REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Arlington Democratic Joint Campaign

ADDRESS (number and street) ☐ Check if different than previously reported
4620 Lee Highway, Suite 208

CITY, STATE and ZIP CODE
Arlington, VA 22207

JUN 26 3 55 PM 95

2. FEC IDENTIFICATION NUMBER
C00297226

3. ☐ 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

☒ 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

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day 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 07/01/94 through 09/30/94		
6. (a) Cash on Hand January 1, 19 94		$ -0-
(b) Cash on Hand at Beginning of Reporting Period	$ -0-	
(c) Total Receipts (from Line 19)	$ 27,934.00	$ 27,934.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 27,934.00	$ 27,934.00
7. Total Disbursements (from Line 30)	$ 19,984.12	$ 19,984.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 7,949.88	$ 7,949.88
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 202-219-3420

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
Dave Roberts

Signature of Treasurer
David L. Roberts

Date
6/19/95

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 9/93)

FE4AN101

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

(revised 1/1/91)

NAME OF COMMITTEE: Arlington Democratic Joint Campaign

REPORT COVERING PERIOD FROM 07/01/94 TO: 09/30/94

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)	4920.00	4920.00
ii. Unitemized	16014.00	16014.00
iii. Total (add i and ii) ➤	20934.00	20934.00
b. Political Party Committees	-0-	-0-
c. Other Political Committees (such as PACs)	1000.00	1000.00
d. Total Contributions (add a iii, b and c) ➤	21934.00	21934.00
12. Transfers From Affiliated/Other Party Committees	-0-	-0-
13. All Loans Received	1500.00	1500.00
14. Loan Repayments Received	-0-	-0-
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	4500.00	4500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	-0-	-0-
18. Transfers from Nonfederal Account for Joint Activity	-0-	-0-
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	27934.00	27934.00
20. Total Federal Receipts (subtract line 16 from line 19) ➤	27934.00	27934.00
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	-0-	-0-
ii. Non-Federal Share	-0-	-0-
b. Other Federal Operating Expenditures	13484.12	13484.12
c. Total Operating Expenditures (add a i, a ii, and b) ➤	13484.12	13484.12
22. Transfers to Affiliated/Other Party Committees	-0-	-0-
23. Contributions to Federal Candidates/Committees and Other Political Committees	4500.00	4500.00
24. Independent Expenditures (use Schedule E)	-0-	-0-
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-
26. Loan Repayments Made	1500.00	1500.00
27. Loans Made	-0-	-0-
28. Refunds of Contributions To:	-0-	-0-
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees	-0-	-0-
c. Other Political Committees (such as PACs)	500.00	500.00
d. Total Contribution Refunds (add a, b and c) ➤	500.00	500.00
29. Other Disbursements	-0-	-0-
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	19984.12	19984.12
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	19984.12	19984.12
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	21934.00	21934.00
33. Total Contribution Refunds (from line 28d)	500.00	500.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	21434.00	21434.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	13484.12	13484.12
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-
37. Net Operating Expenditures (subtract line 36 from 35) ➤	13484.12	13484.12

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11ai

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)
Arlington Democratic Joint Campaign

FEC ID No. C00297226

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Barbara Ratchford 2816 N. Jefferson Street Arlington, VA 22207 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Arlington Public Schools Occupation: Teacher Aggregate Year-To-Date > $ 300.00	9/5/94 9/8/94	200.00 100.00
B. David N. Roberts 3925 Chesterbrook Road Arlington, VA 22207 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	SAIC Occupation: Director Aggregate Year-To-Date > $ 495.00	7/1/94 8/8/94 9/19/94	125.00 250.00 120.00
C. Thomas Spavins 500 N.Park Drive Arlington, VA 22203 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	F.C.C. Occupation: Economist Aggregate Year-To-Date > $ 200.00	8/15/94	200.00
D. Lee Stinnett 5080 Yorktown Blvd. Arlington, VA 22207 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Amer. Soc. Newspaper Editors Occupation: Exec. Director Aggregate Year-To-Date > $ 200.00	8/9/94	200.00
E. Yuen Fung Chu Wang 1300 Army Navy Drive, #409 Arlington, VA 22202 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Int. Corp. of Amer. Occupation: President Aggregate Year-To-Date > $ 200.00	8/8/94	200.00
F. Mary Margaret Whipple 3556 N. Valley Street Arlington, VA 22207 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Arlington County Occupation: Elected Official Aggregate Year-To-Date > $ 590.00	7/26/94 8/10/94 9/25/94	400.00 140.00 50.00
G. Full Name, Mailing Address and ZIP Code Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	1985.00
TOTAL This Period (last page this line number only)	4920.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 11c

