

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 OCT 23 P 12:16

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>Bob Shrauger for Congress</b>	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. <b>6152 Longbridge Road</b>	
CITY, STATE and ZIP CODE <b>Pentwater, MI 49449</b>	STATE/DISTRICT <b>MI/2nd</b>
2. FEC IDENTIFICATION NUMBER <b>H8M102063</b>	
3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

### 4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input checked="" type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> 30-Day Post-Election Report following the General Election
<input type="checkbox"/> January 31 Year End Report	on _____ in the State of _____
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for  Primary Election  General Election  Special Election  Runoff Election

### SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<b>7/20/00 through 9/30/00</b>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	<b>49,268.25</b>	<b>77,418.40</b>
(b) Total Contribution Refunds (from Line 20(d))	—	—
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	<b>49,268.25</b>	<b>77,418.40</b>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<b>33,614.43</b>	<b>70,472.84</b>
(b) Total Offsets to Operating Expenditures (from Line 14)	—	—
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	<b>33,614.43</b>	<b>70,472.84</b>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<b>20,976.01</b>	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-694-1100
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)	<b>31,400</b>	

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 <b>Roger Law</b>	Date <b>10/12/00</b>
Signature of Treasurer <i>Roger Law</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §487g.

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**FEC FORM 3**  
(revised 4/87)

# DETAILED SUMMARY PAGE

of Receipts and Disbursements  
(Page 2, FEC FORM 3)

Name of Committee (In Full)	Report Covering the Period:	
<b>Bob Shrauger for Congress</b>	From: <b>7/20/00</b>	To: <b>9/30/00</b>
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	18,294.42	
(ii) Unitemized	25,479.83	
(iii) Total of contributions from individuals	38,774.25	59,086.50
(b) Political Party Committees	700.00	700.00
(c) Other Political Committees (such as PACs)	11,650.00	16,650.00
(d) The Candidate	644.00	981.90
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	49,268.25	77,418.40
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	-	-
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate	-	10,000.00
(b) All Other Loans	-	-
(c) TOTAL LOANS (add 13(a) and (b))	-	10,000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	-	-
<b>15. OTHER RECEIPTS (Dividends, interest, etc.)</b>	25.17	58.19
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	49,293.42	87,476.59
II. DISBURSEMENTS		
<b>17. OPERATING EXPENDITURES</b>	33,614.43	70,472.84
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	-	-
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate	-	-
(b) Of All Other Loans	-	-
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	-	-
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees	-	-
(b) Political Party Committees	-	-
(c) Other Political Committees (such as PACs)	-	-
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	-	-
<b>21. OTHER DISBURSEMENTS</b>	-	-
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	33,614.43	70,472.84

### III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	5,297.02	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	49,293.42	
25. SUBTOTAL (add Line 23 and Line 24)	\$	54,590.44	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	33,614.43	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	20,976.01	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4  
FOR LINE NUMBER 11(A)(1)

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)

Bob Shrauger for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dean Owen Garn 2143 Sandcrest St. Jenison, MI 49429	retired	7/29/00	\$ 340.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation machinist	Aggregate Year-to-Date > \$ 640.42	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jay C. Petter 5662 Longbridge Rd. Pentwater, MI 49449	Pentwater Wire	8/16/00 7/30/00	\$ 250.00 \$ 600.00 <i>General May</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sylvia Shrauger 6152 Longbridge Rd. Pentwater, MI 49449	Cottage Garden Cafe	9/23/00	\$ 280.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Part Owner	Aggregate Year-to-Date > \$ 280.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bnd Fitch, Patricia Fitch 5958 W. Sunset Lane Pentwater, MI 49449	retired	9/24/00	\$ 324.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 574.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shirley M. Rouse 420 Chester Pentwater, MI 49449	retired	7/5/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Warren E. Rouse 420 Chester Pentwater, MI 49449	retired	7/5/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louisa Meyer 5230 Lattin Rd. Pentwater, MI 49449	retired	7/21/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional) .....

