

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

JUL 22 12 46 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <u>BEAVER COUNTY DEMOCRATIC COMMITTEE</u> <u>FEDERAL ELECTION ACCOUNT</u>		2. FEC IDENTIFICATION NUMBER <u>100 244 657</u>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <u>163 Parkview Drive</u>		
CITY, STATE and ZIP CODE <u>Frederick, Pa. 15042</u>		
3. <input type="checkbox"/> 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>4/1/96</u> through <u>6/30/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>			\$ <u>339.⁵⁶</u>
(b) Cash on Hand at Beginning of Reporting Period		\$ <u>6389.⁵⁶</u>	
(c) Total Receipts (from Line 19)		\$ <u>0</u>	\$ <u>0</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ <u>6389.⁵⁶</u>	\$ <u>339.⁵⁶</u>
7. Total Disbursements (from Line 30)		\$ <u>6097.⁹⁸</u>	\$ <u>6097.⁹⁸</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ <u>291.⁵⁸</u>	\$ <u>291.⁵⁸</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ <u>0</u>	For further information contact: Federal Election Commission 999 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)		\$ <u>0</u>	
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 <u>Jerry A. Hodge</u>			
Signature of Treasurer <u>Jerry A. Hodge</u>			Date <u>7/14/96</u>

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 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
		FROM	TO	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			11(a)(i)
i.	Itemized (use Schedule A)	0	0	11(a)(i)
ii.	Unitemized	0	0	11(a)(ii)
iii.	Total (add i and ii) >	0	0	11(b)
b.	Political Party Committees	0	0 0	11(c)
c.	Other Political Committees (such as PACs)	0	6389 36	11(d)
d.	Total Contributions (add a ii, b and c) >	0	0	12
12.	Transfers From Affiliated/Other Party Committees	0	0	13
13.	All Loans Received	0	0	14
14.	Loan Repayments Received	0	0	15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	17
17.	Other Federal Receipts (Dividends, Interest, etc.)	0	0	18
18.	Transfers from Nonfederal Account for Joint Activity	0	0	19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	0	0	20
20.	Total Federal Receipts (subtract line 18 from line 19) >	0	6389 36	
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	0		21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >	0		22
22.	Transfers to Affiliated/Other Party Committees	0		23
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0		24
24.	Independent Expenditures (use Schedule E)	0		25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0		26
26.	Loan Repayments Made	0		27
27.	Loans Made	0		
28.	Refunds of Contributions To:			28(a)
a.	Individuals/Persons Other Than Political Committees	0	0	28(b)
b.	Political Party Committees	0	0	28(c)
c.	Other Political Committees (such as PACs)	0	0	28(d)
d.	Total Contribution Refunds (add a, b and c) >	0	0	29
29.	Other Disbursements	6097 95	6097 95	30
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	6097 95	6097 95	31
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	6097 95	6097 95	
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans) (from line 11d)	0	0	33
33.	Total Contribution Refunds (from line 28d)	0	0	34
34.	Net Contributions (other than loans) (subtract line 33 from line 32)	0	6389 36	35
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	0	36
36.	Offsets to Operating Expenditures (from line 15)	0	0	37
37.	Net Operating Expenditures (subtract line 36 from line 35) >	0	0	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4
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)

BEAVER COUNTY DELEGATION COMMITTEE FEDERAL ELECTIONS 2002

A. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$

SUBTOTAL of Receipts This Page (optional)

NO RECEIPTS THIS PERIOD

0

TOTAL This Period (last page this line number only)

0

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 4
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Beaver County Democratic Committee Federal Election Act.

