

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER Office Use Only

1 NAME OF COMMITTEE (In full) USE FED MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines. DANIEL BROOK, TREASURER

FIRST CONGRESSIOANAL DISTRICT REPUBLICAN COMM

ADDRESS (number and street) 107 CAMPUS AVENUE

CHESTER TOWN

Check if different than previously reported. (ADC) MD 21162-01-116512

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

000005975

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), 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)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 10/01/2002 through 12/31/2002

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 DANIEL BROOK

Signature of Treasurer Daniel Brook Date 01/14/2003

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

First Congressional District Republican Committee (State of Maryland)

C - 00005975

Report Covering the Period:

From:

12/31/2002

To:

12/31/2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,		<i>922.76</i>
(b) Cash on Hand at Beginning of Reporting Period	<i>953.01</i>	
(c) Total Receipts (from Line 19)	<i>0</i>	<i>150.00</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<i>953.01</i>	<i>1072.76</i>
7. Total Disbursements (from Line 30)	<i>100.00</i>	<i>129.75</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	<i>853.01</i>	<i>853.01</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
899 E Street, NW
Washington, DC 20463

Toll Free 800-424-9630
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1-01)

Page 3

Write or Type Committee Name

First Congressional District Republican Committee (State of Maryland) C-00005975

Report Covering the Period: From: 1.0.01.2002 To: 1.2.31.2002

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		
(iii) TOTAL (add Lines 11(a)(i) and (ii)		150.00
(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)		150.00
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 3E, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)		150.00
20. Total Federal Receipts (subtract Line 18 from Line 19)		150.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Revised 1/01)

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(3)) (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 11(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. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35)		

J.P. O'D.
J.P. O'D.

1997.5
1997.5

~~NONE~~

~~NONE~~

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

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) *C-00005975*
First Congressional District Republican Committee (State of Maryland)

A.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee: *MD00005975*

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date _____

Date of Receipt _____

Amount of Each Receipt this Period _____

B.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee: *C1*

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: *C1*

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) _____

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate subtotals for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1 OF 1
	<input type="checkbox"/> 24 <input type="checkbox"/> 26	<input type="checkbox"/> 25 <input type="checkbox"/> 27
	<input type="checkbox"/> 23 <input type="checkbox"/> 28a	<input type="checkbox"/> 24 <input type="checkbox"/> 28b
	<input type="checkbox"/> 25 <input type="checkbox"/> 28c	<input type="checkbox"/> 26 <input type="checkbox"/> 28d

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) *C-00005975*
First Congressional District Republican Committee (State of Maryland)

A.

Full Name (Last, First, Middle Initial) *Annie's Paramount Steak House*

Mailing Address *500 N. Kent Narrows Way*

City *Grasonville, MD* State *MD* Zip Code *21638*

Purpose of Disbursement *Quarterly Meeting of Committee (rental meeting room and refreshments)*

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *Quarterly Meeting*

State: _____ District: _____

Date of Disbursement *11/13/02*

Amount of Each Disbursement This Period *100.00*

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 _____

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 _____

SUBTOTAL of Disbursements This Page (optional) _____

TOTAL This Period (last page this line number only) *100.00*

Federal Election Commission

**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 checked="" type="checkbox"/>	First Class Mail	POSTMARKED
<input type="checkbox"/>	Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/>	No Postmark	
<input checked="" 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	
<input checked="" type="checkbox"/>		
PREPARER		11/24/03 DATE PREPARED