

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

NOV 30 P 4:10

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Democratic Party of Nez Perce County

ADDRESS (number and street) 35224 Risikman Rd

Check if different than previously reported. (ACC) REPUBLIC ID 83598-

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE 000022517 IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for this: Primary, Conversion, General, Special. (d) 30-Day POST-Election Report for this: General, Runoff, Special.

6. Covering Period 10/04/2004 through 11/22/2004

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 Nathan Weeks

Signature of Treasurer Nathan Weeks Date 11/22/2004

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 8X (Rev. 02/2003)

Write or Type Committee Name

Democratic Party of Nez Perce County

Report Covering the Period: From: **10/14/2004** to **11/22/2004**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004		13,189.5
(b) Cash on Hand at Beginning of Reporting Period	3,732.87	
(c) Total Receipts (from Line 12)	3,875.45	14,409.76
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	7,608.32	15,728.91
7. Total Disbursements (from Line 31)	6,419.49	14,540.08
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1,188.83	1,188.83
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20469

Toll Free 800-424-9530
Local 202-684-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Democratic Party of Nez Perce County

Report Covering the Period:

From:

10/14/2004

To:

11/22/2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	10000.00	4011.85
(ii) Unitemized.....	225.45	6873.11
(ii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1225.45	10884.96
(b) Political Party Committees.....	1000.00	1000.00
(c) Other Political Committees (such as PACs).....	1650.00	2525.00
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	3875.45	14409.96
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Direct To Operating Expenditures (Printers, Rebates, etc.) (Carry Totals to Line 33, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Accounts (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b)).....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17 and 18(c)).....▶	3875.45	14409.96
20. Total Federal Receipts (subtract Line 16(c) from Line 19).....▶	3875.45	14409.96

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

I. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	641949	1454008
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	641949	1454008
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §411a(d)) (see Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(2))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Leaky" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	641949	1454008
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(ii) from Line 31)	641949	1454008

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	387545	1440996
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	387545	1440996
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	141949	1454008
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	141949	1454008

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 1 OF	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be used 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)
Democratic Party of Nez Perce County

Full Name (Last, First, Middle Initial) A. John Rusche		Date of Receipt 10 08 2004	
Mailing Address 1405 27th Ave		Amount of Each Receipt this Period 500.00	
City Lewiston	State ID	Zip Code 83501	
FEC ID number of contributing federal political committee. C			
Name of Employer Regence	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1075.00		

Full Name (Last, First, Middle Initial) B. Bill Fitzgerald		Date of Receipt 11 08 2004	
Mailing Address 221 7th Ave		Amount of Each Receipt this Period 250.00	
City Lewiston	State ID	Zip Code 83501	
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Debi Fitzgerald		Date of Receipt 11 08 2004	
Mailing Address 221 7th Ave		Amount of Each Receipt this Period 250.00	
City Lewiston	State ID	Zip Code 83501	
FEC ID number of contributing federal political committee. C			
Name of Employer LGSC	Occupation Service Corp		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2930.00		

SUBTOTAL of Receipts This Page (optional).....	Investment in this election is made by the individual contributor of the amount of the contribution shown on this receipt.
TOTAL This Period (last page this line number only).....	
	600.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page		FON LINE NUMBER: (check only one)		PAGE 1 OF	
<input type="checkbox"/> 1a	<input checked="" type="checkbox"/> 1b	<input type="checkbox"/> 1c	<input type="checkbox"/> 1d	<input type="checkbox"/> 1e	<input type="checkbox"/> 1f
<input type="checkbox"/> 1g	<input type="checkbox"/> 1h	<input type="checkbox"/> 1i	<input type="checkbox"/> 1j	<input type="checkbox"/> 1k	<input type="checkbox"/> 1l

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NAME OF COMMITTEE (In Full)
Democratic Party of Nez Perce County

Full Name (Last, First, Middle Initial) A. Idaho State Democratic Party		Date of Receipt 7c 29 2004
Mailing Address Po Box 445		Amount of Each Receipt this Period 1,000.00
City Boise	State Zip Code ID 83501	
FEC ID number of contributing federal political committee. C00010439		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1,000.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	1,000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FORM LINE NUMBER (check only one)	PAGE OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)
Democratic Party of Nez Perce County

Full Name (Last, First, Middle Initial) A. Mike Mitchell for House		Date of Receipt 11 03 2004
Mailing Address 1916 Gateway Dr		Amount of Each Receipt This Period 1,000.00
City Lewiston	State Zip Code ID 83501	
FEC ID number of contributing federal political committee 0		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1,000.00	

Full Name (Last, First, Middle Initial) B. Mike Vaccaro for Senate		Date of Receipt 11 03 2004
Mailing Address 2328 12th Ave		Amount of Each Receipt This Period 500.00
City Lewiston	State Zip Code ID 83501	
FEC ID number of contributing federal political committee 0		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt 11 03 2004
Mailing Address		Amount of Each Receipt This Period
City	State Zip Code	
FEC ID number of contributing federal political committee 0		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (roll over) ▶	1,500.00
TOTAL This Period (last page this line number only) ▶	1,500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2 OF
	<input checked="" type="checkbox"/> 21b <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26	
	<input type="checkbox"/> 27 <input type="checkbox"/> 25a <input type="checkbox"/> 25b <input type="checkbox"/> 25c <input type="checkbox"/> 25d <input type="checkbox"/> 25e	

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NAME OF COMMITTEE (in Full)
Democratic Party of Nez Perce County

A. Tribune Publishing

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **11/08/2004**

Mailing Address **505 C St**

City **Lewiston** State **ID** Zip Code **83501**

Purpose of Disbursement **Ads** Category Type **004**

Candidate Name _____

Amount of Each Disbursement this Period **31920**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

B. Debi Fitzgerald

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **11/08/2004**

Mailing Address **221 7th Ave**

City **Lewiston** State **ID** Zip Code **83501**

Purpose of Disbursement **Reimburse for Trac Phones & Time** Category Type **007**

Candidate Name _____

Amount of Each Disbursement this Period **1,956.84**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

C. Steeley Print & Binding

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **11/09/2004**

Mailing Address **201 C St**

City **Lewiston** State **ID** Zip Code **83501**

Purpose of Disbursement **GOTV Mailing** Category Type **007**

Candidate Name _____

Amount of Each Disbursement this Period **2022.02**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

SUBTOTAL of Disbursements This Page (optional) **429806**

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 2 OF 2

21b 27 22 28a 23 29b 24 25c 25 29 28 30b

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NAME OF COMMITTEE (in Full)

Democratic Party of Nez Perce County

Full Name (Last, First, Middle Initial)

A. Serendipity Food Co

Date of Disbursement:

9/7/08/2004

Mailing Address

1418 10th Ave

City

Lewiston

State

ID

Zip Code

83501

Purpose of Disbursement

Election Day Catering

007

Amount of Each Disbursement this Period

300.00

Candidate Name

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. US Post Office

Date of Disbursement:

9/24/2004

Mailing Address

1613 Idaho St

City

Lewiston

State

ID

Zip Code

83501

Purpose of Disbursement

Postage - GOTU mailing

007

Amount of Each Disbursement this Period

1,083.59

Candidate Name

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement:

.....

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

1,383.59

TOTAL This Period (last page this line number only)

5,681.65

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

The FEC 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"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): FED EX	Shipping Date 11/22/04
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>EA</i>	11/30/04
PREPARER	DATE PREPARED