

BEFORE THE FEDERAL ELECTION COMMISSION

In the matter of:

Fannie Lou Hamer Political Action Committee
(Committee ID: COO294918)
and Edwin Washington, Treasurer

MUR 5377

2003 JUL 11 A 10:11

FEDERAL ELECTION
COMMISSION
OFFICE OF GENERAL
COUNSEL

COMPLAINT

NOW COMES the Michigan Republican State Committee, by its Executive Director, Greg McNeilly, 2121 E. Grand River Avenue, Lansing, Michigan, and hereby files this Complaint pursuant to 2 U.S.C. 437g(a)(1) and 11 C.F.R. § 111.4 against the committee known as "Fannie Lou Hamer Political Action Committee", Edwin Washington, Treasurer (hereinafter referred to as the "Committee"), and states the following:

1. The Committee has a history of refusing to cooperate with the Federal Election Commission, as evidenced by having received 14 Notices of Failure to File! See Exhibit 1 attached hereto.

2. On or about November 2, 2000, the Federal Election Commission administratively terminated the reporting obligations of the Committee, based upon its repeated failure to file reports with the Federal Election Commission. See Exhibit 2 attached hereto. The administrative termination dated November 2, 2000 indicated, in part, as follows:

"Any receipt or disbursement of funds by the committee for the purpose of influencing a federal election or supporting a federal candidate will void the administrative termination. In such an event, the committee will be required to begin filing reports with the Federal Election Commission. The first such report will include any activity since the date of the last report filed by the committee."

3. The Committee is also registered as a committee pursuant to the Michigan Campaign Finance Act. Consequently, the Committee files periodic campaign finance reports with the Michigan Department of State. See Exhibit 3 attached hereto for the Committee's current address and telephone number, and the Committee Treasurer's current address and telephone number.

4. Each campaign finance report filed by the Committee contains the following verification:

"I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete."

4563 320 54 42

5. As indicated by the Committee's own verified campaign finance statements filed with the Michigan Department of State (See Exhibit 4 and Exhibit 5 attached hereto), the Committee made the following contributions in connection with federal elections during calendar year 2002:

<u>Exhibit No.</u>	<u>Date</u>	<u>Federal Candidate/Committee</u>	<u>Amount</u>
4	9/23/2002	Dem. Cong. Campaign Comm.	\$1,000.00
5	10/24/02	U.S. Senator Carl Levin	\$163.26
5	10/24/02	U.S. Senator Carl Levin	\$112.25
5	10/24/02	Congressman Cheeks-Kilpatrick	\$112.25
5	10/24/02	Congressman Cheeks-Kilpatrick	\$163.27
5	10/24/02	Congressman Conyers	\$163.27
5	10/24/02	Congressman Conyers	\$112.25
5	10/28/02	U.S. Senator Carl Levin	\$57.55
5	10/28/02	Congressman Cheeks-Kilpatrick	\$57.55
5	10/28/02	Congressman Conyers	\$57.55
5	10/29/02	U.S. Senator Carl Levin	\$12.65
5	10/29/02	Congressman Cheeks-Kilpatrick	\$12.66
5	10/29/02	Congressman Conyers	\$12.66
5	10/30/02	U.S. Senator Carl Levin	\$29.38
5	10/30/02	U.S. Senator Carl Levin	\$21.51
5	10/30/02	Congressman Cheeks-Kilpatrick	\$29.39
5	10/30/02	Congressman Cheeks-Kilpatrick	\$21.50
5	10/30/02	Congressman Conyers	\$29.38
5	10/30/02	Congressman Conyers	\$21.50
5	11/5/02	U.S. Senator Carl Levin	\$130.10
5	11/5/02	U.S. Senator Carl Levin	\$22.96
5	11/5/02	Congressman Cheeks-Kilpatrick	\$22.96
5	11/5/02	Congressman Cheeks-Kilpatrick	\$130.10
5	11/5/02	Congressman Conyers	\$130.10
5	11/5/02	Congressman Conyers	\$22.96
5	11/8/02	U.S. Senator Carl Levin	\$2.04
5	11/8/02	U.S. Senator Carl Levin	\$2.04
5	11/8/02	Congressman Cheeks-Kilpatrick	\$2.04
5	11/8/02	Congressman Cheeks-Kilpatrick	\$2.04
5	11/8/02	Congressman Conyers	\$2.04

2002-11-08 10:00 AM

<u>Exhibit No.</u>	<u>Date</u>	<u>Federal Candidate/Committee</u>	<u>Amount</u>
5	11/8/02	Congressman Conyers	\$2.04
5	12/3/02	U.S. Senator Carl Levin	\$2.16
5	12/3/02	Congressman Cheeks-Kilpatrick	\$2.16
5	12/3/02	Congressman Conyers	\$2.16
		TOTAL	\$2,667.73

6. Accordingly, as of October 24, 2002 (the date on which the \$1000 threshold was exceeded), the Committee spent more than \$1,000 in contributions and other expenditures in connection with federal elections in calendar year 2002.

7. Upon information and belief, the Committee has failed to file campaign finance reports with the Federal Election Commission, as required pursuant to the November 2, 2000 administrative termination. See Exhibit 2 attached hereto.

8. Moreover, even if the Committee were not already registered with the Federal Election Commission, since the Committee spent more than \$1,000 in contributions and other expenditures in connection with federal elections in calendar year 2002, the Committee, for this reason alone, is required to register and file campaign finance reports with the Federal Election Commission.

