Democratic Party of Delaware

GARY E. HINDES
Chairman

NOV 13 9 46 AM '95

LEAH W. BETTS
Vice Chairwoman

ROBERT E. EMRICH
Vice Chairman

J. BRIAN MURPHY
Treasurer

MARIE SIMMONS
Secretary

JOANNE VETO
Executive Director

November 3, 1995

Neil Evans
Reports Analyst
Reports Analysis Division
Federal Election Commission
999 E Street NW
Washington, DC 20463

Identification Number: C00211763

Reference: Mid-Year Report (1/1/95-6/30/95)

Dear Mr. Evans:

We received your letter dated November 1, 1995, regarding the Commission's review of the 1995 Mid-Year Report.

Enclosed is Schedule D and an amended Summary Page reflecting the change on Line 10. We apologize for this oversight when we prepared the report. We will continue to submit Schedule D until the debt has been extinguished.

If you have any questions please let us know.

Sincerely,

Joanne Veto
Executive Director

Enclosure:
1995 Mid-Year Summary Page
Schedule D

95030065001

P. O. Box 2065
Wilmington
Delaware
19899

Tel. (302) 996-9459
FAX (302) 996-9405

Paid For By The Democratic State Committee

DEMOCRATS SERVE DELAWARE BEST!

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

FEDERAL ELECTION COMMISSION MAIL ROOM

NOV 13 9 46 AM '95

1. NAME OF COMMITTEE (In full)

Democratic State Committee (Delaware)

ADDRESS (number and street) ☐ Check if different than previous reported

PO Box 2065

CITY, STATE and ZIP CODE

Wilmington, DE 19899

2. FEC IDENTIFICATION NUMBER

C00211763

3. ☐ This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Quarterly Report

☒ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☒ YES ☐ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 01/01/95 through 06/30/95		
6. (a) Cash on Hand January 1, 19 95		$ 3,845.33
(b) Cash on hand at Beginning of Reporting Period	$ 3,845.33	
(c) Total receipts (from Line 19)	$ 49,780.37	$ 49,780.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 53,625.70	$ 53,625.70
7. Total Disbursements (from Line 30)	$ 49,928.74	$ 49,928.74
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 3,696.96	$ 3,696.96
9. Debts and Obligations Owed the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed the Committee (Itemized all on Schedule C and/or Schedule D)	$ 5000.00	

For Information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-376-3120

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
J. Brian Murphy

Signature of Treasurer

Date 11/7/95

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

IBS-F3X-791

FEC FORM 3X
(revised 1/1/91)

9503006502

SCHEDULE D
(Revised 3/90)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 or
LINE NUMBER 9/10
(Use separate schedules for each numbered line)

Name of Committee (in Full) C00211763 Democratic State Committee (Delaware)	Outstanding Balance Beginning of Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor AMS COMM, INC GOLDEN GATEWAY BRANCH SAN FRANCISCO, CA 941	5,000.00			5,000.00
Nature of Debt (Purpose) LITERATURE2				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose)				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose)				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose)				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose)				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose)				
1) SUBTOTALS This Period This Page (optional)				5,000.00
2) TOTAL This Period (last page this line only)				5,000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				5,000.00

ISS-SD-001

95030065003

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 11-9-95
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

SLD. — PREPARER

11-13-95 — DATE PREPARED

FEC FORM 70-2 (12/92)

9 5 0 3 0 0 6 5 0 0 4