



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-5

Nathan Weeks, Treasurer
Democratic Party of Nezperce County
RR 2, Box 31
Reubens, ID 83548

JUN 18 1999

Identification Number: C00022517

Reference: 30 Day Post-General Report (10/16/98-11/23/98)

Dear Mr. Weeks:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-A review of the reports filed by your committee (pertinent portion(s) attached) indicates that your committee received a transfer(s) from Idaho State Democratic Party which has not been disclosed on their report(s) of receipts and disbursements. Please provide clarifying information regarding the source of the transfer(s) received by your committee.

Any amendment or clarification should be filed with the Federal Election Commission. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 694-1130.

Sincerely,

A handwritten signature in cursive script that reads "A. L. Kitchen".

Antoinette Kitchen
Reports Analyst
Reports Analysis Division

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1 FOR LINE NUMBER 116

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)

Democratic Party of Nez Perce County

AK

A. Full Name, Mailing Address and ZIP Code
Idaho State Democratic Party
PO Box 445
Boise ID 83701

Name of Employer
Occupation

Date (month, day, year)
10/29/98
11/2/98

Amount of Each Receipt this Period
\$500
200

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date \$ 800

B. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General Other (specify):

Aggregate Year-to-Date \$

SUBTOTAL of Receipts This Page (optional)

700

TOTAL This Period (last page this line number only)

700