9. According to 11 C.F.R. § 100.5(a) and 11 C.F.R. § 102.1(d), a nonconnected committee becomes a "political committee" once it "raises or spends more than \$1,000 in a calendar year." Page 3 of Campaign Guide for Nonconnected Committees (February, 2002) published by the Federal Election Commission.

10. As indicated on page 3 of the Campaign Guide for Nonconnected Committees (February, 2002), published by the Federal Election Commission, as of October 24, 2002 (the date on which the \$1000 threshold was exceeded), even if the Committee was not already registered with the Federal Election Commission, the Committee had 10 days to file with the Federal Election Commission FEC Form 1 and register as a political committee. See 11 C.F.R. § 100.5(a) and 11 C.F.R. § 102.1(d).

11. Upon information and belief, the Committee has failed to file campaign finance reports with the Federal Election Commission, which are required as a result of the Committee's continuing federal election activity.

12. As the records in this matter demonstrate, the Committee has willfully and flagrantly refused to comply with its obligations to the Federal Election Commission.

2002-10-24 10:43:43

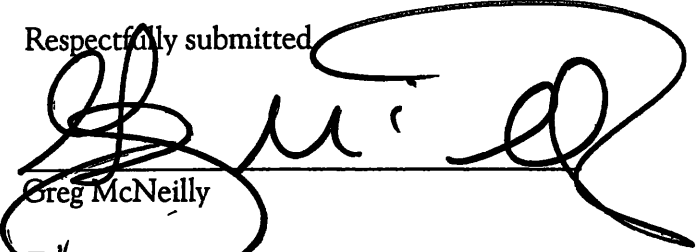
REQUEST FOR RELIEF

Based on the foregoing, the undersigned respectfully requests that the Federal Election Commission investigate these continuing violations and determine that the Committee has violated the Federal Election Campaign Act and the regulations of the Federal Election Commission, including but not limited to, the terms of the Committee's administrative termination, 11 C.F.R. § 100.5(a) and 11 C.F.R. § 102.1(d).

Further, the undersigned respectfully requests the Federal Election Commission to assess all appropriate penalties for these continuing violations in accordance with 2 U.S.C. 437g(a)(5)(A), or any other enforcement provisions of the Federal Election Campaign Act.

The above statements are true and accurate to the best of my knowledge, information and belief.

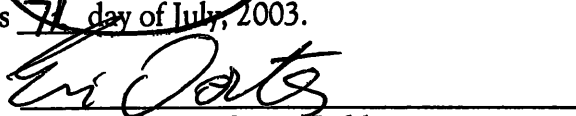
Respectfully submitted



Greg McNeilly

Dated: July 7, 2003

Subscribed and sworn before me this 7 day of July, 2003.



Eric E. Doster, Notary Public
Ingham County, Michigan

My commission expires: July 15, 2006

24-19-025-0937

Presented by the Federal Election Commission

Committee ID: C00294918

FANNIE LOU HAMER FEDERAL POLITICAL ACTION COMMITTEE

PO BOX 35349
DETROIT, MI 48235

Treasurer Name: BEVERLY CHATMAN
Committee Designation: (N/A)
Committee Type: N (NON-PARTY NON-QUALIFIED)

NOTE:

Click the Display Image column to quickly view a report page by page.
Click the Display PDF column to receive and view/print entire reports in PDF format.

0362-520-614

Year 2000						
Document Filed	Amended	Date		Pages	Display Image	Display PDF
MISCELLANEOUS REPORT FROM FEC			11/02/2000	2	20036462232	20036462232
NOTICE OF FAILURE TO FILE		01/01/2000	03/31/2000	2	20035583631	20035583631
NOTICE OF FAILURE TO FILE		04/01/2000	06/30/2000	2	20035924546	20035924546
Year 1999						
Document Filed	Amended	Date		Pages	Display Image	Display PDF
NOTICE OF FAILURE TO FILE		01/01/1999	06/30/1999	2	99034803778	99034803778
NOTICE OF FAILURE TO FILE		07/01/1999	12/31/1999	2	20035384512	20035384512
Year 1998						
Document Filed	Amended	Date		Pages	Display Image	Display PDF
APRIL QUARTERLY		01/01/1998	03/30/1998	3	98033422095	98033422095
NOTICE OF FAILURE TO FILE		01/01/1998	03/31/1998	2	98033394816	98033394816
JULY QUARTERLY		04/01/1998	06/30/1998	4	98033422076	98033422076

		07/01/1998	09/30/1998	5	99034331927	99034331927
9	OCTOBER QUARTERLY					
	NOTICE OF FAILURE TO FILE	07/01/1998	09/30/1998	2	98033913175	98033913175
	POST-GENERAL	10/01/1998	11/23/1998	4	99034331923	99034331923
8	NOTICE OF FAILURE TO FILE	10/01/1998	11/23/1998	2	99034171932	99034171932
	YEAR-END	11/24/1998	12/31/1998	4	99034331919	99034331919

Year 1997

Document Filed	Amended	Date		Pages	Display Image	Display PDF
		01/01/1997	03/31/1997	3	98033422083	98033422083
		04/01/1997	06/30/1997	3	98033422086	98033422086
5	NOTICE OF FAILURE TO FILE	01/01/1997	06/30/1997	2	97032360454	97032360454
	OCTOBER QUARTERLY	07/01/1997	09/30/1997	3	98033422089	98033422089
	YEAR-END	10/01/1997	12/31/1997	3	98033422092	98033422092
6	NOTICE OF FAILURE TO FILE	07/01/1997	12/31/1997	2	98032851239	98032851239