\$ 2,294.42

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

SCHEDULE A

ITEMIZED RECEIPTS

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) **Bob Shranger for Congress**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald G. Jennings 4044 College Ave Manistee, MI	retired	7/30/00	300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300.00	
<del>B. Full Name, Mailing Address and ZIP Code</del>	<del>Name of Employer</del>	<del>Date (month, day, year)</del>	<del>Amount of Each Receipt this Period</del>
<del>Kevin McCraskey 1440 Peck St. Muskegon, MI 49441</del>	<del>Self</del>	<del>8/1/00</del>	<del>500.00</del>
<del>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</del>	<del>Occupation Lawyer</del>	<del>Aggregate Year-to-Date &gt; \$ 500.00</del>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Milton J. Nickwama 2421 Central Ave. Holland, MI 49424	Lonaco Hunt	7/28/00 9/1/00	Pr: 200.00 Gen: 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation writer	Aggregate Year-to-Date > \$ 450.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elspeth G. Bobbs 630 E. Alameda Santa Fe, NM 87501	Self	8/3/00	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Property manager	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward O. Moody 12 Edgehill Rd. Little Rock, AR 72207	Self	8/2/00	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation lawyer	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Mallin 110 E 59th St. New York, NY 10022	Self	8/8/00	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$ 250	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Milton J. Nickwama 2421 Central Ave. Holland, MI 49424	Lonaco Hunt	8/9/00	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation writer	Aggregate Year-to-Date > \$ 1,150.00	

SUBTOTAL of Receipts This Page (optional) ..... \$ 2,000.00

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 3 OF 4  
FOR LINE NUMBER 11(A)(L)

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)

Bob Shranger for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peggy Jensen 1710 Beach St. Muskegon, MI 49441	self	8/25/00	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESS manager	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gloria - Jean B. Pataky 1921 Crestwood Lane Muskegon, MI 49441	-	8/3/00	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: -	Aggregate Year-to-Date > \$ 200.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marilynn J. Cobb 4101 Lakeridge Dr. Holland, MI 49424	home maker retired	8/3/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: -	Aggregate Year-to-Date > \$ 2,000.00 (1,000.00 Primary)	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norman B. Cobb 4101 Lakeridge Dr. Holland, MI 49424	self	8/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: business consultant	Aggregate Year-to-Date > \$ 2,000.00 (1,000 Primary)	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Randall G. Baidas 6681 Sunset Concourse Holland, MI 49423-8958	-	8/31/00	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: retired	Aggregate Year-to-Date > \$ 300.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Kutsche 220 Paris Ave Grand Rapids, MI 49503	-	8/29/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: retired	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Margaret Kazarinoff P.O. Box 437 Pentwater, MI 49449-0437	retired	9/14/00	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: -	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 4  
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

Bob Shrauger for Congress

A. Full Name, Mailing Address and ZIP Code A. Newton Dilley 400 Michigan National Tower 77 Monroe Center Grand Rapids, MI 49503	Name of Employer Self	Date (month, day, year) 8/28/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation lawyer	Aggregate Year-to-Date > \$ 400.00	
B. Full Name, Mailing Address and ZIP Code Robert V. Gunnell 1035 E. Wilcox Ave. White Cloud, MI 49349	Name of Employer -	Date (month, day, year) 9/13/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code Waldemar A. Palutke 9425 Whispering Sands Pt. West Olive, MI 49760	Name of Employer Self	Date (month, day, year) 8/31/00	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$ 550.00	
D. Full Name, Mailing Address and ZIP Code David L. Roseman 4629 N. Ridge Rd Mears, MI	Name of Employer Self	Date (month, day, year) 8/22/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Software developer	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code S. William Seely 6800 N. Orange St Pentwater, MI 49449-2574	Name of Employer retired	Date (month, day, year) 8/27/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation -	Aggregate Year-to-Date > \$ 300	
F. Full Name, Mailing Address and ZIP Code William Hecht 311 Aurelia Court BK04, NY 11210	Name of Employer retired	Date (month, day, year) 9/3/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 750.00	
G. Full Name, Mailing Address and ZIP Code Walter V. Ligon P.O. Box 476 Kingsland, TX 78639-0476	Name of Employer Retired	Date (month, day, year) 9/19/00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) .....

