

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

2009 DEC -6 A 9 40

1. NAME OF COMMITTEE (In full)

TYPE OR PRINT

Example: If typing, type over the lines

125E4M5

18th CONGRESSIONAL DISTRICT DEMOCRATIC Committee

ADDRESS (number and street)

P.O. Box 4278

Check if different than previously reported. (ACC)

EAST LANSING

MI

48206

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

000819281

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Check One)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(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)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Report for the:

Convention (12C)

Special (12S)

Election on

11/03/2009

In the State of

MI

(d) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Report for the:

Election on

In the State of

5. Covering Period

07/01/2009

through

10/31/2009

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 Sandra Zeckler

Signature of Treasurer Sandra Zeckler

Date 10/20/2009

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

Table with 10 columns and 1 row, labeled 'Office Use Only'.

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

Report Covering the Period: From: **05 01 2004** To: **11 30 2004**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004		1,056.43
(b) Cash on Hand at Beginning of Reporting Period.....	1,056.43	
(c) Total Receipts (from Line 19).....	1,800.00	1,800.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2,856.43	2,856.43
7. Total Disbursements (from Line 31).....	2,856.43	2,856.43
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	0.00	0.00
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D).....	0.00	0.00
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D).....	0.00	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 202-894-1100

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

(See separate schedule(s) for each category of the Detailed Summary Page)		FOR LINE NUMBER: (check only one)				PAGE	OF
<input 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"/> 29b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b		

Any information copied from such Reports and Statements may not be 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)
8th Congressional District Democratic Committee

A. MEYERS
 Mailing Address: **1350 E Lake Lansing Rd**
 City: **E Lansing MI 48823**
 Purpose of Disbursement: **Good - Volunteers**
 Candidate Name: **Robert ALEXANDER**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: **09 21 2004**
 Amount of Each Disbursement This Period: **988.00**

B. ROBERT ALEXANDER
 Mailing Address: **7429 Somerset Circle**
 City: **E Lansing MI 48823**
 Purpose of Disbursement: **Contributions**
 Candidate Name: **Robert Alexander**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: **08 28 2004**
 Amount of Each Disbursement This Period: **000.00**

C. E Lansing City
 Mailing Address: **1350 E Lake Lansing Rd**
 City: **E Lansing MI 48823**
 Purpose of Disbursement: **Volunteer party - Park**
 Candidate Name: **Robert ALEXANDER**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: **09 21 2004**
 Amount of Each Disbursement This Period: **75.00**

SUBTOTAL of Disbursements This Page (optional): **1563.88**
TOTAL This Period (last page this line number only): **1563.88**

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Report Covering the Period: From:

07 01 2004

To:

10 30 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).....	200.00	200.00
(ii) Unitemized.....	00.00	00.00
(ii) TOTAL (add Lines 11(i) and (ii))..... ▶	200.00	200.00
(b) Political Party Committees.....	1000.00	1000.00
(c) Other Political Committees (such as PACs).....	00.00	00.00
(d) Total Contributions (add Lines 11(a)(i), (ii), and (c)) (Carry Totals to Line 23, page 5)..... ▶	1200.00	1200.00
12. Transfers From Affiliated/Other Party Committees.....	00.00	00.00
13. All Loans Received.....	00.00	00.00
14. Loan Repayments Received.....	00.00	00.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	00.00	00.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	00.00	00.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	00.00	00.00
18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H2).....	00.00	00.00
(b) Levin Funds (from Schedule H5).....	00.00	00.00
(c) Total Transfers (add 18(a) and 18(b)).....	00.00	00.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1200.00	1200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1200.00	1200.00

DETAILED SUMMARY PAGE
of Disbursements

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	000000	000000
(ii) Non-Federal Share	000000	000000
(b) Other Federal Operating Expenditures	000000	000000
(c) Total Operating Expenditure (add 21(a)(i), (a)(ii), and (b))	000000	000000
22. Transfers to Affiliated/Other Party Committees	000000	000000
23. Contributions to Federal Candidates/Committees and Other Political Committees	100000	100000
24. Independent Expenditures (use Schedule E)	600000	600000
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	52388	52388
26. Loan Repayments Made	000000	000000
27. Loans Made	000000	000000
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	000000	000000
(b) Political Party Committees	000000	000000
(c) Other Political Committees (such as PACE)	000000	000000
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	000000	000000
29. Other Disbursements	000000	000000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(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)) ..		
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(ii) from Line 31)	156388	156388

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE	OF
<input 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)
8th Congressional Democratic Committee

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

Mailing Address
WILBERETT

City
Lansing State **MI** Zip Code **48915**

FEC ID number of contributing federal political committee
01

Name of Employer
Ingham County Occupation
ATTORNEY

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date
5000

Date of Receipt
03 19 2004

Amount of Each Receipt this Period
50.00

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

Mailing Address
~~WILBERETT~~ **1225 FARMWOOD**

City
LANSING State **MI** Zip Code **48923**

FEC ID number of contributing federal political committee
01

Name of Employer
A. SELF Occupation
ATTORNEY

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date
5000

Date of Receipt
04 29 2004

Amount of Each Receipt this Period
50.00

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

Mailing Address
PO Box 562 Lakeview

City
MI State **MI** Zip Code **48113**

FEC ID number of contributing federal political committee
01

Name of Employer
Retired Occupation

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date
5000

Date of Receipt
07 09 2004

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) _____

TOTAL This Period (last page this line number only) _____

5000

15000

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

Use separate schedule(a) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE	OF
<input 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)
8th Congressional District Democratic Committee

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

Mailing Address
2031 S Washington #23

City
Lansing MI

FEC ID number of contributing federal political committee
C

Name of Employer
UAW

Occupation
STAFF REP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date
5000

Date of Receipt
01 29 2007

Amount of Each Receipt this Period
5000

B. Full Name (Last, First, Middle Initial)
Michelle Dancowitz Karter

Mailing Address
100 Townsend

City
Lansing MI

FEC ID number of contributing federal political committee
C

Name of Employer

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date
100000

Date of Receipt
01 29 2007

Amount of Each Receipt this Period
10000

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

Mailing Address

City

FEC ID number of contributing federal political committee
C

Name of Employer

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)
TOTAL This Period (last page this line number only)

5000
50000

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
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 11/29/04
<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>GAO</i> PREPARER	12/6/04 DATE PREPARED