

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED  
FEC MAIL  
OPERATIONS CENTER  
2002 OCT 20 P 12:51

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4MS

00000790 040502 P 223  
ROBERTA A  
BRANCH GREEN  
TYPE CITY REPUBLICAN COMMI  
NO OF  
COUNTY 27  
R MI 49034

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

00000992

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

Feb 20 (M2)  
 Mar 20 (M3)  
 Apr 20 (M4)

May 20 (M5)  
 Jun 20 (M6)  
 Jul 20 (M7)

Aug 20 (M8)  
 Sep 20 (M9)  
 Oct 20 (M10)

Nov 20 (M11) (Non-Election Year Only)  
 Dec 20 (M12) (Non-Election Year Only)

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)  
 Convention (12C)

General (12G)  
 Special (12S)

Runoff (12R)

Election on

In the State of

(d) 90-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

In the State of

5. Covering Period

10/30/2001 through 10/30/2002

through

10/30/2002

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

Roberta A Smith

Signature of Treasurer

*Roberta A Smith*

Date

10/13/2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

Office Use Only

FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

*Branch County Republican Committee*

Report Covering the Period: From: *12/1/2001* To: *9/30/2002*

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <i>2002</i>	<i>2,602</i>	<i>10,447.12</i>
(b) Cash on Hand at Beginning of Reporting Period .....	<i>16,744.82</i>	
(c) Total Receipts (from Line 19) .....	<i>14,337.23</i>	<i>29,248.92</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<i>32,482.55</i>	<i>39,696.04</i>
7. Total Disbursements (from Line 30) .....	<i>18,734.52</i>	<i>26,062.91</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<i>13,748.03</i>	<i>13,633.13</i>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) .....	<i>0</i>	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) .....	<i>0</i>	

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

FEC Form 278 (Revised 1/01)

Page 3

Write or Type Committee Name

Report Covering the Period: From: To:

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) .....		
(ii) Unitemized .....	16,321.91	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	16,321.91	29,843.00
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) .....		
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 36, page 4) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....	158.23	143.74
18. Transfers from Nonfederal Accounts for Joint Activity .....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	16,337.13	29,843.00
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	16,337.13	29,843.00

DETAILED SUMMARY PAGE  
of Disbursements

FEC Form 3X (Revised 1/01)

Page 4

II. 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 .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		
(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 Expenditures Made by Party Committees (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. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) .....		
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30) .....		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 13(d), page 3) .....		
33. Total Contribution Refunds (from Line 28(d)) .....		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....		
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
36. Offset to Operating Expenditures (from Line 15, page 3) .....		
37. Net Operating Expenditures (subtract Line 36 from Line 35) .....		

**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 / OF 13

<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				

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)

*Br. Arch County Republican Com.*

Full Name (Last, First, Middle Initial)

*A. Spender*

Mailing Address

*767 E. Chicago Rd*

City

*Caldwell*

State

*MI*

Zip Code

*49036*

Purpose of Disbursement

*Supplies for 4-14 Restaurant*

Candidate Name

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

*2/8/2002*

Amount of Each Disbursement this Period

*17.48*

Full Name (Last, First, Middle Initial)

*B. Sarno*

Mailing Address

*Battle Creek*

State

*MI*

Zip Code

Purpose of Disbursement

*Supplies for 4-14 Restaurant*

Candidate Name

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

*2/8/2002*

Amount of Each Disbursement this Period

*229.22*

Full Name (Last, First, Middle Initial)

*C. Gordons Food Service*

Mailing Address

*Battle Creek*

State

*MI*

Zip Code

Purpose of Disbursement

*Supplies for 4-14 Rest*

Candidate Name

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

*2/8/2002*

Amount of Each Disbursement this Period

*17.48*

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2 OF 13
	<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"/> 30

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NAME OF COMMITTEE (in Full)  
*Branch County Republican Committee*

A. *Martin*  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: *Chicago Rd*  
 City: *Caldwells* State: *MI* Zip Code: *49036*  
 Purpose of Disbursement: *Supplies for 4-H Fair Post*  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement: *7/28/2002*  
 Amount of Each Disbursement this Period: *103.28*

B. *Jean Martin*  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: *919 Jonesville Rd*  
 City: *Leaning* State: *MI* Zip Code: *49080*  
 Purpose of Disbursement: *Supplies 4-H Fair Postcard*  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement: *7/28/2002*  
 Amount of Each Disbursement this Period: *149.50*

