DEMOCRATIC PARTY of Wisconsin

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM
MAR 11 12 35 PM '96

March 8, 1996

Federal Elections Commission
999 E Street NW
Washington, DC 20463

RE: January 1996 Continuing - Amended Report
Democratic Party of Wisconsin - C00019331

Dear Sir or Madam:

Schedule A-Line 15 shows an entry for a refund of $135.09 from the Democratic National Committee on 8/07/95 for "Refund Overpayment of Seminar Fee." This reporting entry is correct.

However, due to a technical problem with our reporting software, all receipts and transfers from the Democratic National Committee were thereafter tagged with an incorrect explanation, as was the case with all entries on Schedule A-Line 12. The contributions reported on Schedule A-Line 12 were merely transfers between committees and required no further explanation.

A second computer glitch incorrectly duplicated the aggregate year-to-date total for the Democratic National Committee Schedule A-line 12 onto the aggregate year-to-date total for the Democratic National Committee Schedule A-line 15.

The attached Amended January 1996 Continuing Report dated 3/07/96 reflects corrections for the reporting software error stated above. We apologize for these oversights.

Sincerely,

Jeneane M. Olson

Jeneane M. Olson
Finance/Compliance Comptroller

9603032615

222 State Street • Madison, Wisconsin 53703-2273 • (608) 255-5172 • FAX 255-8919

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

FEB 11 12 35 PM '96

1. NAME OF COMMITTEE (in full)

Democratic Party of Wisconsin

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

222 State Street 4th Floor

CITY, STATE and ZIP CODE

Madison, WI 53703

2. FEC IDENTIFICATION NUMBER

C00019331

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 07/01/95 through 12/31/95		
6. (a) Cash on Hand January 1, 19 95		$ -,350.02
(b) Cash on hand at Beginning of Reporting Period	$ -,347.37	
(c) Total receipts (from Line 19)	$ 789,658.57	$1,017,665.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 789,311.20	$1,017,315.64
7. Total Disbursements (from Line 30)	$ 775,215.74	$1,003,220.18
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 14,095.46	$ 14,095.46
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)	$ 11,473.88	

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
Matthew Thurmaier

Signature of Treasurer
Matthew Thurmaier

Date
3-7-96

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

95-F3X-791

FEC FORM 3X
(revised 1/1/91)

95030332616

SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 12

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)

Democratic Party of Wisconsin C00019331

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ASDC DOLLARS FOR DEMOCRATS 430 S CAPITOL ST SE WASHINGTON DC 20003		07/11/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 25,000.00		25,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ASDC DOLLARS FOR DEMOCRATS 430 S CAPITOL ST SE WASHINGTON DC 20003		08/24/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 30,000.00		5,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ASDC DOLLARS FOR DEMOCRATS 430 S CAPITOL ST SE WASHINGTON DC 20003		08/31/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 35,000.00		5,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ASDC DOLLARS FOR DEMOCRATS 430 S CAPITOL ST SE WASHINGTON DC 20003		09/25/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 42,000.00		7,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003		10/05/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 17,288.09		17,153.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC CONGRESSIONAL CAMPAIGN 430 SOUTH CAPITOL STREET WASHINGTON DC 20003		10/06/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 750.00		750.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003		10/11/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 34,441.09		17,153.00

SUBTOTAL of Receipts This Page (optional) 77,056.00

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

9 5 0 3 0 3 2 6 1 7

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 12

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NAME OF COMMITTEE (In Full)

Democratic Party of Wisconsin C00019331

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003	Occupation	10/18/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 54,670.09		20,229.00
B. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
ASDC DOLLARS FOR DEMOCRATS 430 S CAPITOL ST SE WASHINGTON DC 20003	Occupation	10/25/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 52,000.00		10,000.00
C. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003	Occupation	10/25/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 74,899.09		20,229.00
D. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003	Occupation	11/03/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 92,052.09		17,153.00
E. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003	REFUND OVERPAYMENT SEMINAR FEE Occupation	11/06/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 96,910.09		4,858.00
F. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003	Occupation	11/13/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 119,416.09		22,506.00
G. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003	Occupation	11/20/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 140,206.09		20,790.00

SUBTOTAL of Receipts This Page (optional) 115,765.00

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

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SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 12

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NAME OF COMMITTEE (In Full)

Democratic Party of Wisconsin C00019331

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003		11/24/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 145,321.09		5,115.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ASDC DOLLARS FOR DEMOCRATS 430 S CAPITOL ST SE WASHINGTON 20003		11/29/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 54,500.00		2,500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003		12/05/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 163,261.09		17,940.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003		12/08/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 164,735.09		1,474.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003		12/14/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 173,705.09		8,970.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ASDC DOLLARS FOR DEMOCRATS 430 S CAPITOL ST SE WASHINGTON DC 20003		12/18/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 59,500.00		5,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC PARTY OF WISCONSIN 222 STATE STREET, SUITE 400 MADISON WI 53703	SEE Attached Letter DUPLICATE TRANSFER DONE IN ERROR	12/18/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 34,827.00		34,827.00