Year 1996

Document Filed	Amended	Date		Pages	Display Image	Display PDF
			05/17/1996	2	96030513627	96030513627
		01/01/1996	03/31/1996	3	96030701450	96030701450
5	NOTICE OF FAILURE TO FILE	01/01/1996	03/31/1996	2	96030492718	96030492718
	JULY QUARTERLY	04/01/1996	06/30/1996	3	96030701453	96030701453
	OCTOBER QUARTERLY	07/01/1996	09/30/1996	4	97031923286	97031923286
4	NOTICE OF FAILURE TO FILE	07/01/1996	09/30/1996	2	96031271129	96031271129
	POST-GENERAL	10/01/1996	11/25/1996	3	97031923293	97031923293
3	NOTICE OF FAILURE TO FILE	10/01/1996	11/25/1996	2	97031651037	97031651037
	YEAR-END	11/26/1996	12/31/1996	3	97031923290	97031923290
	YEAR-END AMENDMENT	11/26/1996	12/31/1996	3	98033422080	98033422080
2	NOTICE OF FAILURE TO FILE	11/26/1996	12/31/1996	2	97031870913	97031870913

0150 24-19-005

REQUEST FOR ADDITIONAL INFORMATION		11/26/1996	12/31/1996	3	97032222245	97032222245
REQUEST FOR ADDITIONAL INFORMATION 2ND		11/26/1996	12/31/1996	4	98032831005	98032831005
Year 1995						
Document Filed	Amended	Date		Pages	Display Image	Display PDF
MID-YEAR REPORT		01/01/1995	06/30/1995	7	95039933669	95039933669
YEAR-END		07/01/1995	12/31/1995	3	96030701447	96030701447
NOTICE OF FAILURE TO FILE		07/01/1995	12/31/1995	2	96030321053	96030321053
Year 1994						
Document Filed	Amended	Date		Pages	Display Image	Display PDF
STATEMENT OF ORGANIZATION			06/07/1994	2	94039013360	94039013360
REQUEST FOR ADDITIONAL INFORMATION		06/29/1994	06/29/1994	2	94039051413	94039051413
STATEMENT OF ORGANIZATION	AMENDMENT		08/01/1994	3	94039150960	94039150960
REQUEST FOR ADDITIONAL INFORMATION 2ND		07/21/1994	07/21/1994	3	94039140650	94039140650
OCTOBER QUARTERLY		07/01/1994	09/30/1994	10	94039293766	94039293766
REQUEST FOR ADDITIONAL INFORMATION		07/01/1994	09/30/1994	2	95039784563	95039784563
REQUEST FOR ADDITIONAL INFORMATION 2ND		07/01/1994	09/30/1994	4	95039811059	95039811059
POST-GENERAL		10/01/1994	11/08/1994	17	94039534903	94039534903
REQUEST FOR ADDITIONAL INFORMATION		10/01/1994	11/08/1994	3	95039784565	95039784565
REQUEST FOR ADDITIONAL INFORMATION 2ND		10/01/1994	11/08/1994	3	95039811056	95039811056
YEAR-END		11/29/1994	12/31/1994	2	95039642773	95039642773

1'ST LETTER INFORMATIONAL NOTICE		11/29/1994	12/31/1994	2	95039791042	95039791042
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TRY A: NEW SEARCH NEW ADVANCED SEARCH
RETURN TO: FEC HOME PAGE

24.19.025.2941



FEDERAL ELECTION COMMISSION

MS-F

WASHINGTON, D.C. 20463

November 2, 2000

Beverly Chatman, Treasurer
 Fannie Lou Hamer Federal Political Action
 Committee
 P.O. Box 35349
 Detroit, MI 48235

Identification Number: C00294918

Dear Ms. Chatman:

Pursuant to 2 U.S.C. §433(d)(2) of the Federal Election Campaign Act, and Commission regulations at 11 CFR §102.4, the Commission intends to administratively terminate the reporting obligation of your committee. The treasurer of the committee has 30 days from the day of receipt of this notice to object to this administrative termination. If a written objection is not received by the Commission within 30 days, this action will take effect.

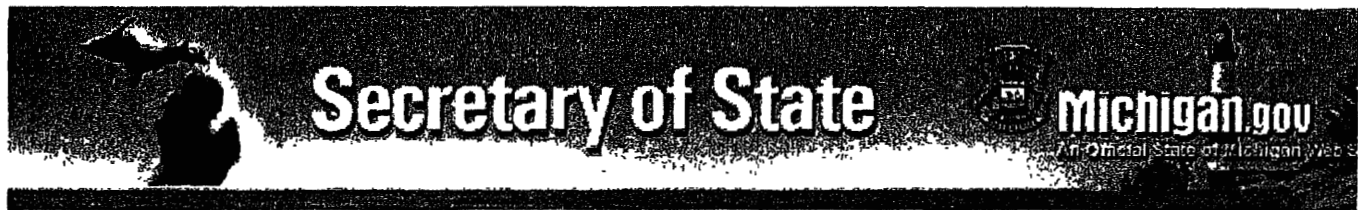
Please note that:

- Excess or residual funds can only be used in accordance with Commission regulations 11 CFR Part 113
- The administrative termination of your reporting obligation does not relieve the committee of any legal responsibility for the payment of any outstanding debt or obligation.
- The committee must continue to maintain all records in accordance with 2 U.S.C. §432(d) which should be available for Commission inspection should the need arise.
- Any funds used to defray the remaining debts and obligations of the committee must comport with the limitations and prohibitions of the Federal Election Campaign Act of 1971, as amended, and the Commission's regulations.
- Any receipt or disbursement of funds by the committee for the purpose of influencing a federal election or supporting a federal candidate will void the administrative termination. In such an event, the committee will be required to begin filing reports with the Federal Election Commission. The first such report will include any activity since the date of the last report filed by the committee.

