

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Aug 7 10 01 AM '95

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) <i>Nez Perce County Democratic Central Comm.</i>	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <i>2328-13th Ave</i>	2. FEC IDENTIFICATION NUMBER <i>C00022517</i>
CITY, STATE and ZIP CODE <i>Lewiston, Id 83501</i>	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

A. 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:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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 <i>1-1-93</i> through <i>6-30-93</i>		
6. (a) Cash on Hand January 1, 19 <i>93</i>		\$ <i>2227.79</i>
(b) Cash on Hand at Beginning of Reporting Period	\$ <i>2227.79</i>	
(c) Total Receipts (from Line 18)	\$ <i>4617.34</i>	\$ <i>4617.34</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <i>6845.13</i>	\$ <i>6845.13</i>
7. Total Disbursements (from Line 30)	\$ <i>6051.75</i>	\$ <i>6051.75</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <i>793.38</i>	\$ <i>793.38</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	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)	\$	

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
Vicki Holbrook
Signature of Treasurer
Vicki Holbrook

Date
8-1-95

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

FEC FORM 3X

(revised 8/93)

FEMAN101

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

(revised 1/1/81)

NAME OF COMMITTEE <i>Boz Perce County Democratic Central Com</i>		REPORT COVERING PERIOD	
		FROM <i>1-1-93</i>	TO <i>6-30-93</i>
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individual/Persons Other Than Political Committees		11(a)(i)
i.	Itemized (use Schedule A)	<i>4617.34</i>	<i>4617.34</i>
ii.	Unitemized		11(a)(ii)
iii.	Total	<i>4617.34</i>	<i>4617.34</i>
b.	Political Party Committees		11(b)
c.	Other Political Committees (such as PACs)		11(c)
d.	Total Contributions	<i>4617.34</i>	<i>4617.34</i>
12.	Transfers From Affiliated/Other Party Committees		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	<i>4617.34</i>	<i>4617.34</i>
20.	Total Federal Receipts		20
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4):		21(a)(i)
i.	Federal Share		21(a)(ii)
ii.	Non-Federal Share		21(b)
b.	Other Federal Operating Expenditures	<i>1051.75</i>	<i>1051.75</i>
c.	Total Operating Expenditures	<i>5000.00</i>	<i>5000.00</i>
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 Committees (such as PACs)		28(d)
d.	Total Contribution Refunds		29
29.	Other Disbursements		30
30.	Total Disbursements	<i>6051.75</i>	<i>6051.75</i>
31.	Total Federal Disbursements		31
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	<i>4617.34</i>	<i>4617.34</i>
33.	Total Contribution Refunds (from line 28d)		33
34.	Net Contributions (other than loans)(subtract line 33 from line 32)	<i>4617.34</i>	<i>4617.34</i>
35.	Total Federal Operating Expenditures		35
36.	Offsets to Operating Expenditures (from line 15)		36
37.	Net Operating Expenditures	<i>1051.75</i>	<i>1051.75</i>

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)

Nez Perce County Democratic Central Committee

95039932135

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>William J. Fitzgerald 523 1/2 main St Lewiston Id 83501</i>	<i>Appreciation Day Mail</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify <i>Appreciation Day</i>)	<i>4-9-93</i>	<i>216.⁰⁰</i>
<i>John R. Tait 928 Vista Lewiston Id 83501</i>	<i>Appreciation Day Newspaper Advertisements</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify <i>Appreciation Day</i>)	<i>4-9-93</i>	<i>486.⁰⁰</i>
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)	<i>702.⁰⁰</i>
TOTAL This Period (last page this line number only)	<i>702.⁰⁰</i>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 22

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)

Nez Perce County Democratic Central Committee

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9
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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Idaho State Democratic Party Boise, Id 83701	Share State Conv. Proceeds Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>State Conv.</u>	1/28/93	5000. ⁰⁰
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)

5000.⁰⁰

TOTAL This Period (last page this line number only)

5000.⁰⁰

**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.

Hand Delivered DATE OF RECEIPT

First Class Mail POSTMARKED
8-2-95

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

Jed
 PREPARER

8-7-95
 DATE PREPARED

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