SUBTOTAL of Receipts This Page (optional) 75,826.00

TOTAL This Period (last page this line number only)

9503032619

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 12

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NAME OF COMMITTEE (In Full)

Democratic Party of Wisconsin C00019331

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003		12/21/95	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 191,645.09		17,940.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	17,940.00
TOTAL This Period (last page this line number only)	286,587.00

9 5 0 3 0 3 2 6 0

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)

Democratic Party of Wisconsin C00019331

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
MULLOOLY, ANGLEA 201 BARBIE PL FREDERICKSBURG VA 22405 Receipt For: [ ] Primary [X] General [ ] Other (specify):	REIMBURSE HEALTH INSURANCE	09/25/95	383.97
	Aggregate Year-to-Date > $	383.97	
STATE OF WISCONSIN 4610 UNIVERSITY AVENUE MADISON WI 53706 Receipt For: [ ] Primary [X] General [ ] Other (specify):	REFUND OF PAYROLL TAX OVERPAYMENT	09/25/95	36.55
	Aggregate Year-to-Date > $	75.89	
MULLOOLY, THOMAS M. 201 BARRIE PL FREDERICKSBURG VA 22405 Receipt For: [ ] Primary [X] General [ ] Other (specify):	HEALTH INSURANCE REIMBURSEMENT	10/06/95	383.97
	Aggregate Year-to-Date > $	3,455.73	
AUTOMATIC DATA PROCESSING 330 E. KILBOURN MILWAUKEE WI 53202 Receipt For: [ ] Primary [X] General [ ] Other (specify):	RETURN OF PAYROLL FEES	10/10/95	80.18
	Aggregate Year-to-Date > $	801.15	
MULLOOLY, THOMAS M. 201 BARRIE PL FREDERICKSBUG VA 22405 Receipt For: [ ] Primary [X] General [ ] Other (specify):	HEALTH INSURANCE REIMBURSEMENT	11/03/95	383.97
	Aggregate Year-to-Date > $	3,839.70	
MULLOOLY, ANGLEA 201 BARBIE PL FREDERICKSBURG 22405 Receipt For: [ ] Primary [X] General [ ] Other (specify):	REIMBURSE HEALTH INSURANCE	12/07/95	607.73
	Aggregate Year-to-Date > $	991.70	
DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON 20003 Receipt For: [ ] Primary [X] General [ ] Other (specify):	IN-KIND TRAVEL COSTS	12/20/95	688.34
	Aggregate Year-to-Date > $	688.34	

SUBTOTAL of Receipts This Page (optional) 2,564.71

TOTAL This Period (last page this line number only)

9 5 0 3 0 3 2 6 7 1

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)

Democratic Party of Wisconsin C00019331

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. MULLOOLY, THOMAS M. 201 BARRIE PL FREDERICKSBURG VA 22405 Receipt For: [ ] Primary [X] General [ ] Other (specify):	HEALTH INSURANCE REIMBURSEMENT	07/11/95	383.97
	Aggregate Year-to-Date > $	2,687.79	
B. STATE OF WISCONSIN 4610 UNIVERSITY AVENUE MADISON 53562 Receipt For: [ ] Primary [X] General [ ] Other (specify):	REFUND OF PAYROLL TAX OVERPAYMENT	08/07/95	39.34
	Aggregate Year-to-Date > $	39.34	
C. MULLOOLY, THOMAS M. 201 BARRIE PL FREDERICKSBURG VA 22405 Receipt For: [ ] Primary [X] General [ ] Other (specify):	HEALTH INSURANCE REIMBURSEMENT	08/07/95	383.97
	Aggregate Year-to-Date > $	3,071.76	
D. DEMOCRATIC NATIONAL COMMITTEE 430 S CAPITOL ST SE WASHINGTON DC 20003 Receipt For: [ ] Primary [X] General [ ] Other (specify):	REFUND OVERPAYMENT SEMINAR FEE	08/07/95	135.09
	Aggregate Year-to-Date > $	135.09	
E. ADP 400 W COVINA BLVD SAN DIMAS CA 91773 Receipt For: [ ] Primary [X] General [ ] Other (specify):	REFUND OF SUTA OVERPAYMENT	08/07/95	230.51
	Aggregate Year-to-Date > $	230.51	
F. BRESKE FOR SENATE ROUTE 2 BOX 94A WITTENBERG WI 54499 Receipt For: [ ] Primary [X] General [ ] Other (specify):	LIST PURCHASE	09/25/95	115.28
	Aggregate Year-to-Date > $	115.28	
G. FEINGOLD SENATE COMMITTEE PO BOX 620062 MIDDLETON WI 53562 Receipt For: [ ] Primary [X] General [ ] Other (specify):	LIST PURCHASE	09/25/95	102.52
	Aggregate Year-to-Date > $	102.52	

SUBTOTAL of Receipts This Page (optional) 1,390.68

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

9 6 0 3 0 3 2 6 6 2

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 3-8-96
☐	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

JMN
PREPARER

3-11-96
DATE PREPARED

FEC FORM 70-2 (12/92)

9 6 0 3 0 3 2 6 7 3