

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER

Office Use Only

2005 JAN 24 A 9:50

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

FIRST CONGRESSIONAL DISTRICT DEM COMMITTEE

ADDRESS (number and street)

112492 PINE RIDGE

Check if different than previously reported. (ACC)

CHARLEVOIX

MI 49720

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00624455

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)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

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

5. Covering Period

07 / 01 / 2005

through

12 / 31 / 2005

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 KAY CHASE

Signature of Treasurer

Kay Chase

Date

01 / 10 / 2006

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
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FIRST CONGRESSIONAL DISTRICT Democratic Committee

Report Covering the Period: From: 07 01 2005 To: 12 31 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2005		18,204.3
(b) Cash on Hand at Beginning of Reporting Period.....	1,696.81	
(c) Total Receipts (from Line 19).....	25.00	1,126.38
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1,721.81	2,946.81
7. Total Disbursements (from Line 31).....	1,494.8	1,374.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1,572.33	1,572.33
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	- 0 -	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	- 0 -	

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 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

FIRST CONGRESSIONAL DISTRICT DEMOCRATIC Committee

Report Covering the Period: From: 1.7 ' 01 ' 2005 To: 12 ' 31 ' 2005

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).....	2500	2500
(ii) Unitemized.....	-0-	-0-
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2500	2500
(b) Political Party Committees.....	-0-	10000
(c) Other Political Committees (such as PACs).....	-0-	100000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	2500	112500
12. Transfers From Affiliated/Other Party Committees.....	-0-	-0-
13. All Loans Received.....	-0-	-0-
14. Loan Repayments Received.....	-0-	-0-
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	-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 Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	-0-	-0-
(b) Levin Funds (from Schedule H5).....	-0-	-0-
(c) Total Transfers (add 18(a) and 18(b))..	-0-	-0-
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2550	112638
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2500	112638

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	- 0 -	- 0 -
(ii) Non-Federal Share.....	- 0 -	- 0 -
(b) Other Federal Operating Expenditures	149.48	149.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	149.48	849.48
22. Transfers to Affiliated/Other Party Committees.....	- 0 -	125.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	- 0 -	400.00
24. Independent Expenditures (use Schedule E)	- 0 -	- 0 -
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	- 0 -	- 0 -
26. Loan Repayments Made.....	- 0 -	- 0 -
27. Loans Made.....	- 0 -	- 0 -
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	- 0 -	- 0 -
(b) Political Party Committees	- 0 -	0 -
(c) Other Political Committees (such as PACs).....	- 0 -	- 0 -
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	- 0 -	0 -
29. Other Disbursements	- 0 -	- 0 -
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	- 0 -	- 0 -
(ii) "Levin" Share	- 0 -	- 0 -
(b) Federal Election Activity Paid Entirely With Federal Funds	- 0 -	- 0 -
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	- 0 -	- 0 -
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	149.48	1,374.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	149.48	1,374.48

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	25.00	1,125.00
34. Total Contribution Refunds (from Line 28(d))	-	-
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25.00	1,125.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	149.48	849.48
37. Offsets to Operating Expenditures (from Line 15, page 3)	-	-
38. Net Operating Expenditures (subtract Line 37 from Line 36)	149.48	849.48

25033354000

**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 1 OF 1

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

FIRST CONGRESSIONAL DISTRICT DEMOCRATIC COMMITTEE

A. Full Name (Last, First, Middle Initial)
LEDDY ROBERT L

Mailing Address
4905 BERL DRIVE

City SAGINAW State MI Zip Code 49804

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500

Date of Receipt
09 / 29 / 2005

Amount of Each Receipt this Period
2500

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) 2500

TOTAL This Period (last page this line number only) 2500

26039954001

**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	<input type="checkbox"/> 30b

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)

FIRST CONGRESSIONAL DISTRICT DEMOCRATIC COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHASE KAY A

Mailing Address

12492 DINE RIDGE

City

CHARLEVOIX

State

MI

Zip Code

49720

Purpose of Disbursement

Reimburse EXPENSES (OFFICE)

Candidate Name

NA

601
Category/
Type

Date of Disbursement

12 / 15 / 2005

Amount of Each Disbursement this Period

50.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

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

200309054002

**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 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"/> 30b

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)

FIRST CONGRESSIONAL DISTRICT DEMOCRATIC COMMITTEE

Full Name (Last, First, Middle Initial)

A.		Date of Disbursement	
A+L GROCERY		MM / DD / YYYY 07 / 16 / 2005	
Mailing Address		Amount of Each Disbursement this Period	
N 7627 ARBUTUS ST		99.48	
City	State	Zip Code	Category/ Type
GUTRAIN	ME	49806	
Purpose of Disbursement		003	
Refreshments for training			
Candidate Name			
NA			
Office Sought:	House	Disbursement For:	
<input type="checkbox"/>	Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/>	President	<input type="checkbox"/> Other (specify) ▼	
State:	District:		

B.		Date of Disbursement	
Full Name (Last, First, Middle Initial)		MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City			
State	Zip Code	Category/ Type	
Purpose of Disbursement			
Candidate Name			
Office Sought:	House	Disbursement For:	
<input type="checkbox"/>	Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/>	President	<input type="checkbox"/> Other (specify) ▼	
State:	District:		

C.		Date of Disbursement	
Full Name (Last, First, Middle Initial)		MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City			
State	Zip Code	Category/ Type	
Purpose of Disbursement			
Candidate Name			
Office Sought:	House	Disbursement For:	
<input type="checkbox"/>	Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/>	President	<input type="checkbox"/> Other (specify) ▼	
State:	District:		

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

20050809

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 type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label	<input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery	<input type="checkbox"/>
<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

fe1
 PREPARER

1/24/06
 DATE PREPARED

2005054004