

Genesee County Democratic Party

1318 West Court Street
Flint, MI 48903

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

18101 238-2501

FAX 18101 238-2544

MAY 24 1 12 PM '99

To: Federal Election Commission
Attn: Donald L. Averett
From: Douglas Weiland, 2nd Vice Chairman
Subject: 30 Day Post-General Election Report (10/1/98 - 11/23/98)
& Year End Report (11/24/98 - 12/31/98)
ID#: C00299339
Date: May 19, 1999

It has come to my attention that the reports filed for the Genesee County Democratic Party are not correct. They have been filed as if the party has two bank accounts (Federal & State), when, in fact, there is only one bank account. Enclosed please find all amended reports for the 1998 year. The previous years will be amended to the best of our ability and sent in upon completion.

30 Day Post-General Election Report (10/1/98 - 11/23/98)

The Genesee County Democratic Party (GCDP) has only one account for all activities. Per conversations with Donald Averett, GCDP should have used Schedule B, therefore Schedule H1 was not and does not need to be filled out.

All Get Out the Vote (GOTV) expenses for the Genesee County Democratic Party were for generic GOTV activities for all Party candidates.

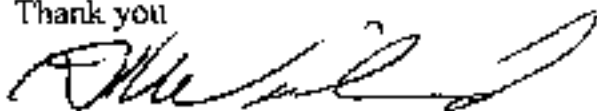
Genesee County Democratic Party should use Schedule B not H4. This amendment is attached.

Schedule A now reflects the Itemized Receipts. This amendment is attached.

Year End Report (11/24/98 - 12/31/98)

Attached please find the amendment to the year end report.

Thank you



Douglas K. Weiland, 2nd Vice Chairman
Genesee County Democratic Party

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

MAY 24 1 12 PM '99

1. NAME OF COMMITTEE (in full) Genesee County Democratic Party	2. FEC IDENTIFICATION NUMBER C-00299339
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1318 West Court Street	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Flint, MI 48503	

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

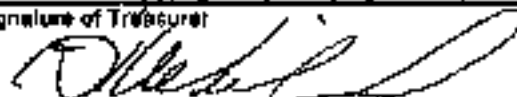
SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01-01-98</u> through <u>03-31-98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 723.24
(b) Cash on Hand at Beginning of Reporting Period	\$ 723.24	
(c) Total Receipts (from Line 19)	\$ —	\$ —
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 723.24	\$ 723.24
7. Total Disbursements (from Line 30)	\$ 33.20	\$ 33.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 690.04	\$ 690.04
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ —	For further information contact: Federal Election Commission 899 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
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

Douglas R. Weiland

Signature of Treasurer



Date

5-19-99

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 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
<i>Genoa County Democratic Party</i>	FROM <i>01-01-98</i>	TO <i>03-31-98</i>
Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	—	—
ii. Unitemized	—	—
iii. Total (add i and ii) >	—	—
b. Political Party Committees	—	—
c. Other Political Committees (such as PACs)	—	—
d. Total Contributions (add a, b, and c) >	—	—
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) >	—	—
20. Total Federal Receipts (subtract line 18 from line 19) >	—	—
Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	—	—
ii. Non-Federal Share	—	—
b. Other Federal Operating Expenditures	33.20	33.20
c. Total Operating Expenditures (add a, b, and c) >	33.20	33.20
22. Transfers to Affiliated/Other Party Committees	—	—
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:		
a. Individual/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	—	—
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	33.20	33.20
31. Total Federal Disbursements (subtract line 21 a, ii from line 30) >	33.20	33.20
Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	—	—
33. Total Contribution Refunds (from line 28d)	—	—
34. Net Contributions (other than loans) (subtract line 33 from 32)	—	—
35. Total Federal Operating Expenditures (add 21 a, i and 21 b) >	33.20	33.20
36. Offsets to Operating Expenditures (from line 15)	—	—
37. Net Operating Expenditures (subtract line 36 from 35) >	33.20	33.20

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 218

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)

Genesee County Democratic Party

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MICHIGAN NATIONAL BANK 6-1160 BALLANTRAE HWY FLINT, MI 48504	BANK CHARGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	1-12-98	11.00
MICHIGAN NATIONAL BANK 6-1160 BALLANTRAE HWY FLINT MI 48504	BANK CHARGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	2-10-98	11.10
MICHIGAN NATIONAL BANK 6-1160 BALLANTRAE HWY FLINT MI 48504	BANK CHARGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	3-16-98	11.10
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)


TOTAL This Period (last page this line number only)

33.20

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 5-20-99
<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	
	5-24-99
PREPARER	DATE PREPARED