

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED

2012 APR 20 AM 8:26

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. BEAVER COUNTY DEMOCRAT COMMITTEE

ADDRESS (number and street) 215 OVERLOOK DRIVE BEAVER FALLS PA 15010

2. FEC IDENTIFICATION NUMBER C CITY STATE ZIP CODE 3. IS THIS REPORT NEW OR AMENDED X (N) (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: X April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 01 2012 through 03 31 2012

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 GAYE ANN TICE

Signature of Treasurer [Signature] Date 04 09 2012

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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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

*Beaver County Democrat Committee*

Report Covering the Period: From: <sup>M</sup>0<sup>M</sup>1' <sup>D</sup>0<sup>D</sup>1' <sup>Y</sup>2<sup>Y</sup>0<sup>Y</sup>1<sup>Y</sup>2 To: <sup>M</sup>0<sup>M</sup>3' <sup>D</sup>3<sup>D</sup>1' <sup>Y</sup>2<sup>Y</sup>0<sup>Y</sup>1<sup>Y</sup>2

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	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <sup>Y</sup> 2 <sup>Y</sup> 0 <sup>Y</sup> 1 <sup>Y</sup> 2	, , 0.00	, , 0.00
(b) Cash on Hand at Beginning of Reporting Period.....	, , 0.00	
(c) Total Receipts (from Line 19).....	, 5,300.00	, 5,300.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	, 5,300.00	, 5,300.00
7. Total Disbursements (from Line 31).....	, , 0.00	, , 0.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	, 5,300.00	, 5,300.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	, , 000	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	, , 0.00	

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 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

BEAVER COUNTY DEMOCRAT COMMITTEE

Report Covering the Period: From: <sup>M</sup>0<sup>M</sup>1' <sup>D</sup>0<sup>D</sup>1' <sup>Y</sup>20<sup>Y</sup>12 To: <sup>M</sup>0<sup>M</sup>3' <sup>D</sup>3<sup>D</sup>1' <sup>Y</sup>20<sup>Y</sup>12

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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).....	, , 0.00	, , 0.00
(ii) Unitemized.....	, , 0.00	, , 0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	, , 0.00	, , 0.00
(b) Political Party Committees.....	, 5,300.00	, 5,300.00
(c) Other Political Committees (such as PACs).....	, , 0.00	, , 0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	, 5,300.00	, 5,300.00
12. Transfers From Affiliated/Other Party Committees.....	, , 0.00	, , 0.00
13. All Loans Received.....	, , 0.00	, , 0.00
14. Loan Repayments Received.....	, , 0.00	, , 0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	, , 0.00	, , 0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	, , 0.00	, , 0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	, , 0.00	, , 0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	, , 0.00	, , 0.00
(b) Levin Funds (from Schedule H5).....	, , 0.00	, , 0.00
(c) Total Transfers (add 18(a) and 18(b))..	, , 0.00	, , 0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	, 5,300.00	, 5,300.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	, 5,300.00	, 5,300.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 4

II. 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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	0.00

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**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

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) .....	, 5,300.00	, 5,300.00
34. Total Contribution Refunds (from Line 28(d)) .....	, , 0.00	, , 0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	, 5,300.00	, 5,300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	, , 0.00	, , 0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	, , 0.00	, , 0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	, , 0.00	, , 0.00

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

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

FOR LINE NUMBER:		PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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

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)  
**BEAVER COUNTY DEMOCRAT COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CITIZENS FOR ALTMIRE</b>		Date of Receipt M M / D D / Y Y Y Y <b>03 / 12 / 2012</b>
Mailing Address <b>PO BOX 1776</b>		Amount of Each Receipt this Period  <b>, 150.00</b>
City <b>FREEDOM</b>	State Zip Code <b>PA 15042</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>, , .</b>	

Full Name (Last, First, Middle Initial) <b>B. CITIZENS FOR ALTMIRE</b>		Date of Receipt M M / D D / Y Y Y Y <b>03 / 12 / 2012</b>
Mailing Address <b>PO BOX 1776</b>		Amount of Each Receipt this Period  <b>, 5,000.00</b>
City <b>FREEDOM</b>	State Zip Code <b>PA 15042</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>, 5,150.00</b>	

Full Name (Last, First, Middle Initial) <b>C. MARK CRITZ FOR CONGRESS COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y <b>03 / 12 / 2012</b>
Mailing Address <b>551 MAIN ST. - SUITE 120</b>		Amount of Each Receipt this Period  <b>, 150.00</b>
City <b>JOHNSTOWN</b>	State Zip Code <b>PA 15901</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>, 150.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>, 5,300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>, 5,300.00</b>

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**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 OF

<input 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"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

**BEAVER COUNTY DEMOCRAT COMMITTEE**

Full Name (Last, First, Middle Initial)

<b>A.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period  , , .
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period  , , .
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period  , , .
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	, , 0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	, , 0.00

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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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

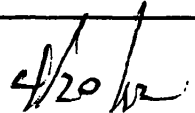
Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked



PREPARER  
(3/2005)



DATE PREPARED

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