

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

11/22/04  
12FE4M5

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

SECOND CONGRESSIONAL DISTRICT DEMOCRATIC PARTY

ADDRESS (number and street)

12379 Highland Drive, Suite 201

Check if different than previously reported. (ACC)

West Olive, MI 49460-9515

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00306035

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 Year-End 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 (12S)

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 MI

5. Covering Period

10/14/2004

through

11/22/2004

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:

Sue Maturkanich

Signature of Treasurer

*Sue Maturkanich*

Date

11/22/2004

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

Office Use Only

FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

Report Covering the Period: From: 10 14 2004 To: 11 22 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2004</u>		<u>56933</u>
(b) Cash on Hand at Beginning of Reporting Period	<u>13254.01</u>	
(c) Total Receipts (from Line 10)	<u>24254.30</u>	<u>46795.02</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>38518.01</u>	<u>47364.35</u>
7. Total Disbursements (from Line 30)	<u>30095.82</u>	<u>38938.64</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>8422.19</u>	<u>8425.66</u>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	<u>0</u>	<u>43.47</u>
10. Debt and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	<u>0</u>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission  
899 E Street, NW  
Washington, DC 20462

Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

Second Congressional District - DEMOCRATIC PARTY

Report Covering the Period: From: 10 14 2009 To: 11 22 2009

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)	250.00 1689.00	
(ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii))	1939.00	19139.35
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)	1939.00	19139.35
12. Transfers From Affiliated/Other Party Committees	24325.00	28225.00
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, Etc.) (Carry Totals to Line 35, page 4)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	26264.00	47364.35
20. Total Federal Receipts (subtract Line 18 from Line 19)	26264.00	47364.35

DETAILED SUMMARY PAGE  
of Disbursements

I. 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	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	26,253.94	20,144.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	26,253.94	20,144.39
22. Transfers to Affiliated/Other Party Committees	2,522.30	2,474.30
23. Contributions to Federal Candidate/Committees and Other Political Committees	1,000.00	5,000.00
24. Independent Expenditures (see Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441s(d)) (see Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	320.00	320.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	320.00	320.00
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	30,095.82	38,938.69
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	30,095.82	38,938.69

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(a), page 3)	19,390.00	19,139.35
33. Total Contribution Refunds (from Line 28(d))	320.00	320.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	16,190.00	18,819.35
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	26,603.41	30,494.28
36. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
37. Net Operating Expenditure (subtract Line 36 from Line 35)	26,603.41	30,494.28

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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 1 OF 2  
 (check only one)  
 11a  11b  11c  11d  11e  11f  11g  11h

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)

Second Congressional District - DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Bob Schrauger

Mailing Address

6152 Longbridge Rd

City

Pewaukee

State

WI

Zip Code

53091

FEC ID number of contributing federal political committee

C

Name of Employer

Occupation

Retired

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

25000

Date of Receipt

10 / 20 / 2004

Amount of Each Receipt this Period

25000

Full Name (Last, First, Middle Initial)

B. Michigan Democratic Party

Mailing Address

6016 Townsend St

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing federal political committee

C00031054

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2732500

Date of Receipt

10 / 28 / 2004

Amount of Each Receipt this Period

2382500

Full Name (Last, First, Middle Initial)

C. Newaygo County Democratic Party

Mailing Address

4830 E. 82nd St.

City

Newaygo

State

MI

Zip Code

49337

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

10 / 14 / 2004

Amount of Each Receipt this Period

50000

SUBTOTAL of Receipts This Page (optional)

2457500

TOTAL This Period (last page this line number only)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

Page 2 of 2  
FULL-YEAR RECEIPTS (check only 1976)  
 11a 13  11b 14  11c 16  12 18  17

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NAME OF COMMITTEE (in Full)  
**Second Congressional District - DEMOCRATIC PARTY**

**A.** Full Name (Last, First, Middle Initial)  
**James Burton**

Mailing Address  
**1600 Stafford Drive**

City **Muskegon** State **MI** Zip Code **49445**

FEC ID number of contributing federal political committee: **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) **Rent**

Aggregate Year-to-Date **400.00**

Date of Receipt  
**11** / **04** / **2004**

Amount of Each Receipt this Period  
**400.00**

**B.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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 \_\_\_\_\_

**C.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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) **400.00**

TOTAL This Period (last page this line number only) **24975.00**

**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 1 OF 2				
<input type="checkbox"/> 21a	<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

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NAME OF COMMITTEE (in Full)  
**Second Congressional District - Democratic Party**

**A. Mike Prow**

Full Name (Last, First, Middle Initial)

Address: **635 West 1st St**

City: **Muskegon** State: **MI** Zip Code: **49442**

Purpose of Disbursement: **Security / Govt / Polls**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: **2**

Date of Disbursement: **11 02 2004**

Amount of Each Disbursement this Period: **11500**

Category/Type: **007**

**B. Jim Rowan**

Full Name (Last, First, Middle Initial)

Address: **2408 1st St**

City: **Muskegon Heights** State: **MI** Zip Code: **49829**

Purpose of Disbursement: **Van / Speaker, Polls, Govt**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: **2**

