REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

C00207944 081898 N 268
BARBARA P LEE
TENTH CONGRESSIONAL DISTRICT D
EMOCRATIC COMMITTEE OF VIRGINI
ROUTE 1 BOX 860
BLUEMONT VA 20135

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER C00207944

3. [x] 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
[x] 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

[ ] 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 [x] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 7-1-98 through 9-30-98		
6. (a) Cash on Hand January 1, 19 98		$ 2,137.49
(b) Cash on Hand at Beginning of Reporting Period	$ 4,488.41	
(c) Total Receipts (from Line 19)	$ 308.65	$ 6,719.85
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 4,797.06	$ 8,857.34
7. Total Disbursements (from Line 30)	$ 63.51	$ 4,123.79
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 4,733.55	$ 4,733.55
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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: BARBARA P. LEE

Signature of Treasurer: Barbara P. Lee

Date: 10-1-98

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 8/93)

FEBAN064

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

Federal Account

(revised 1/1/91)

NAME OF COMMITTEE: 10th Congressional District Democratic Party of Virginia

REPORT COVERING PERIOD FROM 7-1-98 TO: 9-30-98

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	248.85	5,714.85	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) ➤	248.85	5,714.85	11(a)(iii)
b. Political Party Committees	60.00	1,005	11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	$308.85	6,719.85	11(d)
12. Transfers From Affiliated/Other Party Committees	0	–	12
13. All Loans Received	0	–	13
14. Loan Repayments Received	0	–	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	–	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	–	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0	–	17
18. Transfers from Nonfederal Account for Joint Activity	0	–	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	$308.85	6,719.85	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	308.85	6,719.85	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	$63.51	1,623.79	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	63.51	1,623.79	21(c)
22. Transfers to Affiliated/Other Party Committees	0	–	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	2,500	23
24. Independent Expenditures (use Schedule E)	0	–	24
25. Coordinated Expenditures Made by Party Committees [2 U.S.C. 441a(d)] (use Schedule F)	0	–	25
26. Loan Repayments Made	0	–	26
27. Loans Made	0	–	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	–	28(a)
b. Political Party Committees	0	–	28(b)
c. Other Political Committees (such as PACs)	0	–	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0	0	28(d)
29. Other Disbursements	0	–	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	$63.51	4,123.79	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	$63.51	4,123.79	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	308.85	6,719.85	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	308.85	6,719.85	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	63.51	4,123.79	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	63.51	4,123.79	37

FEBAN084

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 19

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): 10th Congressional District Democratic Party of Virginia Federal Account

	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code: Robert L. Weinberg, 4 Quaintance Road, Sperryville, VA 22740 — Receipt For: ☐ Primary ☐ General ☑ Other (specify): Administrative Expenses	Name of Employer: Self-employed — Occupation: Attorney Retired — Aggregate Year-to-Date: $ 200	7/23/98	$200.00
B. Full Name, Mailing Address and ZIP Code: Warren Co Public Schools, 111 E. Criser Road, Front Royal VA 22630 — Receipt For: ☐ Primary ☐ General ☑ Other (specify): Overpayment for Convention	Name of Employer: NA — Occupation: — Aggregate Year-to-Date: $ 48.85	7/9/98	$48.85
C. Full Name, Mailing Address and ZIP Code: Warren Co Democratic Office, c/o Frances Covastone, Front Royal VA 22630 — Receipt For: ☐ Primary ☐ General ☑ Other (specify): Convention Fees	Name of Employer: NA — Occupation: Delegate Fees — Aggregate Year-to-Date: $ 60.00	7/11/98	$60.00
D. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer — Occupation — Aggregate Year-to-Date: $		
E. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer — Occupation — Aggregate Year-to-Date: $		
F. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer — Occupation — Aggregate Year-to-Date: $		
G. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer — Occupation — Aggregate Year-to-Date: $		

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	$ 308.85

FE8AN084

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 21b

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)
10th Congressional District Democratic Party of Virginia (Federal Account)

A. Full Name, Mailing Address and ZIP Code Frances Thompson 373 Ritenhour Hollow Middletown, VA 22645	Purpose of Disbursement Custodial Fee Disbursement for: ☐ Primary ☐ General ☑ Other (specify) Convention	Date (month, day, year) 7/14/98	Amount of Each Disbursement This Period $63.51
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)	$63.51

FEBAN064

SCHEDULE C
(Revised 3/80)

LOANS

Page 1 of 1 for
LINE NUMBER 27
(Use separate schedules for each numbered line)

Name of Committee (in Full)
10th Congressional District Democratic Party of Virginia

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: ☐ Primary ☐ General ☐ Other (specify):			

Terms: Date Incurred_____ Date Due_____ Interest Rate_____%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: ☐ Primary ☐ General ☐ Other (specify):			

Terms: Date Incurred_____ Date Due_____ Interest Rate_____%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		

SUBTOTALS This Period This Page (optional) .....

TOTALS This Period (last page in this line only) 0

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FE8AN084

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
10th Congressional District				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor: Democratic Party of Virginia				
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page in this line only)	0
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

FEBAN064

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
☑	Registered/Certified Mail	POSTMARKED 10-27-98
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

JMJ
PREPARER

10-30-98
DATE PREPARED

(4/98)