If you should have any questions, please call Craig Crooks, Deputy Assistant Staff Director for the Reports Analysis Division, on (202) 694-1130 or toll free on (800) 424-9530.

Sincerely,

John D. Gibson
 Assistant Staff Director
 Reports Analysis Division


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[SOS Home](#) | [Elections in Michigan Home](#) | [Contact SOS](#)

Committee Statement of Organization

The Documents Sent & Received Listing for this committee is at the bottom of this screen.

[Jump to the documents on file](#)

Committee ID#:	505936
Type of Filing:	Original
Full Name Of Committee:	FANNIE LOU HAMER POLITICAL ACTION COMMITTEE
Committee Type:	Political PAC
Acronym:	
Name of Sponsor/Type:	
Segregated Fund:	No
Date Committee Was Formed:	
Committee Phone Number:	(313) 538-3001
Committee Mail Address	19600 W MCNICHOLS DETROIT, MI 48219
Committee Street Address:	19600 W MCNICHOLS DETROIT, MI 48219
Treasurer Name: Mailing Address:	EDWIN WASHINGTON 15717 ROSEMONT DETROIT, MI 48223
Phone:	(313) 272-9290
Designated Recordkeeper Name: Address:	
Phone:	
Reporting Waiver	Lost waiver on 10/20/1991
Names and Addresses of depositories or intended depositories of committee funds	
Official Depository	FIRST INDEPENDENCE 44 MICHIGAN AVE DETROIT, MI 48226
Secondary Depository	
Support/Opposed	
Ballot Proposal	
Jurisdiction	



**INDEPENDENT/POLITICAL
COMMITTEE COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer or designated record keeper.

3. This Statement covers From: 07/21/2002 To 10/20/2002
Mo Day Year Mo Day Year

<p>1. Committee I.D. Number 505936-5</p>	<p>4. Committee's Mailing Address 19600 West McNichols Detroit MI 48219 Area Code and Phone <u>(313) 538-3001</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p>
<p>2. Committee Name Fannie Lou Hamer PAC</p>	

5. Treasurer's Name and Residential Address
Edwin Washington
15717 Rosemont

Detroit MI 48223-1329
Area Code and Phone (313) 272-9290

Driver License # (Optional)

<p>6. Treasurer's Business Address 2965 Lapeer Rd. Auburn Hills MI 48326 Area Code and Phone (248) 475-9600</p>	<p>7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) Area Code and Phone Driver License # (Optional)</p>
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<p>8. TYPE OF STATEMENT: APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON <u>STATE LEVEL</u></p> <p>8a. <u>TRIANNUAL STATEMENTS</u></p> <table> <tr> <th>Even Year</th> <th>Odd Year</th> </tr> <tr> <td><input type="checkbox"/> April 25</td> <td><input type="checkbox"/> January 31</td> </tr> <tr> <td><input type="checkbox"/> July 25</td> <td><input type="checkbox"/> July 25</td> </tr> <tr> <td><input checked="" type="checkbox"/> October 25</td> <td><input type="checkbox"/> October 25</td> </tr> </table> <p>8b. <u>QUARTERLY STATEMENTS</u> CAUCUS COMMITTEES (ONLY)</p> <table> <tr> <td><input type="checkbox"/> January 31</td> <td><input type="checkbox"/> April 25</td> </tr> <tr> <td><input type="checkbox"/> July 25</td> <td><input type="checkbox"/> October 25</td> </tr> </table> <p>8c. <input type="checkbox"/> <u>SPECIAL ELECTION INDEPENDENT EXPENDITURE REPORT</u></p>	Even Year	Odd Year	<input type="checkbox"/> April 25	<input type="checkbox"/> January 31	<input type="checkbox"/> July 25	<input type="checkbox"/> July 25	<input checked="" type="checkbox"/> October 25	<input type="checkbox"/> October 25	<input type="checkbox"/> January 31	<input type="checkbox"/> April 25	<input type="checkbox"/> July 25	<input type="checkbox"/> October 25	<p>APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON <u>COUNTY LEVEL</u></p> <p>8d. <input type="checkbox"/> ANNUAL STATEMENT (_____ Coverage Year)</p> <p>8e. <input type="checkbox"/> PRE-ELECTION OR</p> <p>8f. <input type="checkbox"/> POST-ELECTION Pre-Election or Post-Election Statement relates to:</p> <table> <tr> <td><input type="checkbox"/> PRIMARY</td> <td><input type="checkbox"/> GENERAL</td> </tr> <tr> <td><input type="checkbox"/> CONVENTION</td> <td><input type="checkbox"/> SCHOOL</td> </tr> <tr> <td><input type="checkbox"/> SPECIAL</td> <td><input type="checkbox"/> CAUCUS</td> </tr> </table> <p>Date of Election, Convention or Caucus: Month _____ Day _____ Year _____</p>	<input type="checkbox"/> PRIMARY	<input type="checkbox"/> GENERAL	<input type="checkbox"/> CONVENTION	<input type="checkbox"/> SCHOOL	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> CAUCUS	<p>APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON <u>STATE AND COUNTY LEVEL</u></p> <p>8g. <input type="checkbox"/> AMENDMENT TO CAMPAIGN STATEMENT (Complete Item 8a, 8b, 8c, 8d, 8e, 8f or 8h to indicate which Statement is being amended)</p> <p>8h. <input type="checkbox"/> DISSOLUTION OF COMMITTEE Effective Date of Dissolution Month _____ Day _____ Year _____</p> <p>By checking Item 8h, I certify that the committee has no assets or outstanding debts, including late filing fees. <u>Note:</u> The disposition of residual funds must be reported on Schedule 2B and the Summary Page.</p>
Even Year	Odd Year																			
<input type="checkbox"/> April 25	<input type="checkbox"/> January 31																			
<input type="checkbox"/> July 25	<input type="checkbox"/> July 25																			
<input checked="" type="checkbox"/> October 25	<input type="checkbox"/> October 25																			
<input type="checkbox"/> January 31	<input type="checkbox"/> April 25																			
<input type="checkbox"/> July 25	<input type="checkbox"/> October 25																			
<input type="checkbox"/> PRIMARY	<input type="checkbox"/> GENERAL																			
<input type="checkbox"/> CONVENTION	<input type="checkbox"/> SCHOOL																			
<input type="checkbox"/> SPECIAL	<input type="checkbox"/> CAUCUS																			

