

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

Aug 27 10 52 AM '97

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>8th Congressional District Democratic Committee</b>		2. FEC IDENTIFICATION NUMBER <b>000319681</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>419 N Pine Street</b>		
CITY, STATE and ZIP CODE <b>Lansing, MI 48933</b>		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End 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

- 12-Day Pre-Election Report for the General  
(Type of Election)  
election on 11-5-96 in the State of MI  
 30-Day Post-Election 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 <u>10-1-96</u> through <u>10-16-96</u>		
6. (a) Cash on Hand January 1, 19__		\$ -0-
(b) Cash on Hand at Beginning of Reporting Period	\$ 6,852.18	
(c) Total Receipts (from Line 19)	\$ 5,000.00	\$ 21,890.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 11,852.18	\$ 21,890.00
7. Total Disbursements (from Line 20)	\$ 7,393.17	\$ 17,430.99
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 4,459.01	\$ 4,459.01
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ -0-	

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

**John Hurd**

Signature of Treasurer

*[Handwritten Signature]*

Date

**8/20/97**

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

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FEC FORM 3X

(encl. 9/93)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
8 CONGRESSIONAL DISTRICT DEMOCRATIC COMMITTEE		FROM 10-1-96	TO 10-16-96
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11.	Contributions (other than loans) From:		
a.	Individuals/Persons Other Than Political Committees:		
i.	Itemized (use Schedule A) .....	5000.00	6890.00
ii.	Unitemized .....	-0-	-0-
ii.	Total .....	5000.00	6890.00
b.	Political Party Committees .....	-0-	-0-
c.	Other Political Committees (such as PACs) .....	-0-	16,000.00
c.	Total Contributions .....	5000.00	21,890.00
12.	Transfers From Affiliated/Other Party Committees .....	-0-	-0-
13.	All Loans Received .....	-0-	-0-
14.	Loan Repayments Received .....	-0-	-0-
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	-0-	-0-
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	-0-	-0-
17.	Other Federal Receipts (Dividends, Interest, etc.) .....	-0-	-0-
18.	Transfers from Nonfederal Account for Joint Activity .....	-0-	-0-
19.	Total Receipts .....	5000.00	21,890.00
20.	Total Federal Receipts .....	5000.00	21,890.00
B. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share .....	-0-	-0-
ii.	Non-Federal Share .....	-0-	-0-
b.	Other Federal Operating Expenditures .....	7293.17	12,330.99
c.	Total Operating Expenditures .....	7293.17	12,330.99
22.	Transfers to Affiliated/Other Party Committees .....	5,100.00	5,100.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees .....	-0-	-0-
24.	Independent Expenditures (use Schedule E) .....	-0-	-0-
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..	-0-	-0-
26.	Loan Repayments Made .....	-0-	-0-
27.	Loans Made .....	-0-	-0-
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees .....	-0-	-0-
b.	Political Party Committees .....	-0-	-0-
c.	Other Political Committees (such as PACs) .....	-0-	-0-
d.	Total Contribution Refunds .....	-0-	-0-
29.	Other Disbursements .....	-0-	-0-
30.	Total Disbursements .....	7,393.17	17,430.99
31.	Total Federal Disbursements .....	7,393.17	17,430.99
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d) .....	5000.00	21,890.00
33.	Total Contribution Refunds (from line 28d) .....	-0-	-0-
34.	Net Contributions (other than loans)(subtract line 33 from 32) .....	5000.00	21,890.00
35.	Total Federal Operating Expenditures .....	7,393.17	12,330.99
36.	Offsets to Operating Expenditures (from line 15) .....	-0-	-0-
37.	Net Operating Expenditures .....	7,393.17	12,330.99

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

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
8th Congressional District Democratic Committee				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Lansing Lithographers 934 Clark Street Lansing, MI 48906	\$1,810.57	-0-	\$1,810.57	-0-
Nature of Debt (Purpose):				
Printing				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Practical Political Consultants P.O. Box 6249 E. Lansing, MI 48826	\$482.60	-0-	\$482.60	-0-
Nature of Debt (Purpose):				
Consultant				
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)				-0-
2) TOTALS This Period (last page in this line only)				-0-
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				-0-
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				-0-

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**8th CONGRESSIONAL DISTRICT DEMOCRATIC COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<b>MICHIGAN DEMOCRATIC PARTY 600 TOWNSEND LANSING MI 48233</b>	<b>TRANSFER</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>10-4-96</b>	<b>5100.00</b>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) .....	
TOTAL This Period (last page this line number only) .....	<b>5100.00</b>

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 8-22-97
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
<i>SES</i>	8-22-97
PREPARER	DATE PREPARED