C. *Martin*  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: *Chicago Rd*  
 City: *Caldwells* State: *MI* Zip Code: *49036*  
 Purpose of Disbursement: *Supplies 4-H Fair Postcard*  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement: *7/28/2002*  
 Amount of Each Disbursement this Period: *122.62*

SUBTOTAL of Disbursements This Page (optional) *380.40*  
 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 21	<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

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NAME OF COMMITTEE (in full)  
*Branch County Republican Committee*

A. *Prepaid Card*

Full Name (Last, First, Middle Initial):  
*Prepaid Card*

Mailing Address:  
*Caldwaller*

City: *Caldwaller* State: *MI* Zip Code: *49036*

Purpose of Disbursement: *Start up cost for 4-14 Cafe Restaurant*

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: *8/1/2002*

Amount of Each Disbursement this Period: *230.80*

B. *Cash*

Full Name (Last, First, Middle Initial):  
*Cash*

Mailing Address:  
*Start up cost for 4-14 Cafe Restaurant*

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

Purpose of Disbursement: *Start up cost for 4-14 Cafe Restaurant*

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: *8/1/2002*

Amount of Each Disbursement this Period: *100.00*

C. *Caldwaller Campaign*

Full Name (Last, First, Middle Initial):  
*Caldwaller Campaign*

Mailing Address:  
*Caldwaller*

City: *Caldwaller* State: *MI* Zip Code: *49036*

Purpose of Disbursement: *Start up cost for 4-14 Cafe Restaurant*

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: *8/1/2002*

Amount of Each Disbursement this Period: *4140.80*

SUBTOTAL of Disbursements This Page (optional): *1170.80*

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 Covered Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4 OF 13
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22
	<input type="checkbox"/> 26	<input type="checkbox"/> 27
	<input type="checkbox"/> 28	<input type="checkbox"/> 29
	<input type="checkbox"/> 24	<input type="checkbox"/> 25
	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b

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NAME OF COMMITTEE (in full)  
*Branch County Republican Committee*

A. *Wright Appliances*

Full Name (Last, First, Middle Initial): *Wright Appliances*

Mailing Address: *Chicago Rd.*

City: *Celstwater* State: *MI* Zip Code: *49036*

Purpose of Disbursement: *Compressor for Refrigerator for Pres.*

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

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

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

Date of Disbursement: *8/1/2002*

Amount of Each Disbursement this Period: *825.00*

B. *H-H Fair*

Full Name (Last, First, Middle Initial): *H-H Fair*

Mailing Address: *Coast House*

City: *Celstwater* State: *MI* Zip Code: *49036*

Purpose of Disbursement: *Rest on disbursements H-H Fair Rest.*

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

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

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

Date of Disbursement: *8/3/2002*

Amount of Each Disbursement this Period: *856.00*

C. *Shoppers Market*

Full Name (Last, First, Middle Initial): *Shoppers Market*

Mailing Address: *37 S Monroe*

City: *Celstwater* State: *MI* Zip Code: *49036*

Purpose of Disbursement: *Ad. for H-H Fair Restaurant*

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

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

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

Date of Disbursement: *8/6/2002*

Amount of Each Disbursement this Period: *65.00*

SUBTOTAL of Disbursements This Page (optional): *1,546.00*

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)	PAGE 2 OF 13
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 26a
	<input type="checkbox"/> 28b	<input type="checkbox"/> 25
	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

*Branch County Republican Committee*

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. *Amergas*

Mailing Address: *432 E Chicago*

City: *Calderon* State: *MI* Zip Code: *49036*

Purpose of Disbursement: *Bath gas for 14-H tax Rest*

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

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

Date of Disbursement: *8 6 2002*

Amount of Each Disbursement this Period: *82.00*

B. *Meijer*

Mailing Address: *Chicago Rd*

City: *Calderon* State: *MI* Zip Code: *49036*

Purpose of Disbursement: *Supplies for 4-H Restaurant*

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

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

Date of Disbursement: *8 6 2002*

Amount of Each Disbursement this Period: *464.26*

C. *Lilly Post*

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

City: *Lynn* State: *MI* Zip Code: *49036*

Purpose of Disbursement: *Supplies for Restaurant*

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

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

Date of Disbursement: *8 10 2002*

Amount of Each Disbursement this Period: *389.32*

SUBTOTAL of Disbursements This Page (optional): *1386.02*

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 6 OF 13
	<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	