Date of Disbursement: **11 02 2004**

Amount of Each Disbursement this Period: **55000**

Category/Type: **007**

**C. Haley Potts**

Full Name (Last, First, Middle Initial)

Address: **1356 Catherine Ave.**

City: **Muskegon** State: **MI** Zip Code: \_\_\_\_\_

Purpose of Disbursement: **polls, events, gov't**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: **2**

Date of Disbursement: **11 02 2004**

Amount of Each Disbursement this Period: **50000**

Category/Type: **007**

SUBTOTAL of Disbursements This Page (optional) **216500**

TOTAL This Period (last page this line number only)

**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 2 OF 4
	<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"/> 28b <input type="checkbox"/> 28c <input type="checkbox"/> 29	

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NAME OF COMMITTEE (in Full)  
**Second Congressional District Democratic Party**

**A. Patsey Pettit**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 760 Emerald Ave L  
 City: Muskegon State: MI Zip Code: 49843  
 Purpose of Disbursement: Rallies, organizer for rallies  
 Candidate Name: [Blank] Category/Type: 007  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)   
 State: District: 2nd  
 Date of Disbursement: 11/03/2004  
 Amount of Each Disbursement this Period: 630.00

**B. Thrifty Car Rental**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 3146 Henry St.  
 City: Muskegon State: MI Zip Code: 49841  
 Purpose of Disbursement: Transportation to polls  
 Candidate Name: [Blank] Category/Type: 007  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)   
 State: District: 2nd  
 Date of Disbursement: 11/03/2004  
 Amount of Each Disbursement this Period: 939.00

**C. Aquila**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 711 Starlite Dr.  
 City: Benton Harbor State: MI Zip Code: 49022  
 Purpose of Disbursement: office utility expense for Seminars etc  
 Candidate Name: [Blank] Category/Type: 001  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)   
 State: District: 2nd  
 Date of Disbursement: 11/04/2004  
 Amount of Each Disbursement this Period: 448.46

SUBTOTAL of Disbursements This Page (optional) **2012.46**  
 TOTAL This Period (last page the line number only)



**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 3 OF 8
	<input type="checkbox"/> 21a <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"/> 29 <input type="checkbox"/> 29	

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NAME OF COMMITTEE (in Full)  
**Second Congressional District Democratic Party**

**A.**

Full Name (Last, First, Middle Initial): **Wesley Crubier**

Mailing Address: **6121 N. Livermore**

City: **Chicago** State: **IL** Zip Code: **60646**

Purpose of Disbursement: **Reimburse for supplies, equipment +**

Candidate Name: \_\_\_\_\_

Category/Type: **001**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: **2**

Date of Disbursement: **11 07 2009**

Amount of Each Disbursement this Period: **1097.10**

**B.**

Full Name (Last, First, Middle Initial): **Chris Wilcox**

Mailing Address: **1800 Gladys**

City: **Grand Haven** State: **MI** Zip Code: \_\_\_\_\_

Purpose of Disbursement: **reimburse for supplies**

Candidate Name: \_\_\_\_\_

Category/Type: **001**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: **1**

Date of Disbursement: **11 27 2009**

Amount of Each Disbursement this Period: **104.50**

**C.**

Full Name (Last, First, Middle Initial): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: \_\_\_\_\_

Candidate Name: \_\_\_\_\_

Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: \_\_\_\_\_

Amount of Each Disbursement this Period: \_\_\_\_\_

SUBTOTAL of Disbursements This Page (optional) **1201.72**

TOTAL This Period (total page this line number only)

**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)

<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"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (in Full)

Second Congressional District Democratic Party

Full Name (Last, First, Middle Initial)

A. Ottawa County Democratic Party

Date of Disbursement

11 07 2004

Mailing Address

P.O. Box 1792

Amount of Each Disbursement this Period

3000

City

HOLLAND

State

MI

Zip Code

49422-1792

Purpose of Disbursement

(TRANSFER)  
office supplies/phone installation

001

Category/Type

Candidate Name

Kerry

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District: 2

Full Name (Last, First, Middle Initial)

B. Manistee Democratic Party

Date of Disbursement

11 01 2004

Mailing Address

Amount of Each Disbursement this Period

2000.00

City

State

Zip Code

Purpose of Disbursement

(TRANSFER)  
office expenses

012

Category/Type

Candidate Name

Kerry

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District: 2

Full Name (Last, First, Middle Initial)

C. Oceana Democratic Committee

Date of Disbursement

11 20 2004

Mailing Address

6152 Longbridge Rd

Amount of Each Disbursement this Period

22230

City

Pontwater

State

MI

Zip Code

49449

Purpose of Disbursement

(TRANSFER)  
Phone charges + install

012

Category/Type

Candidate Name

Kerry

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District: 2

SUBTOTAL of Disbursements This Page (optional)

252230

TOTAL This Period (last page this line number only)

**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)

<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 25	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (in Full)

Full Name (Last, First, Middle Initial)

