REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM

'98 JUL 17 11 42 AM

1. NAME OF COMMITTEE (in full)

Democratic State Committee (Delaware)

ADDRESS (number and street) ☐ Check if different than previous reported

P.O. Box 2605

CITY, STATE and ZIP CODE

Wilmington, DE 19899

2. FEC IDENTIFICATION NUMBER

C00211763

3. ☐ This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) ☒ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Quarterly 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 _____ 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 01/01/98 through 03/31/98		
6. (a) Cash on Hand January 1, 19 98		$ 18,429.60
(b) Cash on hand at Beginning of Reporting Period	$ 18,429.60	
(c) Total receipts (from Line 19)	$ 18,839.84	$ 18,839.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 37,269.44	$ 37,269.44
7. Total Disbursements (from Line 30)	$ 27,422.36	$ 27,422.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 9,847.08	$ 9,847.08
9. Debts and Obligations Owed the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed the Committee (Itemized all on Schedule C and/or Schedule D)	$ 5,000.00	

For Information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-376-3120

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

J. Brian Murphy

Signature of Treasurer

Date

7-14-98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

ISS-FSX-781

FEC FORM 3X

(revised 1/1/91)

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1
LINE NUMBER 11
(Use separate schedule 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
DEMOCRATIC STATE COMMITTEE OF				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor AMS COMM INC GOLDEN GATEWAY SAN FRANCISCO CA 94121	5,000.00	—	—	5,000.
Nature of Debt (Purpose): Literature				
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)	5,000.00
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)	5,000.00

FE8AN004

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 2/14/98
☐	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	

SKP
PREPARER

2/20/98
DATE PREPARED

(4/98)