

**THE DAYTON POWER & LIGHT COMPANY**  
**EMPLOYEES' FUND FOR RESPONSIBLE CITIZENSHIP**

P.O. BOX 8825  
DAYTON, OH 45401

JAN 29 13 26 AM '99

Kevin R. DeWine  
Treasurer

January 28, 1999

Federal Elections Commission  
999 E Street  
Washington, DC 20463

Dear Sirs:

Enclosed for filing is the 30 Day Post-Election Report following the General Election on 11/3/98, FEC Form 3X, for The Dayton Power and Light Company Employees' Fund For Responsible Citizenship.

Sincerely,



Enclosure

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

FEDERAL ELECTION  
COMMISSION  
JAN 29 10 15 AM '99

1. NAME OF COMMITTEE (in full)  
The Dayton Power & Light Company Employees' Fund  
For Responsible Citizenship

ADDRESS (number and street)  Check if different than previously reported  
P.O. Box 8825

CITY, STATE and ZIP CODE  
Dayton, Ohio 45401

2. FEC IDENTIFICATION NUMBER  
C00102947

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:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <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  |
- 12-Day Pre-Election Report for the \_\_\_\_\_  
(Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 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>11/24/98</u> through <u>12/31/98</u>		
6.	(a) Cash on Hand January 1, 19 <u>98</u>		\$ 10,151.49
	(b) Cash on Hand at Beginning of Reporting Period	\$ 7,414.49	
	(c) Total Receipts (from Line 19)	\$ 1,359.50	\$ 12,722.45
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 8,773.99	\$ 22,873.94
7.	Total Disbursements (from Line 30)	\$ 194.00	\$ 14,293.95
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 8,579.99	\$ 8,579.99
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
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  
Kevin R. DeWine

Signature of Treasurer *Kevin R. DeWine* Date 1/25/99

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	
The Dayton Power & Light Company Employees' Fund For Responsible Citizenship		FROM 11/24/98	TO 12/31/98
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11.	Contributions (other than loans) From:	455.00	2,677.00
a.	Individual/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	904.50	10,045.45
ii.	Unitemized		
iii.	Total (add i and ii) >	1,359.50	12,722.45
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions (add a ii, b and c) >	1,359.50	12,722.45
12.	Transfers From Affiliated/Other Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17.	Other Federal Receipts (Dividends, Interest, etc.)		
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,359.50	12,722.45
20.	Total Federal Receipts (subtract line 18 from line 19) >	1,359.50	12,722.45
<b>II. Disbursements</b>			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share		
ii.	Non-Federal Share		
b.	Other Federal Operating Expenditures		
c.	Total Operating Expenditures (add a i, a ii, and b) >		
22.	Transfers to Affiliated/Other Party Committees	0.00	13,485.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees		
24.	Independent Expenditures (use Schedule E)		
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26.	Loan Repayments Made		
27.	Loans Made		
28.	Refunds of Contributions To:	194.00	808.95
a.	Individuals/Persons Other Than Political Committees		
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contribution Refunds (add a, b and c) >		
29.	Other Disbursements	194.00	14,293.95
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	194.00	14,293.95
31.	Total Federal Disbursements (subtract line 28 i ii from line 30) >		
<b>III. Net Contributions/Operating Expenditures</b>			
32.	Total Contributions (other than loans)(from line 11d)	1,359.50	12,722.45
33.	Total Contribution Refunds (from line 28d)	194.00	808.95
34.	Net Contributions (other than loans)(subtract line 33 from 32)	1,165.50	11,913.50
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >		
36.	Offsets to Operating Expenditures (from line 15)		
37.	Net Operating Expenditures (subtract line 36 from 35) >		

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 11(a)1

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)**

The Dayton Power & Light Company Employees' Fund For Responsible Citizenship

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philip Copsey 1089 Winton Woods Dr. Maysville, KY 41056	DPL	Payroll Deduction	\$30.00 (\$10 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 270.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Neil Costello 7412 Heatherwood Court Dayton, Ohio 45459	DPL	Payroll Deduction	\$30.00 (\$10 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date > \$ 270.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kevin Crawford 4021 Beaumont Drive Dover, KY 41034	DPL	Payroll Deduction	\$30.00 (\$10 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 214.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kirk Guy 2396 Obetz Road Beavercreek, Ohio 45434	DPL	Payroll Deduction	\$36.00 (\$12 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 324.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Meyer 3325 Ridgeway Road Kettering, Ohio 45429	DPL	Payroll Deduction	\$60.00 (\$20 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 540.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Novosad 8281 Station House Road Centerville, Ohio 45458	DPL	Payroll Deduction	\$60.00 (\$20 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date > \$ 540.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patrick O'Loughlin 310 N. Village Drive Centerville, Ohio 45459	DPL	Payroll Deduction	\$60.00 (\$20 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date > \$ 460.00	

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

306.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 11(a)1

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**NAME OF COMMITTEE (in Full)**

The Dayton Power & Light Company Employees' Fund For Responsible Citizenship

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Richard Reid 5516 Anne Lane Dayton, Ohio 45459</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer DPL</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date &gt; \$ 270.00</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period \$30.00 (\$10 Bi-weekly)</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Thomas Studevant 1926 Shore Drive Bellbrook, Ohio 45305</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer DPL</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date &gt; \$ 216.00</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period \$24.00 (\$8 Bi-weekly)</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> James Tomasiak 30 Carlton Woods Springboro, Ohio 45066</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer DPL</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period \$20.00 (\$20 Bi-weekly)</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Clifford Waits 1057 Jersey Ridge Road Maysville, KY 41056</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer DPL</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date &gt; \$ 405.00</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period \$45.00 (\$15 Bi-weekly)</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Amy Wright 14789 Providence Road Brookville, Ohio 45309</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer DPL</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date &gt; \$ 270.00</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period \$30.00 (\$10 Bi-weekly)</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

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

149.00

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

455.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (In Full)**

The Dayton Power & Light Company Employees' Fund For Responsible Citizenship

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Refund-Cancel Participation 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
Carl Mason 4999 Broughton Place #C Dayton, Ohio 45431	Refund-Cancel Participation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/98	\$32.00
B. Full Name, Mailing Address and ZIP Code Craig Zimmerman 9526 S.R. 368 Unit #9 Huntsville, Ohio 43324	Purpose of Disbursement Refund-Cancel Participation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/98	\$162.00
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) ..... 194.00

TOTAL This Period (last page this line number only) ..... 194.00

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>1/24/99</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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
<input type="checkbox"/> Electronic Filing	
<i>DC</i> PREPARER	<i>1/24/99</i> DATE PREPARED