

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) SIXTH DISTRICT Democratic Party of WISCONSIN	2. DATE January 5, 1999
(b) Number and Street Address <input checked="" type="checkbox"/> (Check if address is changed) 304 W. SOUTH Park	3. FEC Identification Number C00274407
(c) City, State and ZIP Code Osh	4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

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5. TYPE OF COMMITTEE (Check one)

(a) This committee is a principal campaign committee. (Complete the candidate information below.)

(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate	Candidate Party Affiliation	Office Sought	State/District

(c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee. (name of candidate)

(d) This committee is a subordinate committee of the Democratic Party Party. (National, State or subordinate) (Democratic, Republican, etc.)

(e) This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Democratic Party of WISCONSIN	SUITE 400 332 STATE STREET MADISON, WI 53703-2273	State/District

Type of Connected Organization
 Corporation Corporation with Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name <u>Mike Norton</u>	Mailing Address <u>304 W. SOUTH Park - Oshkosh, WI 54902</u>	Title or Position <u>Secretary</u>
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8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name <u>Mike Norton</u>	Mailing Address <u>304 W. SOUTH Park - Oshkosh, WI</u>	Title or Position <u>Treasurer</u>
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9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc. <u>Fox Cities Bank</u>	Mailing Address and ZIP Code <u>PO Box 80 Oshkosh, WI 54902-0080</u>
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I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER <u>Michael J. Norton</u>	SIGNATURE OF TREASURER <u>Michael J. Norton</u>	DATE <u>1-5-99</u>
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

LUCY DENNY-FEC
999 E. STREET
WASHINGTON DC 20463
1-800-424-8530

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Dear Ms. Denny :

I am writing this letter, along with the completed end of the year report, to state that after months of bad recordkeeping by the former Treasurer I have took over the position of Treasurer. I can assure you that reports will be done on time and there will be no more miscommunication between the FEC and the Sixth District Democratic Party of Wisconsin.

I decided to do one report for the period of July 1998 to December 31, 1998 for the reason that I did not take over the position until mid-December. Any questions please feel free to contact me.

Sincerely,

Mike Norton

MIKE NORTON
14 W. SOUTH PARK AVENUE
OSHKOSH, WI 54901
920-233-0586

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.

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<i>SW</i> PREPARER	1-11-99 DATE PREPARED