

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
PUBLIC DISCLOSURE  
DIVISION

AUG 8 12 30 PM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
Democrats Abroad France

ADDRESS (number and street)  Check if different than previously reported  
96 Meredith Le Goff  
14, rue de Beaumont

CITY, STATE and ZIP CODE  
Paris France 75008

2. FEC IDENTIFICATION NUMBER  
C0027174

3.  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

Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
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	<u>01/01/97 through 06/30/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>			\$ <u>2833.32</u>
(b) Cash on Hand at Beginning of Reporting Period <u>01/01/97</u>	\$ <u>2833.32</u>		
(c) Total Receipts (from Line 1B)	\$ <u>9696.00</u>	\$ <u>9696.00</u>	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>12529.32</u>	\$ <u>12529.32</u>	
7. Total Disbursements (from Line 3D)	\$ <u>4804.46</u>	\$ <u>4804.46</u>	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>7725.46</u>	\$ <u>7725.46</u>	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact Federal Election Commission 900 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$		

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  
Meredith Le Goff

Signature of Treasurer  
Meredith Le Goff

Date  
07.22.97

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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FEC FORM 3X  
(revised 9/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
<i>Democrats Abroad France</i>	FROM	TO	
	01/01/97	06/30/97	
<b>I. Receipts</b>	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committee:			
I. Itemized (use Schedule A)	400	400	11(a)(1)
II. Unitemized	8560.60	8560.60	11(a)(2)
III. Total (add I and II) >	8960.60	8960.60	11(a)(3)
b. Political Party Committees			11(b)
c. Other Political Committee (such as PACs)			11(c)
d. Total Contributions (add a I, b and c) >			11(d)
12. Transfers From Affiliated/Other Party Committees	1136	1136	12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	9696.60	9696.60	19
20. Total Federal Receipts (subtract line 16 from line 19) >			20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4):			21(a)(1)
I. Federal Share			21(a)(2)
II. Non-Federal Share			21(a)(3)
b. Other Federal Operating Expenditures	4804.46	4804.46	21(b)
c. Total Operating Expenditures (add a I, a II, and b) >	4804.46	4804.46	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			28(a)
a. Individual/Persons Other Than Political Committees			28(b)
b. Political Party Committees			28(c)
c. Other Political Committee (such as PACs)			28(d)
d. Total Contribution Refunds (add a, b and c) >			28
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4804.46	4804.46	30
31. Total Federal Disbursements (subtract line 21 a II from line 30) >			31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)			32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from 32)			34
35. Total Federal Operating Expenditures (add 21 a I and 21 b) >			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 35 from 36) >			37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER

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)

*Democrats Abroad France*

**A. Full Name, Mailing Address and ZIP Code**  
*W. Barrett Dower*  
*21, rue Surcouf*  
*Paris France 75007*

Receipt For:  Primary  General  
 Other (specify):

Name of Employer  
*American Chamber of Commerce*

Occupation  
*President*

Aggregate Year-to-Date  $\rightarrow$  *\$200*

Date (month, day, year)

Amount of Each Receipt this Period  
*\$200*

**B. Full Name, Mailing Address and ZIP Code**  
*B. J. de Caligny Teripisio*  
*8, rue Brown Legend*  
*Nice France 06000*

Receipt For:  Primary  General  
 Other (specify):

Name of Employer  
*Retired*

Occupation

Aggregate Year-to-Date  $\rightarrow$  *\$200*

Date (month, day, year)

Amount of Each Receipt this Period  
*\$200*

**C. Full Name, Mailing Address and ZIP Code**

Receipt For:  Primary  General  
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date  $\rightarrow$  *\$*

Date (month, day, year)

Amount of Each Receipt this Period

**D. Full Name, Mailing Address and ZIP Code**

Receipt For:  Primary  General  
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date  $\rightarrow$  *\$*

Date (month, day, year)

Amount of Each Receipt this Period

**E. Full Name, Mailing Address and ZIP Code**

Receipt For:  Primary  General  
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date  $\rightarrow$  *\$*

Date (month, day, year)

Amount of Each Receipt this Period

**F. Full Name, Mailing Address and ZIP Code**

Receipt For:  Primary  General  
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date  $\rightarrow$  *\$*

Date (month, day, year)

Amount of Each Receipt this Period

**G. Full Name, Mailing Address and ZIP Code**

Receipt For:  Primary  General  
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date  $\rightarrow$  *\$*

Date (month, day, year)

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

*400*

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

*Democrats Abroad France*

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Copy Top 105 bd Hausmann Paris France 75008</i>	<i>Newsletter</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<del>11/9/94</del> 11/7/97	315.60
<i>B. Full Name, Mailing Address and ZIP Code La Poste 52, rue Jean Jacques Rousseau 75047 Paris Cedex 01</i>	<i>Mailing Newsletter</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/9/94	649.51
<i>C. Full Name, Mailing Address and ZIP Code Restaurant Vital 105-107 rue Voltaire 75017 Paris</i>	<i>Insurance dinner</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/22/97	1248
<i>D. Full Name, Mailing Address and ZIP Code Copy 2000 23, rue Mont Thabor 75001 Paris</i>	<i>Newsletter / election DAF</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	24/2/97	472
<i>E. Full Name, Mailing Address and ZIP Code La Poste 52, rue Jean Jacques Rousseau 75047 Paris</i>	<i>Postage</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	25/2/97	649.35
<i>F. Full Name, Mailing Address and ZIP Code Copy 2000 23, rue Mont Thabor 75001 Paris</i>	<i>Newsletter dinner</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	14/5/97	400
<i>G. Full Name, Mailing Address and ZIP Code La Poste 52, rue Jean Jacques Rousseau 75047 Paris Cedex 01</i>	<i>Postage</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	16/5/97	631.60
<i>H. Full Name, Mailing Address and ZIP Code</i>	<i>Purpose of Disbursement</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>Date (month, day, year)</i>	<i>Amount of Each Disbursement This Period</i>
<i>I. Full Name, Mailing Address and ZIP Code</i>	<i>Purpose of Disbursement</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>Date (month, day, year)</i>	<i>Amount of Each Disbursement This Period</i>

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

*4366.00*

**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 <b>7-31-97</b>
<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>JES</i>	<b>8-8-97</b>
PREPARER	DATE PREPARED