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)
Arlington Democratic Joint Campaign

FEC ID No. C00297226

A. Full Name, Mailing Address and ZIP Code Jim Horan for Congress P.O.Box 2518 Alexandria, VA 22301	Name of Employer	Date (month, day, year) 7/26/94	Amount of Each Receipt this Period 500.00
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date > $ 500.00		
B. Full Name, Mailing Address and ZIP Code Whipple for County Board 4620 Lee Highway Arlington, VA 22207	Name of Employer *Invalid contribution refunded 7/12/94	Date (month, day, year) 7/7/94	Amount of Each Receipt this Period 500.00
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date > $ 500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date > $		

SUBTOTAL of Receipts This Page (optional) >	5500.00
TOTAL This Period (last page this line number only) >	5500.00

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 16

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)

Arlington Democratic Joint Campaign

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Moran for Congress P.O. Box 2518 Alexandria, VA 22301	N/A	9/15/94 (contribution itemized on this quarterly report)	$4,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: N/A Aggregate Year-to-Date > $ 4,500.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	$4,500.00
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 3

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)

Arlington Democratic Joint Campaign

FEC ID No. C00297226

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
A. US Postal Service Merrifield Post Office Merrifield, VA 22116	Postage	07/21/94 07/27/94	36.40 350.00
B. Arlington Co. Dem. Committee PO Box 1443 Arlington, VA 22210	Mailing Labels	07/25/94 08/04/94	75.00 75.00
C. Kinko's Copy Center 2300 Clarendon Boulevard Arlington, VA 22201	Printing	07/26/94 07/28/94	823.72 316.69
D. DGP Printing 5641 J General Washington Dr Alexandria, VA 22312	Printing	08/04/94 08/31/94	3131.53 4624.13
E. Karen Darner 969 S. Buchanan Street Arlington, VA 22204	Printing Reimbursement	08/22/94	47.03
F. David W. Roberts 3925 Chesterbrook Road Arlington, VA 22207	Postage Reimbursement	08/01/94	2.39
G. Jim Hayes 3191 N. 18th Street Arlington, VA 22201	Supplies Reimbursement	08/01/94	19.81
H. Paul Ferguson 4204 S. 35th Street Arlington, VA 22206	Printing Reimbursement	08/22/94	63.48
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) 7,564.18

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

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)

Arlington Democratic Joint Campaign FEC ID No. C00297225

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Charlene Bickford 3220 N. 5th Street Arlington, VA 22201	Postage Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/25/94	292.32
B. Full Name, Mailing Address and ZIP Code US Postal Service Merrifield Post Office Merrifield, VA 22116	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/30/94	850.00
C. Full Name, Mailing Address and ZIP Code Virginia Commerce Bank Arlington, VA 22201	Purpose of Disbursement Bank Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/12/94 07/15/94	10.10 77.28
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)	1229.70
TOTAL This Period (last page this line number only)	13484.12

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 23

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)

Arlington Democratic Joint Campaign

A. Full Name, Mailing Address and ZIP Code TDI 1025 Connecticut Ave., N.W. Ste. 906 Washington, D.C. 20036	Purpose of Disbursement Posters – Rep. Jim Moran House Candidate (8th, VA) Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 8/25/94	Amount of Each Disbursement This Period $4,500.00
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)	$4,500.00

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 6-26-95
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	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

[signature] PREPARER

6-26-95 DATE PREPARED

FEC FORM 70-2 (12/92)