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NAME OF COMMITTEE (in Full)

A. *Mickela*

Full Name (Last, First, Middle Initial)

Mailing Address

City: *Caldwaller* State: *Mi* Zip Code: *49036*

Purpose of Disbursement: *Break for 4-11 for Restaurant*

Candidate Name(s)

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: *8/5/2002*

Amount of Each Disbursement this Period: *200.00*

Category/Type

B. *Maria Rombrach*

Full Name (Last, First, Middle Initial)

Mailing Address: *Central Road*

City: *Caldwaller* State: *Mi* Zip Code: *49036*

Purpose of Disbursement: *For for 4-11 for Rest.*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: *8/10/2002*

Amount of Each Disbursement this Period: *54.00*

Category/Type

C. *Joan Marin*

Full Name (Last, First, Middle Initial)

Mailing Address: *929 Jonesville Rd.*

City: *Princeton* State: *MI* Zip Code: *49082*

Purpose of Disbursement: *Donation*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: *8/11/2002*

Amount of Each Disbursement this Period: *100.00*

Category/Type

SUBTOTAL of Disbursements This Page (optional): *1154.00*

TOTAL This Period (last page this line number only): *1154.00*

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 17 OF 3
	<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	

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NAME OF COMMITTEE (in full)  
*Branch County Republican Committee*

A. *Kris Paul*

Full Name (Last, First, Middle Initial)

Mailing Address  
*Chicago Rd*

City *Caldwaller* State *MI* Zip Code *49036*

Purpose of Disbursement  
*Donation*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
*8/11/2002*

Amount of Each Disbursement This Period  
*5.00*

B. *Love Pies*

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement  
*Paid for 4th Fair Post*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
*8/11/2002*

Amount of Each Disbursement This Period  
*5.24*

C. *Wally Producers*

Full Name (Last, First, Middle Initial)

Mailing Address  
*Chicago Rd*

City *Caldwaller MI* State *MI* Zip Code *49036*

Purpose of Disbursement  
*Producers for 4th Fair Post*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
*8/11/2002*

Amount of Each Disbursement This Period  
*4.50*

SUBTOTAL of Disbursements This Page (optional) *11.74*

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 3 OF 3
	<input checked="" 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)  
*Branch County Republican Committee*

**A.**

Full Name (Last, First, Middle Initial): *El Nora*

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

City: *Aldwater* State: *MI* Zip Code: *49036*

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

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

Office Sought:  House  Senate  President

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

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

Date of Disbursement: *8/11/2002*

Amount of Each Disbursement this Period: *109.00*

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

**B.**

Full Name (Last, First, Middle Initial): *Joan Mawa*

Mailing Address: *979 Jonesville Rd*

City: *Luning* State: *MI* Zip Code: *49082*

Purpose of Disbursement: *Supplies for 4-11 Fair Restaurant*

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

Office Sought:  House  Senate  President

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

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

Date of Disbursement: *8/11/2002*

Amount of Each Disbursement this Period: *25.28*

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

**C.**

Full Name (Last, First, Middle Initial): *Maizer*

Mailing Address: *Chicago Rd*

City: *Colchester* State: *MI* Zip Code: *49025*

Purpose of Disbursement: *Supplies for 4-11 Fair Rest.*

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

Office Sought:  House  Senate  President

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

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

Date of Disbursement: *8/13/2002*

Amount of Each Disbursement this Period: *409.23*

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

SUBTOTAL of Disbursements This Page (optional): *563.51*

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 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"/> 29

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NAME OF COMMITTEE (In Full)

Branch County Republican Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Amigo

8/19/2002

Mailing Address

432 E Chicago

City

Caldwain

State

MI

Zip Code

48103

Amount of Each Disbursement this Period

34.20

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

B. Gordon Colleges

8/19/2002

Mailing Address

533 Marshall

City

Caldwain

State

MI

Zip Code

48103

Amount of Each Disbursement this Period

47.00

Purpose of Disbursement

Appropriation Information Report

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. State of Michigan

8/15/2002

Mailing Address

City

Lansing

State

MI

Zip Code

Amount of Each Disbursement this Period

870.00

Purpose of Disbursement

Sales tax from sales of cars

Candidate Name

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page only line number only)

951.27

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 checked="" 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

PAGE 11 OF 13

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NAME OF COMMITTEE (In Full)  
*Branch County Republican Committee*