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.

9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Electronically Filed:
Current Treasurer or Designated Record Keeper Edwin Washington / Signature _____ Date 10/28/2002
Type of Print Name Signature Mo Day Year

2002 OCT 24 10 45 AM



**ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE**

1. Committee I.D. Number 505936-5

2. Committee Name Fannie Lou Hamer PAC

3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure # 25 Name Peggy Beacham Address 2490 Edison Detroit MI 48206 4. Purpose: <u>administrative assistance</u> Expenditure Code: <u>OE</u> Fund Raiser <input type="checkbox"/>	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	09/19/2002	51.00	
Expenditure # 26 Name Dem. Cong. Campaign. Comm. Address 4. Purpose: _____ Expenditure Code: <u>DI</u> Fund Raiser <input type="checkbox"/>	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	09/23/2002	1000.00	
Expenditure # 27 Name First Independence Bank Address 44 Michigan Ave. Detroit MI 48226 4. Purpose: <u>service charge</u> Expenditure Code: <u>BK</u> Fund Raiser <input type="checkbox"/>	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	09/30/2002	18.03	
Expenditure # 28 Name Peggy Beacham Address 2490 Edison Detroit MI 48206 4. Purpose: <u>administrative assistance</u> Expenditure Code: <u>OE</u> Fund Raiser <input type="checkbox"/>	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	10/04/2002	243.99	

Subtotal this page
Grand Total of all Schedules 2B
(Complete on last page of Schedule)

1313.02
8275.31

Enter this total
On Line 8a of the
Summary Page

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES



**INDEPENDENT/POLITICAL
COMMITTEE COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer or designated record keeper.

3. This Statement covers From: 10/21/2002 To 12/31/2002
Mo Day Year Mo Day Year

1. Committee I.D. Number
505936-5

2. Committee Name
Fannie Lou Hamer PAC

4. Committee's Mailing Address
19600 West McNichols

Detroit MI 48219
Area Code and Phone **(313) 538-3001**

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

5. Treasurer's Name and Residential Address
Edwin Washington
15717 Rosemont

Detroit MI 48223-1329
Area Code and Phone **(313) 272-9290** Driver License # (Optional)

6. Treasurer's Business Address
2965 Lapeer Rd.

Auburn Hills MI 48326
Area Code and Phone **(248) 475-9600**

7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)

Area Code and Phone Driver License # (Optional)

8. TYPE OF STATEMENT:
APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON STATE LEVEL

8a. TRIANNUAL STATEMENTS

Even Year	Odd Year
<input type="checkbox"/> April 25	<input checked="" type="checkbox"/> January 31
<input type="checkbox"/> July 25	<input type="checkbox"/> July 25
<input type="checkbox"/> October 25	<input type="checkbox"/> October 25

8b. QUARTERLY STATEMENTS
CAUCUS COMMITTEES (ONLY)

<input type="checkbox"/> January 31	<input type="checkbox"/> April 25
<input type="checkbox"/> July 25	<input type="checkbox"/> October 25

8c. SPECIAL ELECTION INDEPENDENT EXPENDITURE REPORT

APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON COUNTY LEVEL

8d. ANNUAL STATEMENT
(_____ Coverage Year)

8e. PRE-ELECTION OR

8f. POST-ELECTION

Pre-Election or Post-Election Statement relates to:

<input type="checkbox"/> PRIMARY	<input type="checkbox"/> GENERAL
<input type="checkbox"/> CONVENTION	<input type="checkbox"/> SCHOOL
<input type="checkbox"/> SPECIAL	<input type="checkbox"/> CAUCUS

Date of Election, Convention or Caucus:
Month Day Year

APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON STATE AND COUNTY LEVEL

8g. AMENDMENT TO CAMPAIGN STATEMENT

(Complete Item 8a, 8b, 8c, 8d, 8e, 8f or 8h to indicate which Statement is being amended)

8h. DISSOLUTION OF COMMITTEE
Effective Date of Dissolution
Month Day Year

By checking Item 8h, I certify that the committee has no assets or outstanding debts, including late filing fees. **Note:** The disposition of residual funds must be reported on Schedule 2B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.