A. Full Name, Mailing Address and ZIP Code THE NEWS ALLEGANY, PA. 15001	Purpose of Disbursement AG - Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-10-96	Amount of Each Disbursement This Period 864 ⁰⁰
B. Full Name, Mailing Address and ZIP Code AMBROSE Democratic Committee 900 Kennedy Drive AMBROSE, PA. 15003	Purpose of Disbursement Election Expenses, pollworkers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-18-96	Amount of Each Disbursement This Period 1200 ⁰⁰
C. Full Name, Mailing Address and ZIP Code Baden Democratic Committee Anthony Wayne Theatre Baden, Pa. 15005	Purpose of Disbursement Election Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-18-96	Amount of Each Disbursement This Period 500 ⁰⁰
D. Full Name, Mailing Address and ZIP Code Beaver Democratic Committee 1301 Corporation St. Beaver, Pa. 15009	Purpose of Disbursement Election Expense pollworkers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-18-96	Amount of Each Disbursement This Period 200 ⁰⁰
E. Full Name, Mailing Address and ZIP Code Beaver Falls Democratic Committee 1201 5th Ave Beaver Falls, Pa. 15000	Purpose of Disbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-18-96	Amount of Each Disbursement This Period 700 ⁰⁰
F. Full Name, Mailing Address and ZIP Code Big Beaver Democratic Committee 106 Tolsonville Drive Beaver Falls, Pa. 15000	Purpose of Disbursement Election Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-18-96	Amount of Each Disbursement This Period 100 ⁰⁰
G. Full Name, Mailing Address and ZIP Code Venport Democrat Committee 387 State St. Beaver, Pa. 15009	Purpose of Disbursement pollworkers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-18-96	Amount of Each Disbursement This Period 150 ⁰⁰
H. Full Name, Mailing Address and ZIP Code Beaver Sup. Democrat Committee 261 Osipow Lane Mt. Pleasant, Pa. 15061	Purpose of Disbursement pollworkers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-18-96	Amount of Each Disbursement This Period 1000 ⁰⁰
I. Full Name, Mailing Address and ZIP Code Brighton Sup Democrat Committee 104 Grandview Dr Beaver, Pa. 15009	Purpose of Disbursement pollworkers, election expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-18-96	Amount of Each Disbursement This Period 300 ⁰⁰

SUBTOTAL of Disbursements This Page (optional)

5014⁶⁰

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chippewa Democratic Committee 105 Burns Ave Beaver Falls, Pa. 15010	pollworkers, election exp. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-18-96	400.00
Copway Democrat Committee 1204 Third St. Copway, Pa. 15027	pollworkers election exp. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-18-96	300.00
C. Full Name, Mailing Address and ZIP Code Darlington Twp Democrats Helm, Pa. P.O. #2 Darlington, Pa. 10116	Purpose of Disbursement pollworkers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-18-96	50.00
D. Full Name, Mailing Address and ZIP Code Earl Haaske 210 Woods Drive New Brighton, Pa. 15066	Purpose of Disbursement pollworkers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-18-96	100.00
E. Full Name, Mailing Address and ZIP Code Mark Hill Sr. 815 4th St. Rochester, Pa. 15042	Purpose of Disbursement election pollworkers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-18-96	75.00
F. Full Name, Mailing Address and ZIP Code Beaton Portsmouth Beaton, Pa. 15004	Purpose of Disbursement stamps for exp and mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-31-96	32.00
G. Full Name, Mailing Address and ZIP Code Big Knob Garage Rte 964/Huber cream rd Freedom, Pa. 15042	Purpose of Disbursement fair booth rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-31-96	75.00
H. Full Name, Mailing Address and ZIP Code Jenny Hodge (party Treasurer) 163 Ashburn Hudson, Pa. 15044	Purpose of Disbursement advertising for for beverage purchase exp. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6-28-96 picnic	6-28-96	51.38
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)

1083.38

TOTAL This Period (last page this line number only)

6097.75

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

7/20/96

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POSTMARKED

☐ No Postmark

☐ Postmark Illegible

☐ Received from the House Office of Records
and Registration

DATE OF RECEIPT

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Records

DATE OF RECEIPT

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MSM
PREPARER

7/22/96
DATE PREPARED