midland Co. Republican Comm.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Supreme Court 2000	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-2-00	\$ 1000.00
B. Full Name, Mailing Address and ZIP Code Hoag for Twp. Trustee Midland, Mich 48640	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-11-00	\$ 150.00
C. Full Name, Mailing Address and ZIP Code Rippee for Twp. Trustee Midland, MI 48640	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-11-00	\$ 150.00
D. Full Name, Mailing Address and ZIP Code Midland Buyers Guide Midland, MI 48640	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-12-00	\$ 391.40
E. Full Name, Mailing Address and ZIP Code Midland Daily News Midland, MI 48640	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-12-00	\$ 490.00
F. Full Name, Mailing Address and ZIP Code Reder for Midland Co. Sheriff Midland, MI 48640	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-12-00	\$ 1000.00
G. Full Name, Mailing Address and ZIP Code Stamas for State Representative Midland, MI 48640	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-12-00	\$ 500.00
H. Full Name, Mailing Address and ZIP Code Sandy Cawl for State Representative Mt Pleasant, MI 48858	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-12-00	\$ 500.00
I. Full Name, Mailing Address and ZIP Code Jim Howell for State Representative St. Charles, MI 48865	Candidate Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-12-00	\$ 500.00

SUBTOTAL of Disbursements This Page (optional)

4681.40

TOTAL This Period (last page this line number only)

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 12  
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

Midland Co. Republican Comm.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Wolfgang for Twp. Trustee Midland, MI 48640	Candidate Support	10-12-00	\$150.00
L+M Leasing Main St. Midland, MI 48640	Bill Schutte for State Senate - In-Kind Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-11-00	150.00
C. 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
D. 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
E. 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
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)

300.00

TOTAL This Period (list page this line number only)

4981.40

**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 type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) <i>1-30-01</i>
<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>See</i> PREPARER	<i>2-1-01</i> DATE PREPARED