9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Electronically Filed:
Current Treasurer or Designated Record Keeper Edwin Washington / _____ Date 02/02/2003
Type of Print Name Signature Mo Day Year

OFFICE USE ONLY



EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES

1. Committee I.D. Number 505936-5

2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 1 Name & Address: Carter 17560 Stahelin Detroit MI 48219 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): media radio spots Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002 Memo - Itemization Below</p>	<p>\$ <u>5500.00</u></p>
<p>Expenditure # 2 Name & Address: Carl Levin For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002 Memo - Itemization</p>	<p>\$ <u>(112.25)</u></p>
<p>Expenditure # 3 Name & Address: John Conyers Jr. 231 W. Lafayette Detroit MI 48227 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002 Memo - Itemization</p>	<p>\$ <u>(112.25)</u></p>

Subtotal this page
Grand Total of all Schedules B-G
(Complete on last page of Schedule)

5500.00

Enter this total on
Line 8b of the
Summary Page



**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 4 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library Detroit MI 48226 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002</p> <p>Memo - Itemization</p>	<p>\$ (112.25)</p>
<p>Expenditure # 5 Name & Address: Jennifer Granholm 40326 Woodside Dr., North Northville Township MI 48167 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002</p> <p>Memo - Itemization</p>	<p>\$ (112.25)</p>
<p>Expenditure # 6 Name & Address: Gary Peters For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002</p> <p>Memo - Itemization</p>	<p>\$ (112.25)</p>

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EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES

1. Committee I.D. Number 505936-5

2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 61 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library Detroit MI 48226 For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002 Memo - Itemization</p>	<p>\$ (163.27)</p>
<p>Expenditure # 62 Name & Address: Marsha Cheeks 2295 Longfellow Detroit MI 48206 For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002 Memo - Itemization</p>	<p>\$ (163.27)</p>
<p>Expenditure # 63 Name & Address: Coll Barg for State Class Emp For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002 Memo - Itemization</p>	<p>\$ (163.27)</p>

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2025 RELEASE UNDER E.O. 14176



**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D Number 505936-5

2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED.

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 64 Name & Address: John Conyers Jr. 231 W. Lafayette Detroit MI 48227 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002</p>	<p>\$ (163.27) Memo - Itemization</p>
<p>Expenditure # 65 Name & Address: Christopher Dingell 3360 Brookshire Trenton MI 48183 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002</p>	<p>\$ (163.27) Memo - Itemization</p>
<p>Expenditure # 66 Name & Address: Maggie W. Drake For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/24/2002</p>	<p>\$ (163.27) Memo - Itemization</p>

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2025-02-19



**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED.

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # 109 Name & Address: J. Martin Brennan Jr. For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/28/2002 Memo - Itemization	\$ (57.55)
Expenditure # 110 Name & Address: Bill Callahan For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/28/2002 Memo - Itemization	\$ (57.55)
Expenditure # 111 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library Detroit MI 48226 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/28/2002 Memo - Itemization	\$ (57.55)

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

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ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 112 Name & Address: Marsha Cheeks 2295 Longfellow Detroit MI 48206 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/28/2002 Memo - Itemization</p>	<p>\$ (57.55)</p>
<p>Expenditure # 113 Name & Address: Coll Barg for State Class Emp For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/28/2002 Memo - Itemization</p>	<p>\$ (57.55)</p>
<p>Expenditure # 114 Name & Address: John Conyers Jr. 231 W. Lafayette Detroit MI 48227 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/28/2002 Memo - Itemization</p>	<p>\$ (57.55)</p>

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EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES

1. Committee I.D. Number 505936-5

2. Committee Name Fannie Lou Harner PAC

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ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 127 Name & Address: Carl Levin</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers</p> <p>f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/28/2002</p> <p>Memo - Itemization</p>	<p>\$ <u>(57.55)</u></p>
<p>Expenditure # 128 Name & Address: Colleen M. McNamara</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers</p> <p>f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/28/2002</p> <p>Memo - Itemization</p>	<p>\$ <u>(57.55)</u></p>
<p>Expenditure # 129 Name & Address: B. Pennie Millender 2161 Bryanston Cresent Detroit MI 48207</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers</p> <p>f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/28/2002</p> <p>Memo - Itemization</p>	<p>\$ <u>(57.55)</u></p>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5

2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 157 Name & Address: J. Martin Brennan Jr.</p> <p>For Activity Type "b" - "T", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers</p> <p>f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/29/2002</p> <p>Memo - Itemization</p>	<p>\$ (12.66)</p>
<p>Expenditure # 158 Name & Address: Bill Callahan</p> <p>For Activity Type "b" - "T", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers</p> <p>f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/29/2002</p> <p>Memo - Itemization</p>	<p>\$ (12.66)</p>
<p>Expenditure # 159 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library</p> <p>Detroit MI 48226</p> <p>For Activity Type "b" - "T", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers</p> <p>f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/29/2002</p> <p>Memo - Itemization</p>	<p>\$ (12.66)</p>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5

2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED.

