

RECEIVED
FED MAIL
OPERATIONS CENTER
2004 OCT 12 A 9 32
Office Use Only

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12 FEB 2005
10th Democratic Party of Wisconsin

ADDRESS (number and street) 326 Indiana Oaks Lane
Shelbington WI 53081-1

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
000274407 IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Governing Period 01/01/04 through 12/31/04

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 Jeff Sawyer

Signature of Treasurer [Signature] Date 10/06/2004

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

6th Democratic Party of Wisconsin

Report Covering the Period:

From:

07/01/2004

To:

09/30/2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004	2004	3,836.33
(b) Cash on Hand at Beginning of Reporting Period	4,095.32	
(c) Total Receipts (from Line 19)	275.00	1,852.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4,370.32	5,678.83
7. Total Disbursements (from Line 31)	2,517.00	3,825.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1,853.32	1,853.32
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	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

6th Democratic Party of Wisconsin

Report Covering the Period:

From:

07 01 2004

To:

09 30 2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....		
(ii) Unitemized.....		
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)).....▶		
(b) Political Party Committees.....		
(c) Other Political Committees		
(such as PACs).....		
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 38, page 5).....▶		
12. Transfers From Affiliates/Other		
Party Committees.....	275.00	
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees.....		
17. Other Federal Receipts		
(Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	275.00	
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	275.00	

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	19.00	
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,500.00	
24. Independent Expenditures (see Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(6)) (see Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions to: (a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(2))		
(a) Allocated Federal Election Activity (from Schedule H5)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely with Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(c), 29 and 30(c))	2,519.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(e)(ii) from Line 31)	2,517.00	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE OF	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17			

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)

A. Full Name (Last, First Middle Initial)
Democratic Party of Wisconsin

Mailing Address
222 State St #400

City Madison State WI Zip Code 53081

FEC ID number of contributing federal political committee: C

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date 4,650.00

Date of Receipt
08 22 2004

Amount of Each Receipt this Period
215.00

B. Full Name (Last, First Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee: C

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date _____

Date of Receipt _____

Amount of Each Receipt this Period _____

C. Full Name (Last, First Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee: C

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date _____

Date of Receipt _____

Amount of Each Receipt this Period _____

SUBTOTAL of Receipts This Page (optional) _____

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE OF

<input type="checkbox"/> 15	<input type="checkbox"/> 22	<input type="checkbox"/> 28	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of obtaining 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)

6th Democratic Party of Wisconsin

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Jeff Cox Wisconsin

08/22/2004

Mailing Address

224A Scott Ave

City

Oshkosh

State

WI

Zip Code

54901

Purpose of Disbursement

Congressional Candidate

Candidate Name

Jeff Hall

Category/Type

Amount of Each Disbursement this Period

1,500.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. Fengold Senate Committee

08/22/2004

Mailing Address

P.O. Box 6200702

City

Middleton

State

WI

Zip Code

53562

Purpose of Disbursement

Russ Fengold Senate Campaign

Candidate Name

Russ Fengold

Category/Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. Sheboygan Trade & Labor Hall

07/08/2004

Mailing Address

Wisconsin Ave

City

Sheboygan

State

WI

Zip Code

53081

Purpose of Disbursement

Rent for Meeting Hall

Candidate Name

Category/Type

Amount of Each Disbursement this Period

17.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

2,517.00

TOTAL This Period (last page this line number only)

2,517.00

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 10-5-04
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
AMP PREPARER	10-12-04 DATE PREPARED