Full Name (Last, First, Middle Initial)  
*A. Farmer Medical Insurance*

Date of Disbursement  
*8/13/2002*

Mailing Address  
*36 Division*

City  
*Coldwater* State  
*Mi* Zip Code  
*49536*

Purpose of Disbursement  
*Fee Insurance on 4-14 Post. Bldg.*

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
*205.00*

Full Name (Last, First, Middle Initial)  
*B. Shoppers Choice*

Date of Disbursement  
*9/2/2002*

Mailing Address  
*Mopson St*

City  
*Caldwell* State  
*Mi* Zip Code  
*49036*

Purpose of Disbursement  
*Restaurant Ad.*

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
*15.00*

Full Name (Last, First, Middle Initial)  
*C. Norman Foods*

Date of Disbursement  
*9/17/2002*

Mailing Address

City  
*Butte Creek* State  
*Mi* Zip Code  
*49006*

Purpose of Disbursement  
*Food Products for 4-11 Year Post.*

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
*2536.99*

SUBTOTAL of Disbursements This Page (optional) *2907.99*

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 7 OF 13
	<input checked="" type="checkbox"/> 21	<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"/> 28
	<input type="checkbox"/> 29	<input type="checkbox"/> 30

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NAME OF COMMITTEE (in Full)  
*Branch County Republican Committee*

A. *Chadwick, Jay*

Full Name (Last, First, Middle Initial)

Mailing Address: *17 E. Park*

City: *Caldwells* State: *Mi* Zip Code: *49031*

Purpose of Disbursement: *Jack & H-M Juice Restaurant*

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

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

Office Sought:  House  Senate  President

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

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

Date of Disbursement: *9/2/2002*

Amount of Each Disbursement this Period: *218.00*

B. *Postage*

Full Name (Last, First, Middle Initial)

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

City: *Caldwells* State: *Mi* Zip Code: *49031*

Purpose of Disbursement: *Mailing*

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

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

Office Sought:  House  Senate  President

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

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

Date of Disbursement: *9/13/2002*

Amount of Each Disbursement this Period: *8.00*

C. *Michigan State Party*

Full Name (Last, First, Middle Initial)

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

City: *Lansing* State: *Mi* Zip Code: *48206*

Purpose of Disbursement: *Donation*

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

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

Office Sought:  House  Senate  President

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

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

Date of Disbursement: *9/13/2002*

Amount of Each Disbursement this Period: *45.00*

SUBTOTAL of Disbursements This Page (optional) *478.00*

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)					PAGE / 2 OF 3	
<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"/> 28	<input type="checkbox"/> 29
<input type="checkbox"/> 20	<input type="checkbox"/> 21a	<input type="checkbox"/> 26a	<input type="checkbox"/> 26b	<input type="checkbox"/> 26c	<input type="checkbox"/> 27	<input type="checkbox"/> 28	<input type="checkbox"/> 29	<input type="checkbox"/> 30

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NAME OF COMMITTEE (In Full)  
*Branch County Republican Committee*

**A.** *Ammerman*

Full Name (Last, First, Middle Initial)

Mailing Address

City *Caldwells* State *Mo* Zip Code *64036*

Purpose of Disbursement *for 4-11 Long Restaurant*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: *9* / *18* / *2002*

Amount of Each Disbursement this Period: *34.40*

**B.** *Verigin*

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement *Restaurant Phone*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: *9* / *23* / *2002*

Amount of Each Disbursement this Period: *95.01*

**C.** *Andrew Raczkowski*

Full Name (Last, First, Middle Initial)

Mailing Address *PO Box 14082*

City *Lansing* State *MI* Zip Code *48901*

Purpose of Disbursement

Candidate Name *Andrew Raczkowski*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: *9* / *23* / *2002*

Amount of Each Disbursement this Period: *100.00*

SUBTOTAL of Disbursements This Page (optional) *129.41*

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 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				

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NAME OF COMMITTEE (In Full)

**A.**

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

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

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

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

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

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

Date of Disbursement:  /  /

Amount of Each Disbursement this Period:

Category/Type:

**B.**

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

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

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

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

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

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

Date of Disbursement:  /  /

Amount of Each Disbursement this Period:

Category/Type:

**C.**

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

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

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

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

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

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

Date of Disbursement:  /  /

Amount of Each Disbursement this Period:

Category/Type:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

Federal Election Commission

### ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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<input type="checkbox"/> Hand Delivered	Date of Receipt
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<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>ja</i> PREPARER	10/20/02 DATE PREPARED

(5/2000)

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