

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED  
FEDERAL  
OPERATIONS CENTER

APR 15 4:09 PM '04

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

ADAM FISHER FOR CONGRESS

ADDRESS (number and street)

14251 BUEST. HIGHWAY

Check if different than previously reported. (NCC)

SALISBURY

NC

25145

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

0 TO BE ASSIGNED

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NC

12

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

X

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

In the State of

5. Covering Period

01 01 2004

through

03 31 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

MAUREEN CORONA

Signature of Treasurer

Maureen Corona

Date

04 12 2004

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 3 (Revised 03/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

ADA M FISHER FOR CONGRESS

Report Covering the Period:

From:

01 01 2004

To:

03 31 2004

COLUMN A  
This Period

COLUMN B  
Election Cycle-to-Date

## 6. Net Contributions (other than loans):

(a) Total Contributions  
(other than loans) (from Line 11(e))...

26,270.00

(b) Total Contribution Refunds  
(from Line 20(d)) .....

-

(c) Net Contributions (other than loans)  
(subtract Line 6(b) from Line 6(a)).....

26,270.00

## 7. Net Operating Expenditures:

(a) Total Operating Expenditures  
(from Line 17) .....

24,000.00

(b) Total Offsets to Operating  
Expenditures (from Line 14) .....

-

(c) Net Operating Expenditures  
(subtract Line 7(b) from Line 7(a)) .....

24,000.00

8. Cash on Hand at Close of  
Reporting Period (from Line 27) .....

3,349.60

9. Debts and Obligations Owed TO  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

-

10. Debts and Obligations Owed BY  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

-

For further information contact:

Federal Election Commission  
899 E Street, NW  
Washington, DC 20463

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

ADA M FISHER FOR CONGRESS

Report Covering the Period:

From:

01 01 2004

To:

03 31 2004

I RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
<b>(a) Individuals/Persons Other Than Political Committees</b>		
(i) Rerouted (see Schedule A) .....	830.00	
(ii) Unrecorded .....	1,859.00	
(iii) TOTAL of contributions from individuals .....		
<b>(b) Political Party Committees .....</b>		
<b>(c) Other Political Committees (such as PACs) .....</b>		
<b>(d) The Candidate .....</b>		
<b>(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(ii), (b), (c), and (d))</b> .....	<b>2,689.00</b>	
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>		
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate .....	3,516.00	
(b) All Other Loans .....		
<b>(c) TOTAL LOANS (add Lines 13(a) and (b))</b> .....	<b>3,516.00</b>	
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Refractors, etc.) .....</b>		
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>		
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)</b> .....	<b>6,205.00</b>	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES .....	2,900.00	4,569.47
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	-	-
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate .....	-	-
(b) Of All Other Loans .....	-	-
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) .....	-	-
20. REFUNDS OF CONTRIBUTIONS FOR:		
(a) Individuals/Persons Other Than Political Committees .....	-	-
(b) Political Party Committees .....	-	-
(c) Other Political Committees (such as PACs) .....	-	-
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) .....	-	-
21. OTHER DISBURSEMENTS .....	5,045.34	9,474.93
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	7,445.34	14,049.40

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	4,589.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 21, page 3) .....	6,205.00
25. SUBTOTAL (add Line 23 and Line 24) .....	10,794.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....	7,445.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (transfer Line 26 from Line 25) .....	3,349.60

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

Use separate schedules for each category of the Detailed Statutory Page		FOR LINE NUMBER: (check only one)		PAGE 1 OF 2	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 15

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)  
ADA M. FISHER for Congress

Full Name (Last, First, Middle Initial) <u>A. Fox, Virginia</u>		Date of Receipt M D Y <u>03 29 2004</u>
Mailing Address <u>11625 Hwy 1035</u>		Amount of Each Receipt this Period <u>250.00</u>
City <u>Panner Elk</u>	State Zip Code <u>NC 27665</u>	
FEC ID number of contributing federal political committee <u>C</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(4)(1))
Name of Employer <u>Self</u>	Occupation <u>Politician</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <u>250.00</u>	

