

2009 OCT 19 AM 10:49

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

DELAWARE COUNTY DEMOCRATIC COMMITTEE

ADDRESS (number and street)

PO Box 473



Check if different than previously reported. (ACC)

MEDIA

PA 19063

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00404590

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



July 31 Mid-Year Report (Non-election Year Only) (MY)



Termination Report (TER)

(b) Monthly Report Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11) (Non-Election Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12) (Non-Election Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

State

(d) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

State

5. Covering Period

03 01 2009

through

03 31 2009

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

GERARD LAWRENCE

Signature of Treasurer

[Handwritten Signature]

Date

10 09 2009

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

29030174233

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DELAWARE COUNTY DEMOCRATIC COMMITTEE

Report Covering the Period: From:

03 / 01 / 2009

To:

03 / 31 / 2009

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2009 | [] | [] 1,5023 |
| (b) Cash on Hand at Beginning of Reporting Period..... | [] 1,5023 | [] |
| (c) Total Receipts (from Line 19) | [] 6 | [] 0 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | [] 1,5023 | [] 1,5023 |
| 7. Total Disbursements (from Line 31)..... | [] 0 | [] 0 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | [] 1,5023 | [] 1,5023 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | [] | [] |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | [] | [] |



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

29030174234

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

DELAWARE COUNTY DEMOCRATIC COMMITTEE

Report Covering the Period: From: 03 01 2009 To: 03 31 2009

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).....
 - (ii) Unitemized
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

| |
|---|
| 0 |
| 0 |
| 0 |
| 0 |
| 0 |

| |
|---|
| 0 |
| 0 |
| 0 |
| 0 |
| 0 |

- (b) Political Party Committees
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

12. Transfers From Affiliated/Other Party Committees.....

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

13. All Loans Received.....

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

14. Loan Repayments Received.....

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

17. Other Federal Receipts (Dividends, Interest, etc.).....

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b))..

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

| |
|---|
| 0 |
|---|

| |
|---|
| 0 |
|---|

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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

| |
|---|
| 0 |
| 0 |
| 0 |
| 0 |
| 0 |
| 0 |

| |
|---|
| 0 |
| 0 |
| 0 |
| 0 |
| 0 |
| 0 |

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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.

| | |
|--|-------------------------------|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input checked="" type="checkbox"/> USPS First Class Mail | Postmarked |
| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/> | |
| <input type="checkbox"/> USPS Express Mail | Postmarked |
| <input checked="" type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| Next Business Day Delivery <input type="checkbox"/> | |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |

Jm D

PREPARER

(3/2005)

11/19/05

DATE PREPARED

29030174238