

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

MONTGOMERY COUNTY DEMOCRATIC COMMITTEE

Marcel Groen, Chair
Beth Stern Fleming, Treasurer

DEC 6 10 49 AM '98

December 2, 1998

CERTIFIED MAIL AND
RETURN RECEIPT REQUESTED

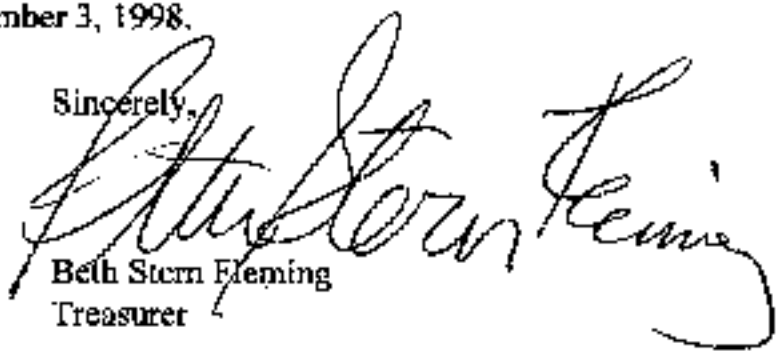
Federal Election Commission
999 "E" Street, N.W.
Washington, DC 20463

Re: Montgomery County Democratic Committee Report of
Receipts and Disbursements
Thirty (30) Day Post-Election Report

To Whom this may concern:

Enclosed please find Montgomery County Democratic Committee's
Report of Receipts and Disbursements due December 3, 1998.

Sincerely,


Beth Stern Fleming
Treasurer

BSE/

99992-0106

cc: Commonwealth of Pennsylvania (via certified mail return receipt requested)(w/enclosure)

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
[Summary Page]

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Dec 6 10 49 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
**MONTGOMERY COUNTY
DEMOCRATIC COMMITTEE**

ADDRESS (number and street) Check if different than previously reported
24 W. AIRY ST.

CITY, STATE and ZIP CODE
NORRISTOWN, PA. 19401

2. FEC IDENTIFICATION NUMBER
C00323253

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 _____
(Type of Election)
election on _____ in the State of _____

30-Day Post-Election Report following the General Election
on 11/3/98 in the State of PENNSYLVANIA

(b) Is this Report an Amendment? YES NO

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
10/1/98 through 11/23/98		
6. (a) Cash on Hand January 1, 1998		\$ 850.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 850.00	
(c) Total Receipts (from Line 1B)	\$ 22,500.00	\$ 22,500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(e) and 6(c) for Column B)	\$ 23,350.00	\$ 23,350.00
7. Total Disbursements (from Line 3D)	\$ 23,000.00	\$ 23,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 350.00	\$ 350.00
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 900 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0	

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

BETH STERN FLEMING

Signature of Treasurer

Beth Stern Fleming

Date

12/2/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §497g.

FEC FORM 3X

(Revised 8/93)

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

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
MONTGOMERY COUNTY Democratic Committee		FROM	TO	
		10/15/98	11/28/98	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	22,500.00	22,500.00	11(a)(i)
ii.	Unitemized			11(a)(ii)
iii.	Total (add i and ii)	22,500.00	22,500.00	11(a)(iii)
b.	Political Party Committees	0	0	11(b)
c.	Other Political Committees (such as PACs)	0	0	11(c)
d.	Total Contributions (add a ii, b and c)	22,500.00	22,500.00	11(d)
12.	Transfers From Affiliated/Other Party Committees	0	0	12
13.	All Loans Received	0	0	13
14.	Loan Repayments Received	0	0	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	0	0	17
18.	Transfers from Nonfederal Account for Joint Activity	0	0	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	22,500.00	22,500.00	19
20.	Total Federal Receipts (subtract line 18 from line 19)	22,500.00	22,500.00	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share	0	0	21(a)(i)
ii.	Non-Federal Share	0	0	21(a)(ii)
b.	Other Federal Operating Expenditures	0	0	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b)	0	0	21(c)
22.	Transfers to Affiliated/Other Party Committees	23,000.00	23,000.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0	0	23
24.	Independent Expenditures (see Schedule E)	0	0	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26.	Loan Repayments Made	0	0	26
27.	Loans Made	0	0	27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees	0	0	28(a)
b.	Political Party Committees	0	0	28(b)
c.	Other Political Committees (such as PACs)	0	0	28(c)
d.	Total Contribution Refunds (add a, b and c)	0	0	28(d)
29.	Other Disbursements	0	0	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	23,000.00	23,000.00	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30)	23,000.00	23,000.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	22,500.00	22,500.00	32
33.	Total Contribution Refunds (from line 28d)	0	0	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	22,500.00	22,500.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b)	0	0	35
36.	Offsets to Operating Expenditures (from line 15)	0	0	36
37.	Net Operating Expenditures (subtract line 36 from 35)	0	0	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER

