

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2008 OCT 30 P 12:53

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Bob Strauger for Congress

ADDRESS (number and street) Check if different than previously reported.
6152 Longbridge Road

CITY, STATE and ZIP CODE **Pewaukee, MI 49449** STATE/DISTRICT **MI/2nd**

2. FEC IDENTIFICATION NUMBER
H8 MI 02063

3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

- April 15 Quarterly Report
- 12-Day Pre-Election Report for the general (Type of Election)
election on 11/7/00 in the State of Michigan
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- 90-Day Post-Election Report following the General Election
on _____ in the State of _____
- Termination Report

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

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>10/1/00</u> through <u>10/18/00</u>		
8. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	<u>16,875.00</u>	<u>84,293.40</u>
(b) Total Contributions Refunds (from Line 20(d))	<u>-</u>	<u>-</u>
(c) Net Contributions (other than loans) (subtract Line 8(b) from 8(a))	<u>16,875.00</u>	<u>84,293.40</u>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<u>28,639.57</u>	<u>191,612.41</u>
(b) Total Offsets to Operating Expenditures (from Line 14)	<u>-</u>	<u>-</u>
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	<u>28,639.57</u>	<u>191,612.41</u>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<u>9,711.44</u>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule D and/or Schedule D')	<u>-</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule E and/or Schedule E')	<u>31,400.00</u>	

For further information contact:
Federal Election Commission
800 E Street, NW
Washington, DC 20463
Toll Free 800-424-9623
Local 202-694-1100

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 **Roger Law**

Signature of Treasurer *Roger Law* Date 10/27/00
Roger Law 10/19/00

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

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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	
Bob Schranger for Congress	From 10/1/00	To 10/18/00
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) -----	750.00	
(ii) Unitemized -----	625.00	
(iii) Total of contributions from individuals -----	1,375.00	60,461.50
(b) Political Party Committees -----		700.00
(c) Other Political Committees (such as PACs) -----	15,500.00	32,650.00
(d) The Candidate -----		94,981.90
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d)) -----	16,875.00	94,293.40
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----	-	-
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----	-	-
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----	-	58.19
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----	16,875.00	104,851.59
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES -----	38,639.57	104,612.41
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 19(a) and (b)) -----	-	-
20. 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 20(a), (b) and (c)) -----	-	-
21. OTHER DISBURSEMENTS -----	-	-
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----	38,639.57	104,612.41

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 20,976.01	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 16,875.00	24
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 37,851.01	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 38,639.57	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 8,711.44	27

SCHEDULE A

ITEMIZED RECEIPTS

List amounts scheduled for each category of the Detailed Summary Page

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

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
Waldemar A. Palutke 8425 Whispering Sands Dr. West Olive, MI 49749 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	self Occupation: Physician Aggregate Year-to-Date > \$ 800.00	10/1/00	250.00
B. Full Name, Mailing Address and ZIP Code Jeanette Youngman 4263 S. Ottawa Tr. Shelby, MI 49455-8018 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: — Occupation: retired Aggregate Year-to-Date > \$ 750.00	10/2/00	500.00
C. Full Name, Mailing Address and ZIP Code			
D. Full Name, Mailing Address and ZIP Code			
E. Full Name, Mailing Address and ZIP Code			
F. Full Name, Mailing Address and ZIP Code			
G. Full Name, Mailing Address and ZIP Code			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

750.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11C

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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
NEA Fund for Children + Public Education 1201 - 16th St. NW - Suite 421 Washington, DC 20036	-	10/7/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: -	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
International Union of Electronic Electrical Salaried Machine + Furniture Workers 1120 16th St. NW Washington, DC 20036	Workers AFL-CIO	10/7/00	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: -	Aggregate Year-to-Date > \$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
International Union United Automobile Aerospace + Agricultural Implement Workers of America - UAW 800 E. Jefferson Ave. Detroit, MI 48214	Workers of America - UAW	10/7/00	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: -	Aggregate Year-to-Date > \$ 10,000.00 (5,000 for primary)	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NCEC 122 C St. NW - Suite 650 Washington, DC 20001	-	10/1/00	2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: -	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
Local 171 IBEW 3617 Gambert Circle Kalamazoo, MI 49001	-	10/1/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: -	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Local 275 IBEW 140 W. 64th Ave. Coopersville, MI 49304	-	10/14/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: -	Aggregate Year-to-Date > \$ 3,500.00	
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"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: -	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

14,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 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)

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
Ann Soles 6152 Longbridge Rd. Penikese, MI 49455	Political Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	\$1,375.00
B. Full Name, Mailing Address and ZIP Code Myrl Locket 1395 New St. Muskegon, MI 49442	Purpose of Disbursement absent voter lists Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	116.58
C. Full Name, Mailing Address and ZIP Code Holland Sentinel Holland, MI 49424	Purpose of Disbursement Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00	1,506.72
D. Full Name, Mailing Address and ZIP Code Muskegon Chronicle Muskegon, MI 49442	Purpose of Disbursement Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00	3,088.80
E. Full Name, Mailing Address and ZIP Code Grand Haven Tribune Grand Haven, MI 49417	Purpose of Disbursement Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00	1,198.41
F. Full Name, Mailing Address and ZIP Code Manistee News Advocate Manistee, MI 49660	Purpose of Disbursement Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00	844.95
G. Full Name, Mailing Address and ZIP Code Cadillac Evening News Cadillac, MI 49601	Purpose of Disbursement Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00	1,504.00
H. Full Name, Mailing Address and ZIP Code Muskegon Black Women's Caucus Muskegon, MI 49442	Purpose of Disbursement Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00	100.00
I. Full Name, Mailing Address and ZIP Code Grand Rapids Press Grand Rapids, MI 49503	Purpose of Disbursement Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00	678.48

CUR TOTAL of Disbursements This Page (continued)

10,412.94

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 2

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
Ludington Daily News Ludington, MI 49431	Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/00	1,154.55
B. Full Name, Mailing Address and ZIP Code Ameritech Bill Payment Center Saginaw, MI 48663-0003	Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/00	44.21
C. Full Name, Mailing Address and ZIP Code Bob Shrauger 6152 Longbridge Rd. Pentwater MI 49479	Purpose of Disbursement reimbursement for postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/00	1,154.12
D. Full Name, Mailing Address and ZIP Code WZZM - Channel 13 Grand Rapids, MI 49504	Purpose of Disbursement Television advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	15,873.75
E. Full Name, Mailing Address and ZIP Code NBC 122 G St. NW - Suite 650 Washington, DC 20001	Purpose of Disbursement electoral targeting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	2,500.00
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)

20,726.63

TOTAL This Period (last page this line number only)

31,139.57

LOANS

Name of Committee (in Full)

Bob Stranger 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 Stranger - personal funds 6152 Longbridge Rd. Pewaukee, MI 49449 Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	20,000 5,000	3,600 -	16,400 -5,000

Terms: Date Incurred 8/3/98 \$1,400; 7/5/98 \$500; 10/15/98 \$10,000; 12/15/99 \$5000
Date Due on Demand Interest Rate 0 % (apr) Secured no

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	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Bob Stranger - personal funds 6152 Longbridge Rd. (not borrowed) Pewaukee, MI 49449 Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5,000 5,000	- -	5,000 5,000

Terms: Date Incurred 12/1/00 \$5,000; 7/5/00 \$5,000
Date Due on Demand Interest Rate 0 % (apr) Secured no

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 line 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 10/27/00
<input type="checkbox"/>	Registered/Certified Mail	POSTMARKED (R/C)
<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	
CR		10/30/00
PREPARER		DATE PREPARED