12/05/2002 17 : 02

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For 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

Candice Miller for Congress

ADDRESS (number and street) ▼ 55 Walnut, PMB 310

Check if different than previously reported. (ACC)

Mount Clemens | MI | 48043

2. **FEC IDENTIFICATION NUMBER** ▼ — CITY ▲ — STATE ▲ — ZIP CODE ▲

C00365593

3. IS THIS REPORT X NEW (N) **OR** AMENDED (A)

STATE ▼ DISTRICT: MI 10

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on in the State of

(c) 30-Day **POST**-Election Report for the:

X General (30G) Runoff (30R) Special (30S)

Election on 11 05 2002 in the State of MI

5. Covering Period 10 17 2002 through 11 25 2002

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 Mr. Robert D. Leslie

Signature of Treasurer Electronically Filed by Mr. Robert D. Leslie Date 01 01 2001

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

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(Revised 1/2001)