Full Name (Last, First, Middle Initial) <u>B.</u>		Date of Receipt M D Y 
Mailing Address 		Amount of Each Receipt this Period 
City 	State Zip Code 	
FEC ID number of contributing federal political committee <u>C</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(4)(1))
Name of Employer 	Occupation 	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 	

Full Name (Last, First, Middle Initial) <u>C.</u>		Date of Receipt M D Y 
Mailing Address 		Amount of Each Receipt this Period 
City 	State Zip Code 	
FEC ID number of contributing federal political committee <u>C</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(4)(1))
Name of Employer 	Occupation 	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 	

SUBTOTAL of Receipts This Page (optional)	<u>250.00</u>
TOTAL This Period (fill page two line number only)	<u>250.00</u>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)				PAGE 2 OF 2
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15		
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14			

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NAME OF COMMITTEE (in full)  
ADA M. FISHER for CONGRESS

**A. DANIELS, ANTHONY**  
Full Name (Last, First, Middle Initial)

Mailing Address  
1314 D. S. Federal St  
Chicago, IL 60605  
City State Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer: New Concept Development  
Occupation: Director, Developer

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

Election Cycle-to-Date: 250.00

Date of Receipt  
01 10 2007

Amount of Each Receipt This Period  
250.00

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a)(441a-1)

**B. MORGAN, SUSAN**  
Full Name (Last, First, Middle Initial)

Mailing Address: 55th Street, Asheville, NC  
Morganton, NC  
City State Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer: S&P  
Occupation: Director, Restaurant

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

Election Cycle-to-Date: 350.00

Date of Receipt  
02 10 2007

Amount of Each Receipt This Period  
210.00

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a)(441a-1)

**C. MORGAN, SUSAN**  
Full Name (Last, First, Middle Initial)

Mailing Address: 55th Street, Asheville, NC  
Morganton, NC  
City State Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer: S&P  
Occupation: Director, Restaurant

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

Election Cycle-to-Date: 350.00

Date of Receipt  
03 14 2007

Amount of Each Receipt This Period  
120.00

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a)(441a-1)

SUBTOTAL of Receipts This Page (optional) 580.00

TOTAL This Period (last page this line number only)

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

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"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 13a	<input type="checkbox"/> 21
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	

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NAME OF COMMITTEE (in Full)  
**ADA M. FISHER FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial) **WESTP**

Mailing Address **1105 Statesville Road**

City **Salisbury, NC** State **NC** Zip Code **28155**

Purpose of Disbursement **Political Ads**

Candidate Name **Dr. Ada M. Fisher** Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **▼**

State: **NC** District: **12th**

Date of Disbursement: **01 28 2004**

Amount of Each Disbursement this Period: **2,000.00**

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial) **(Adm) Campaign, General**

Mailing Address **P.O. Box 10588**

City **Greensboro, NC** State **NC** Zip Code **27404**

Purpose of Disbursement **1 month salary**

Candidate Name **Dr. Ada M. Fisher** Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **▼**

State: **NC** District: **12th**

Date of Disbursement: **01 30 2004**

Amount of Each Disbursement this Period: **2,000.00**

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial) **(Adm) Campaign, General**

Mailing Address **P.O. Box 10588**

City **Greensboro, NC** State **NC** Zip Code **27404**

Purpose of Disbursement **Expenses**

Candidate Name **Dr. Ada M. Fisher** Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **▼**

State: **NC** District: **12th**

Date of Disbursement: **03 02 2004**

Amount of Each Disbursement this Period: **2,000.00**

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) **2,400.00**

**TOTAL** This Period (last page this line number only) **2,400.00**



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/Priority/Express Mail	Postmarked (R/C) <i>4-14-04</i>
<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>At</i>	<i>4-15-04</i>
PREPARER	DATE PREPARED

(2/2004)