REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 OCT 26 A 11:53

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full): Mississippi Democratic Party Pac

ADDRESS (number and street) ☐ Check if different than previously reported
832 North Congress

CITY, STATE and ZIP CODE
Jackson MS 39215

2. FEC IDENTIFICATION NUMBER: C00149641

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

☒ 12-Day Pre-Election Report for the General (Type of Election) election on Nov 7 in the State of MS

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☐ NO

SUMMARY Covering Period Oct 1, 2000 through Oct 18, 2000	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.		$<829.42>
6. (a) Cash on Hand January 1, 2000	$ 36590.41	
(b) Cash on Hand at Beginning of Reporting Period	$ 88912.89	$ 326321.73
(c) Total Receipts (from Line 19)	$ 125503.30	$ 325492.31
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 120600.00	$ 320589.01
7. Total Disbursements (from Line 30)	$ 4903.30	$ 4903.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ -0-	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 12550.00	
10. Debts and Obligations Owed BY the Committee (95 & 96 Audit) (Itemize all on Schedule C and/or Schedule D)		

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: Jodie Robinson

Signature of Treasurer: [signature]

Date: 10/24/00

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 9/99)

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

(revised 1/1/91)

NAME OF COMMITTEE: MS Democratic Party PAC

REPORT COVERING PERIOD FROM: Oct 1, 2000 TO: Oct 18, 2000

	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)	4492.89	7192.89	11(a)(i)
ii. Unitemized	840.00	8902.91	11(a)(ii)
iii. Total (add i and ii) ➤	5332.89	16095.80	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	5332.89	16095.80	11(d)
12. Transfers From Affiliated/Other Party Committees		101545.93	12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity	83580.00	208680.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	88912.89	326321.73	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	5332.89	117641.73	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	36180.00	94226.59	21(a)(i)
ii. Non-Federal Share	84420.00	219862.42	21(a)(ii)
b. Other Federal Operating Expenditures	0	2000.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	120600.00	316089.01	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees [2 U.S.C. 441a(d)] (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	4500.00	28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	120600.00	320589.01	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	36180.00	100726.59	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	5332.89	16095.80	32
33. Total Contribution Refunds (from line 28d)	0	4500.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	5332.89	11595.80	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	36180.00	96226.59	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	36180.00	96226.59	37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11a i

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)
Ms Democratic Party Pac

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. DNC 430 S Capitol SE Washington DC 20003		10/10	655.32
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date $	10/13	837.57
B.			
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date $		
C.			
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date $		
D.			
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date $		
E.			
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date $		
F.			
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date $		
G.			
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional) 1492.89

TOTAL This Period (last page this line number only) 1492.89

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full): Ms Democratic Party Pac

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jon Levingston PO Box 26 Clarksdale MS 38614-0006	Levingston Furniture	10/2/00	3000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Bussinessman Aggregate Year-to-Date $ 3000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	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
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	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
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	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
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	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
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	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
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only) 3000.00

FEBAN1.21

RECEIPT SCHEDULE H3
(effective 1/1/91)

TRANSFERS FROM NON-FEDERAL ACCOUNTS

PAGE 1 OF 1

FOR LINE 18

NAME OF COMMITTEE: Ms Democratic Party Pac

TOTAL AMOUNT TRANSFERRED: $ 83580.00

NAME OF ACCOUNT: Ms Dem State Acct

DATE OF RECEIPT: 10/2/00

	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive	83580.00		
ii) Direct Fundraising (List Events-Amount for Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

NAME OF ACCOUNT:

DATE OF RECEIPT:

$

	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive			
ii) Direct Fundraising (List Events-Amount for Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DCS	
SUBTOTAL THIS PAGE				83580.00
TOTAL THIS PERIOD				83580.00

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DISBURSEMENT SCHEDULE H4
(effective 1/1/91)