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 160 Name & Address: Marsha Cheeks 2295 Longfellow Detroit MI 48206 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/29/2002 Memo - Itemization</p>	<p>\$ (12.66)</p>
<p>Expenditure # 161 Name & Address: Coll Barg for State Class Emp For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/29/2002 Memo - Itemization</p>	<p>\$ (12.66)</p>
<p>Expenditure # 162 Name & Address: John Conyers Jr. 231 W. Lafayette Detroit MI 48227 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>10/29/2002 Memo - Itemization</p>	<p>\$ (12.66)</p>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # 175 Name & Address: Kwame Kenyatta 16500 Greenfield #106 Detroit MI 48235 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/29/2002 Memo - Itemization	\$ (12.65)
Expenditure # 176 Name & Address: Carl Levin For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/29/2002 Memo - Itemization	\$ (12.65)
Expenditure # 177 Name & Address: Colleen M. McNamara For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/29/2002 Memo - Itemization	\$ (12.65)

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EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Harner PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED.

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # 208 Name & Address: Bill Callahan For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ <u>(21.50)</u>
Expenditure # 209 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library Detroit MI 48226 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ <u>(21.50)</u>
Expenditure # 210 Name & Address: Marsha Cheeks 2295 Longfellow Detroit MI 48206 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ <u>(21.50)</u>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED.

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # 211 Name & Address: Coll Barg for State Class Emp For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ (21.50)
Expenditure # 212 Name & Address: John Conyers Jr. 231 W. Lafayette Detroit MI 48227 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ (21.50)
Expenditure # 213 Name & Address: Christopher Dingell 3360 Brookshire Trenton MI 48183 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ (21.50)

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # 226 Name & Address: Carl Levin For Activity Type "b" - "r", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ (21.51)
Expenditure # 227 Name & Address: Colleen M. McNamara For Activity Type "b" - "r", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ (21.51)
Expenditure # 228 Name & Address: B. Pennie Millender 2161 Bryanston Cresent Detroit MI 48207 For Activity Type "b" - "r", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ (21.51)

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5

2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # 259 Name & Address: Bill Callahan For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ <u>(29.39)</u>
Expenditure # 260 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library Detroit MI 48226 For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ <u>(29.39)</u>
Expenditure # 261 Name & Address: Marsha Cheeks 2295 Longfellow Detroit MI 48206 For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ <u>(29.39)</u>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # <u>262</u> Name & Address: <u>Coll Barg for State Class Emp</u> For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ <u>(29.38)</u>
Expenditure # <u>263</u> Name & Address: <u>John Conyers Jr.</u> <u>231 W. Lafayette</u> Detroit MI 48227 For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ <u>(29.38)</u>
Expenditure # <u>264</u> Name & Address: <u>Christopher Dingell</u> <u>3360 Brookshire</u> Trenton MI 48183 For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ <u>(29.38)</u>

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Grand Total of all Schedules B-G (Complete on last page of Schedule) _____

0.00

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # 277 Name & Address: Carl Levin For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ (29.38)
Expenditure # 278 Name & Address: Colleen M. McNamara For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ (29.38)
Expenditure # 279 Name & Address: B. Pennie Millender 2161 Bryanston Cresnet Detroit MI 48207 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	10/30/2002 Memo - Itemization	\$ (29.38)

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FORM 2000-01-01



**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

FANNIE LOU HAMER PAC

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # 310 Name & Address: Marsha Cheeks 2295 Longfellow Detroit MI 48206 For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ <u>(130.11)</u>
Expenditure # 311 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library Detroit MI 48226 For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ <u>(130.10)</u>
Expenditure # 312 Name & Address: Coll Barg for State Class Emp For Activity Type "b" - "t", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ <u>(130.10)</u>

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Grand Total of all Schedules B-G
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Line 8b of the
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EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES

1. Committee I.D. Number 505936-5

2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # 313 Name & Address: John Conyers Jr. 231 W. Lafayette Detroit MI 48227 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ <u>(130.10)</u>
Expenditure # 314 Name & Address: Christopher Dingell 3360 Brookshire Trenton MI 48183 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ <u>(130.10)</u>
Expenditure # 315 Name & Address: Maggie W. Drake For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ <u>(130.10)</u>

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2013-05-02 14:05:00



**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5

2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

0052 005 2366

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 325 Name & Address: Melvin 'Butch' Hollowell</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers</p> <p>f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/05/2002</p> <p>Memo - Itemization</p>	<p>\$ <u>(130.10)</u></p>
<p>Expenditure # 326 Name & Address: Kwame Kenyatta 16500 Greenfield #106 Detroit MI 48235</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers</p> <p>f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/05/2002</p> <p>Memo - Itemization</p>	<p>\$ <u>(130.10)</u></p>
<p>Expenditure # 327 Name & Address: Carl Levin</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls</p> <p>b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers</p> <p>d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers</p> <p>f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/05/2002</p> <p>Memo - Itemization</p>	<p>\$ <u>(130.10)</u></p>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # 361 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library Detroit MI 48226 For Activity Type "b" - "T", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ (22.96)
Expenditure # 362 Name & Address: Coll Barg for State Class Emp For Activity Type "b" - "T", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ (22.96)
Expenditure # 363 Name & Address: John Conyers Jr. 231 W. Lafayette Detroit MI 48227 For Activity Type "b" - "T", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ (22.96)

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure # <u>376</u> Name & Address: Kwame Kenyatta 16500 Greenfield #106 Detroit MI 48235 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ <u>(22.96)</u>
Expenditure # <u>377</u> Name & Address: Carl Levin For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ <u>(22.96)</u>
Expenditure # <u>378</u> Name & Address: Colleen M. McNamara For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input checked="" type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____	11/05/2002 Memo - Itemization	\$ <u>(22.96)</u>