2,550.00

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

13,294.42

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 11 (A)

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NAME OF COMMITTEE (in Full)

Bob Shrauger for Congress

A. Full Name, Mailing Address and ZIP Code

Barry County Democratic Committee  
P.O. Box 301  
Hastings, MI 49058

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Occupation

9/13/00

200.00

Receipt For:

Other (specify):

Primary

General

Aggregate Year-to-Date \$ 200.

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Occupation

Receipt For:

Other (specify):

Primary

General

Aggregate Year-to-Date \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Occupation

Receipt For:

Other (specify):

Primary

General

Aggregate Year-to-Date \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Occupation

Receipt For:

Other (specify):

Primary

General

Aggregate Year-to-Date \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Occupation

Receipt For:

Other (specify):

Primary

General

Aggregate Year-to-Date \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Occupation

Receipt For:

Other (specify):

Primary

General

Aggregate Year-to-Date \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Occupation

Receipt For:

Other (specify):

Primary

General

Aggregate Year-to-Date \$

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

200.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 11(C)

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NAME OF COMMITTEE (in Full)

Bob Shrauger for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
IBEW - C.I.P.E. - Local 275 1125 15th St. NW Washington, DC 20005	1400 N. 64th Ave Coopersville, MI 49404	8/8/00	\$ 2,500.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 2,500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
United Food + Commercial Workers 3310 Eagle Park NE Grand Rapids MI 49525	Local 957	8/15/00	1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
I AM AW - District Lodge 97 490 W. Western Ave. Muskegon, MI 49440		8/22/00	5,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 5,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michigan Boilermakers PAC 5932 Chase Rd Dearborn, MI 48126		9/6/00	2,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Choice Action Network PAC P.O. Box 103 Montague, MI 49437		9/19/00	650.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 650.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Macroskey Law Firm PAC 1440 Peck St. Muskegon, MI 49444		8/1/00	500
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$ 11,650.00

TOTAL This Period (last page this line number only)

\$ 11,650.00



SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 11(a)

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NAME OF COMMITTEE (in Full)

Bob Shrauger for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bob Shrauger 6152 Longbridge Rd. Pentwater, MI Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self	9/30/00	\$644.00
Occupation: Lawyer		Aggregate Year-to-Date \$ 981.90	
<del>.....</del>			
<del>.....</del>			
<del>.....</del>			
<del>.....</del>			
<del>.....</del>			
<del>.....</del>			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

644.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Bob Shrauger for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Huntington Bank Pentwater, MI 49449	BANK checking account charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/17/00	20.00
B. Full Name, Mailing Address and ZIP Code Kyle Triplett, 40 PAC Fundraising 2440 Fox Run Wyoming, MI 49509	Fundraising Services Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7/21; 8/14; 8/18; 8/25; 9/1 + 9/16/00	Amount of Each Disbursement This Period 6225.43 1,000.00 1,000.00 165.10 1,000.00 579.92
C. Full Name, Mailing Address and ZIP Code Political Action Consulting Services 2440 Fox Run Wyoming, MI 49509	Political consulting and Fundraising Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7/28; 7/28; 8/4; 8/25; 9/1 + 9/16/00	Amount of Each Disbursement This Period 1,400.00 94.33 603.27 807.79 500.00 568.46
D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Pentwater, MI	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/6/00	744.81
E. Full Name, Mailing Address and ZIP Code Ameritech Bill Payment Center Saginaw, MI 48663-0023	Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/24/00	1,207.18
F. Full Name, Mailing Address and ZIP Code a) Doo Drop Inn 2710 Henry Muskegon, MI 49441 b) Beechwood Inn P.O. Box 8246 Holland, MI 49424	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/15/00 8/23/00	Amount of Each Disbursement This Period a) 800.00 b) 1,321.70
G. Full Name, Mailing Address and ZIP Code Zeeland Schools Zeeland, MI 49464	Room rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/18/00	24.00
H. Full Name, Mailing Address and ZIP Code Oceana Herald Journal Shelby, MI 49455	Advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/6/00	87.50
I. Full Name, Mailing Address and ZIP Code Patriot Signage 1001 2nd Ave. Dayton Ky 41074	Yard signs Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/15/00	4,218.00