JOINT FEDERAL/NON-FEDERAL ACTIVITY SCHEDULE

PAGE 1 OF 1

FOR LINE 21a

NAME OF COMMITTEE: Miss Democratic Party Pac

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Keelan Sanders 1411 Fernwood Jackson MS 39215	Temp office help	10/1/00 10/5/00 10/14/00	400— 400— 400—	120— 120— 120—	280— 280— 280—
CATEGORY: [X] ADMINISTRATIVE/VOTER DRIVE [ ] FUNDRAISING [ ] EXEMPT [ ] DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: $ 201,189.01					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Morris, Carrick & Buna 271 Madison Ave New York NY	media advertising	10/2/00	119400—	35820.00	83580.00
CATEGORY: [X] ADMINISTRATIVE/VOTER DRIVE [ ] FUNDRAISING [ ] EXEMPT [ ] DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: $ 320,789.01					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: [ ] ADMINISTRATIVE/VOTER DRIVE [ ] FUNDRAISING [ ] EXEMPT [ ] DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: $					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: [ ] ADMINISTRATIVE/VOTER DRIVE [ ] FUNDRAISING [ ] EXEMPT [ ] DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: $					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: [ ] ADMINISTRATIVE/VOTER DRIVE [ ] FUNDRAISING [ ] EXEMPT [ ] DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: $					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: [ ] ADMINISTRATIVE/VOTER DRIVE [ ] FUNDRAISING [ ] EXEMPT [ ] DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: $					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			1206.00	36180.00	84420.00
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a i and non-Fed. share to 21 a ii)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					84420.00

FE7AND47

DEBTS AND OBLIGATIONS
Excluding Loans

SCHEDULE D
(revised 3/80)

Name of Organization (Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Ms Dem Party Pac				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Jackson Iron & Metal Co PO Box 23309 Jackson MS 39225-3309	1000.00	0	0	1000.00
Nature of Debt (Purpose) 96 Refund Cont				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Ameristar Casino 4116 Washington St Vicksburg MS 39180	2000.00	0	0	2000.00
Nature of Debt (Purpose) 96 Refund Cont				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Buddy Medlin & Assoc PO Box 24087 Jackson MS 39225	1000.00	0	0	1000.00
Nature of Debt (Purpose) 96 Refund Contr				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Gulf National Life Ins PO Box 430 Ocean Springs MS 39564	700.00	0	0	700.00
Nature of Debt (Purpose) 95/96 Refund Cont				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Issue Management PO Box 16965 Jackson MS 39236-6165	1000.00	0	0	1000.00
Nature of Debt (Purpose) 96 Refund Cont.				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor McGilinchey Stafford Lang PO Box 60642 New Orleans LA 70160	1000.00	0	0	1000.00
Nature of Debt (Purpose) 96 Refund Cont				

1) SUBTOTALS This Period This Page (optional)	6700.00
2) TOTALS This Period (last page in this line only)	12550.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	0
4) ADD 2 and 3, and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedules for each numbered line)

Name of Committee (Filer) MS Democratic Party Inc	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor market Direct Inc 460 Briarwood Dr St 300 Jackson MS 39206	1000 00	0	0	1000 00
Nature of Debt (Purpose) 96 Refund Contr.				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Harrah's Operating Co 1023 Cherry Rd Memphis TN 38117	1000 00	0	0	1000 00
Nature of Debt (Purpose) 96 Refund Contr.				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Carpenter Construction Co Po Box 1608 Grenada MS 38902-1608	1000 00	0	0	1000 00
Nature of Debt (Purpose) 96 Refund Contr.				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Chevron Corporation Lewistown Montanta	500 00	0	0	500 00
Nature of Debt (Purpose) 96 Refund Contr.				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Crosthwait Terry PLC Po Box 2398 Jackson MS 39225-2398	1250 00	0	0	1250 00
Nature of Debt (Purpose) 96 Refund Cont.				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Maximus Inc 939 N President Jackson MS 39202	1100 00	0	0	1100 00
Nature of Debt (Purpose) 96 Refund Cont				
1. SUBTOTALS This Period This Page (optional)				5850 00
2. TOTALS This Period (last page in this line only)				
3. TOTAL OUTSTANDING LOANS from Schedule C (last page only)				0
4. ADD 2, and 3, and carry forward to appropriate line of Summary Page (last page only)				

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 10/25/00
☐	Registered/Certified Mail	POSTMARKED (R/C)
☐	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	

CR	10/26/00
PREPARER	DATE PREPARED

(6/2000)