

**AGGREGATION PAGE  
NON-FEDERAL ACCOUNTS OF NATIONAL PARTY  
COMMITTEES**

(Use a separate Aggregation Page for each nonfederal account)

NAME OF FEDERAL COMMITTEE		Non-Federal Corporate	
DNC Services Corp. / Democratic National Committee			
NAME OF ACCOUNT	COVERAGE PERIOD		
	FROM	TO	
Non-Federal Corporate	7/1/96	9/30/96	
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE	
<b>RECEIPTS</b> (ATTACH SUPPORTING MEMO SCHEDULE A ITEMIZING RECEIPTS AGGREGATING IN EXCESS OF \$200 DURING THE CALENDAR YEAR)			
1. TOTAL RECEIPTS:	\$12,534,246.00	33,093,509.55	
<b>DISBURSEMENTS:</b> (ATTACH SUPPORTING MEMO SCHEDULE B ITEMIZING DISBURSEMENTS AGGREGATING IN EXCESS OF \$200 DURING THE CALENDAR YEAR)			
2. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT FOR ALLOCABLE EXPENSES	3,256,238.04	9,306,589.33	
3. TRANSFERS TO STATE/LOCAL PARTY ORGANIZATIONS	4,996,996.45	15,536,243.77	
4. DIRECT STATE/LOCAL CANDIDATE SUPPORT	- 0 -	- 0 -	
5. OTHER DISBURSEMENTS	4,810,018.57	5,478,264.86	
6. TOTAL DISBURSEMENTS (ADD 2, 3, 4, AND 5)	13,063,243.06	30,336,258.88	
<b>SUMMARY</b>			
7. BEGINNING CASH ON HAND (FOR COLUMN B USE CASH AS OF JANUARY 1ST)	4,546,288.10	1,260,030.37	
8. RECEIPTS (FROM LINE 1)	12,534,246.00	33,093,509.55	
9. SUBTOTAL	17,080,534.10	34,353,539.92	
10. DISBURSEMENTS (FROM LINE 6)	13,063,253.06	30,336,258.88	
11. ENDING CASH ON HAND	4,017,281.04	4,017,281.04	

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)

DNC Non-Federal Corporate

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
See Schedule H4, Line 21a for additional unitemized in-kind contributions received			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		20,671.80
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) ..... 20,671.80

TOTAL This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE **1** OF  
FOR LINE NUMBER  
**5**

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**NAME OF COMMITTEE (In Full)**

**DNC Non-Federal Corporate**

A. 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
See Schedule H4, Line 21a for additional itemized in-kind contributions received			20,671.80
B. 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
C. 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
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) .....

20,671.80

**TOTAL** This Period (last page this line number only) .....