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)

MONTGOMERY COUNTY DEMOCRATIC COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANIEL B. WOFFORD 8 PRIMROSE LANE MALVERN, PA. 19355	PHILADELPHIA EDUCATION FUND	10/15/98	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EXECUTIVE		Aggregate Year-to-Date > \$ 500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN C. HATS 330 N. SPRING MILL ROAD VILLA NOVA, PA. 19085	RETIRED	10/15/98	\$ 4000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date > \$ 4000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NEIL ORMAN 122 ROCKLAND AVENUE MERION, PA. 19066	CAMPAIGN GROUP	10/15/98	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CONSULTANT		Aggregate Year-to-Date > \$ 1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEFFREY KORNBLAU 85 SNOWFLAKE ROAD HUNTINGDON VALLEY, PA. 19006	KORNBLAU AND KORNBLAU	10/15/98	\$ 5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ATTORNEY		Aggregate Year-to-Date > \$ 5,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TIMOTHY S. TAPPER, M.D. 522 HOWE ROAD MERION, PA. 19066	SOUTH PHILADELPHIA QUEENS VILLAGE PEDIATRICS.	10/15/98	\$ 2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PEDIATRICIAN		Aggregate Year-to-Date > \$ 2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MORGAN R. JONES 1345 CHESTNUT ST. PHILADELPHIA, PA. 19107	DRINKLER, BIDDLE & REATH	10/15/98	\$ 2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ATTORNEY		Aggregate Year-to-Date > \$ 2,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM BEST 3439 BRAE BOURN DRIVE HUNTINGDON VALLEY, PA. 19006	LOCKHEED MARTIN	10/15/98	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ENGINEER		Aggregate Year-to-Date > \$ 500.00

SUBTOTAL of Receipts This Page (optional)

\$ 15,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 3
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

MONTGOMERY COUNTY DEMOCRATIC COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BAYARD TRAYER STOREY 1919 BRANDYWINE STREET PHILADELPHIA, PA. 19136	UNIVERSITY OF PENNSYLVANIA	10/15/98	\$ 2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PROF. EMERITUS	Aggregate Year-to-Date > \$ 2,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BUCK SCOTT 408 McCLENACHAN MILL ROAD WYNNEWOOD, PA. 19096	RETIRED	10/15/98	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> 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
MICHAEL F. FINK 6 LOCUST WAY LAFAYETTE HILL, PA. 19444	LOCKHEED MARTIN	10/15/98	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ENGINEER	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ELEANOR M. MORRIS 3340 COVENTRYVILLE RD. POTTSTOWN, PA. 19465	SELF	10/15/98	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FRANK TARBOX 520 JARVEN ROAD WYNDMOOR, PA. 19038	RETIRED	10/15/98	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MERRIT WILLITS HALLOWELL P.O. BOX 4123 RYDAL, PA. 19046	SELF	10/15/98	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation INVESTOR	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PITOESE DRISCOLL 720 SWEDSFORD ROAD AMBLER, PA. 19002	RETIRED	10/15/98	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$ 7,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

MONTGOMERY COUNTY DEMOCRATIC COMMITTEE

<p>A. Full Name, Mailing Address and ZIP Code ROTAN E. LEE, ESQ. 1 BALA AVENUE SUITE 320 BALA CYNWYD, Pa. 19004</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer HUGH WOODS, INC</p> <p>Occupation ATTORNEY</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 10/15/98</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)

\$500.00

TOTAL This Period (last page this line number only)

\$22,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
MONTGOMERY COUNTY DEMOCRATIC COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PENNSYLVANIA DEMOCRATIC STATE COMMITTEE 510 N. 3 RD ST. HARRISBURG, PA 17120	COORDINATED CAMPAIGN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/98	\$22,500.00
B. Full Name, Mailing Address and ZIP Code PENNSYLVANIA DEMOCRATIC STATE COMMITTEE 510 N. 3 RD ST. HARRISBURG, PA 17120	COORDINATED CAMPAIGN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/98	\$500.00
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)	\$23,000.00
TOTAL This Period (last page this line number only)	\$23,000.00

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 12/2/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
AA PREPARER	12/6/98 DATE PREPARED