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

19,325.03

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 3  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Bob Shranger for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lamar Billboards 4898 Quarterline Rd. Muskegon, MI 49444	Billboards Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/00	\$5,368.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Swift Printing 404 Bridge St. Grand Rapids, MI 49504	Printing Brochures Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/31/00 9/22/00 9/28/00	3,137.60 137.80 3,137.60
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Claybanks Township Claybanks Township 7577 W. Cleveland New Era, MI 49446	Absent Voter List Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/00	10.55
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Shranger 6152 Longbridge Rd. Pentwater, MI 49449	reimbursement for supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/00	217.81
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Patricia Fitch 5958 W. Sunset Lane Pentwater, MI 49449	reimbursement for supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/00	171.69
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Phyllis Murch 7490 N. 45 Rd Manton, MI 49663	Fundraiser expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/27/00	65.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jean Trump Country Club Dr. Muskegon, MI 49444	School library rental Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/27/00	140.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dean Earn 2143 Sandcrest St. Jannison, MI 49428	Caps, shirts - Logos Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/00	340.42
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bentwater Wire Jay C. Pether 5662 Longbridge Rd Pentwater, MI 49449	Sign wires Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/00	250.00

SUBTOTAL of Disbursements This Page (optional)

12,976.49

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3  
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Bob Shrauger for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Betty Ligon 7180 S. Lakeshore Dr. Pentwater, MI 49449	photocopies, envelopes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/00	\$ 61.83
B. Full Name, Mailing Address and ZIP Code Sylvia Shrauger 6152 Longbridge Rd. Pentwater, MI 49449	Fundraising Jimmy Donkey tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/00	\$ 280.00
C. Full Name, Mailing Address and ZIP Code Patricia Fitch 5958 W. Sunset Lane Pentwater, MI 49449	Fundraiser - food, paper plates - postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/00	324.00
D. Full Name, Mailing Address and ZIP Code Bob Shrauger 6152 Longbridge Rd. Pentwater, MI 49449	Telephone expense Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/00	644.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

6,309.83

TOTAL This Period (last page this line number only)

33,614.43

**SCHEDULE C**  
(Revised 3/80)

**LOANS**

Name of Committee (in Full)

**Bob Shrauger for Congress**

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Bob Shrauger - personal funds (not borrowed) 6152 Longbridge Rd. Pentwater, MI 49449	20,000 5,000	3,600 —	16,400 5,000

Election:  Primary  General  Other (specify):

Secured **no**

Terms: Date Incurred 8/3/98 \$ 1,400; Date Due on demand Interest Rate 0 % (applies) 5000  
1/5/98 \$ 5000; 10/5/98 \$ 10,000; 12/1/99 \$ 5000

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$
2. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$
3. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$

B. Full Name, Mailing Address and ZIP Code of Loan Source  
Bob Shrauger - personal funds (not borrowed)  
6152 Longbridge Rd.  
Pentwater, MI 49449

Original Amount of Loan  
5,000  
5,000

Cumulative Payment To Date  
—  
—

Balance Outstanding at Close of This Period  
5,000  
5,000

Election:  Primary  General  Other (specify):

Secured **no**

Terms: Date Incurred 11/2/00 \$ 5000; Date Due on demand Interest Rate 0 % (applies) 5000

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$
2. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$
3. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$

SUBTOTALS This Period This Page (optional) .....

TOTALS This Period (last page in this fine only) .....

31,400

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	
J.G. PREPARER	10-23-06 DATE PREPARED