A. Julie Dennis

Mailing Address

739 Wilson

City

Muskegon

State

MI

Zip Code

49441

Purpose of Disbursement

Gov - food

Candidate Name

007

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District: 2

Date of Disbursement

11 01 2004

Amount of Each Disbursement This Period

3991.00

Full Name (Last, First, Middle Initial)

B. Rykes Bakery

Mailing Address

1788 Terrace

City

Muskegon

State

MI

Zip Code

49440

Purpose of Disbursement

food/catering

Candidate Name

007

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District: 2

Date of Disbursement

11 02 2004

Amount of Each Disbursement This Period

328.00

Full Name (Last, First, Middle Initial)

C. Greek Tony's Pizzeria

Mailing Address

4543 Grand Haven Rd

City

Muskegon

State

MI

Zip Code

49440

Purpose of Disbursement

food/catering

Candidate Name

007

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District: 2

Date of Disbursement

11 02 2004

Amount of Each Disbursement This Period

2950.00

SUBTOTAL of Disbursements This Page (optional)

7369.00

TOTAL This Period (last page this line number only)

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)

<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"/> 28b	<input type="checkbox"/> 29

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NAME OF COMMITTEE (in full)

Second Congressional District - Democratic Party

Full Name (Last, First, Middle Initial)

A. Patty Bennett

Date of Disbursement

10 18 2004

Mailing Address

1335 Marianne Ave

City

Muskegon

State

MI

Zip Code

49444

Amount of Each Disbursement this Period

3672.00

Purpose of Disbursement

Yard signs

006

Category/Type

Candidate Name

JOHN KERRY

Office Sought:

- House
- Senate
- President

Disbursement For:

- Primary
- General
- Other (specify) ▼

State:

District: 2

Full Name (Last, First, Middle Initial)

E. Everyday People Cafe (catering)

Date of Disbursement

10 25 2004

Mailing Address

11 Center St

City

Douglas

State

MI

Zip Code

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

Food catering

007

Category/Type

Candidate Name

JOHN KERRY

Office Sought:

- House
- Senate
- President

Disbursement For:

- Primary
- General
- Other (specify) ▼

State:

District: 2

Full Name (Last, First, Middle Initial)

C. Katos for Congress

Date of Disbursement

10 25 2004

Mailing Address

3767 Scenic Drive

City

North Muskegon

State

MI

Zip Code

49445

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Campaign supplies

006

Category/Type

Candidate Name

Kenneth Katos

Office Sought:

- House
- Senate
- President

Disbursement For:

- Primary
- General
- Other (specify) ▼

State:

District: 2

SUSTOTAL of Disbursements This Page (optional)

5172.00

TOTAL This Period (last page this line number only)

ITEMIZED DISBURSEMENTS

for each category on the Detailed Summary Page

21b	22	23	24	25	26	27	28a	28b	29	30

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NAME OF COMMITTEE (In Full)  
Second Congressional District Democratic Party

A. Full Name (Last, First, Middle Initial)  
Horowitz, Horowitz + Assoc, LTD

Mailing Address  
25 East Washington St, Suite 905  
City: Chicago State: IL Zip Code: 60602

Purpose of Disbursement: Refund  
Candidate Name: Kerry  
Category Type: 010

Office Sought:  House  Senate  President  
Disturbment For:  Primary  General  Other (specify)

State: District: 2

Date of Disbursement: 11/04/2004  
Amount of Each Disbursement this Period: 60.00

B. Full Name (Last, First, Middle Initial)  
Repp / Dykstra

Mailing Address  
5125 - 134 Ave  
City: Hamilton State: MI Zip Code: 49415

Purpose of Disbursement: refund  
Candidate Name: Kerry  
Category Type: 010

Office Sought:  House  Senate  President  
Disturbment For:  Primary  General  Other (specify)

State: District: 2

Date of Disbursement: 11/04/2004  
Amount of Each Disbursement this Period: 100.00

C. Full Name (Last, First, Middle Initial)  
Indakait II Inc

Mailing Address  
247 Butler St  
City: Seargetuck State: MI Zip Code: 49453

Purpose of Disbursement: Refund  
Candidate Name: Kerry  
Category Type: 010

Office Sought:  House  Senate  President  
Disturbment For:  Primary  General  Other (specify)

State: District: 2

Date of Disbursement: 11/04/2004  
Amount of Each Disbursement this Period: 60.00

SUBTOTAL of Disbursements This Page (optional) ..... 220.00

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

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)

21a  22  23  24  25  
 26  27  28a  28b  28c  29

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NAME OF COMMITTEE (in Full)

Second Congressional District - Democratic Party

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Squawack Meeting

11/04/2004

Mailing Address

P.O. Box 339

City

Douglas

State

MI

Zip Code

49406

Amount of Each Disbursement This Period

100.00

Purpose of Disbursement

Refund

OLD  
Category/  
Type

Candidate Name

Kerry

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. Mailing Address

City

State

Zip Code

Amount of Each Disbursement This Period

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. Mailing Address

City

State

Zip Code

Amount of Each Disbursement This Period

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

100.00

TOTAL This Period (last page this line number only)

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
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