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Grand Total of all Schedules B-G
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EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 409 Name & Address: Marsha Cheeks 2295 Longfellow Detroit MI 48206 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a <input type="checkbox"/> Election Day Busing of Voters To The Polls b <input type="checkbox"/> Slate Cards c <input type="checkbox"/> Challengers d <input type="checkbox"/> Poll Watchers e <input type="checkbox"/> Poll Workers f <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002 Memo - Itemization</p>	<p>\$ (2.04)</p>
<p>Expenditure # 410 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library Detroit MI 48226 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a <input type="checkbox"/> Election Day Busing of Voters To The Polls b <input type="checkbox"/> Slate Cards c <input type="checkbox"/> Challengers d <input type="checkbox"/> Poll Watchers e <input type="checkbox"/> Poll Workers f <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002 Memo - Itemization</p>	<p>\$ (2.04)</p>
<p>Expenditure # 411 Name & Address: Coll Barg for State Class Emp For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a <input type="checkbox"/> Election Day Busing of Voters To The Polls b <input type="checkbox"/> Slate Cards c <input type="checkbox"/> Challengers d <input type="checkbox"/> Poll Watchers e <input type="checkbox"/> Poll Workers f <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002 Memo - Itemization</p>	<p>\$ (2.04)</p>

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2025 RELEASE UNDER E.O. 14176



**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 412 Name & Address: John Conyers Jr. 231 W. Lafayette Detroit MI 48227 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002 Memo - Itemization</p>	<p>\$ (2.04)</p>
<p>Expenditure # 413 Name & Address: Christopher Dingell 3360 Brookshire Trenton MI 48183 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002 Memo - Itemization</p>	<p>\$ (2.04)</p>
<p>Expenditure # 414 Name & Address: Maggie W. Drake For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002 Memo - Itemization</p>	<p>\$ (2.04)</p>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED.

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # <u>424</u> Name & Address: <u>Melvin 'Butch' Hollowell</u></p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002</p> <p>Memo - Itemization</p>	<p>\$ <u>(2.04)</u></p>
<p>Expenditure # <u>425</u> Name & Address: <u>Kwame Kenyatta</u> <u>16500 Greenfield</u> <u>#106</u> <u>Detroit MI 48235</u></p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002</p> <p>Memo - Itemization</p>	<p>\$ <u>(2.04)</u></p>
<p>Expenditure # <u>426</u> Name & Address: <u>Carl Levin</u></p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002</p> <p>Memo - Itemization</p>	<p>\$ <u>(2.04)</u></p>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 460 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library Detroit MI 48226 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002 Memo - Itemization</p>	<p>_____ \$ (2.04)</p>
<p>Expenditure # 461 Name & Address: Coll Barg for State Class Emp For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002 Memo - Itemization</p>	<p>_____ \$ (2.04)</p>
<p>Expenditure # 462 Name & Address: John Conyers Jr. 231 W. Lafayette Detroit MI 48227 For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____ Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____ Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002 Memo - Itemization</p>	<p>_____ \$ (2.04)</p>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 475 Name & Address: Kwame Kenyatta 16500 Greenfield #106 Detroit MI 48235 For Activity Type "b" - "T", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.04)</p>
<p>Expenditure # 476 Name & Address: Carl Levin</p> <p>For Activity Type "b" - "T", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.04)</p>
<p>Expenditure # 477 Name & Address: Colleen M. McNamara</p> <p>For Activity Type "b" - "T", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>11/08/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.04)</p>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Harner PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

4-557-500-51-42

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 508 Name & Address: J. Martin Brennan Jr.</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>12/03/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.16)</p>
<p>Expenditure # 509 Name & Address: Bill Callahan</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>12/03/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.16)</p>
<p>Expenditure # 510 Name & Address: Carolyn Cheeks-Kilpatrick 274 Library Detroit MI 48226</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>12/03/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.16)</p>

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EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED.

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 511 Name & Address: Coll Barg for State Class Emp</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>12/03/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.16)</p>
<p>Expenditure # 512 Name & Address: John Conyers Jr. 231 W. Lafayette Detroit MI 48227</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>12/03/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.16)</p>
<p>Expenditure # 513 Name & Address: Christopher Dingell 3360 Brookshire Trenton MI 48183</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>12/03/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.16)</p>

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**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B-G
POLITICAL PARTY, POLITICAL OR INDEPENDENT
COMMITTEES**

1. Committee I.D. Number 505936-5
2. Committee Name Fannie Lou Hamer PAC

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The-Vote activity in Item 4f.
ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

2025-03-14 10:14:42

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
<p>Expenditure # 523 Name & Address: Kwame Kenyatta 16500 Greenfield #106 Detroit MI 48235 For Activity Type "b" - "f", check one. <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>12/03/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.16)</p>
<p>Expenditure # 524 Name & Address: Carl Levin</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>12/03/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.16)</p>
<p>Expenditure # 525 Name & Address: Colleen M. McNamara</p> <p>For Activity Type "b" - "f", check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent</p> <p>If in support of, or in opposition to, a ballot proposal, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement</p> <p>Candidate Name _____ Office Sought & District # or Jurisdiction _____ Candidate's County _____</p> <p>Statewide Proposal Name _____ Local Proposal Name _____ Indicate County _____</p>	<p>a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): _____</p> <p>Cumulative for Candidate or Ballot Proposal \$ _____</p>	<p>12/03/2002</p> <p>Memo - Itemization</p>	<p>\$ (2.16)</p>

Subtotal this page
Grand Total of all Schedules B-G
(Complete on last page of Schedule)

0.00