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2004 JUL 17 A 9 26

FEC
FORM 3X

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **FOURTH DISTRICT DEMOCRATIC CENTRAL COMMITTEE**
TYPE OR PRINT Example: If typing, type over the lines
12FE4MS

ADDRESS (number and street) **3234 NE PAWA**

Check if different than previously reported. (ACC)

ST. CHARLES **LA** **70240**

2. FEC IDENTIFICATION NUMBER **000374306**
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)	Due On:			
	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11)
(a) Quarterly Reports:				
<input type="checkbox"/> April 15 Quarterly Report (Q1)				<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input checked="" type="checkbox"/> July 15 Quarterly Report (Q2)				<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> October 15 Quarterly Report (Q3)				<input type="checkbox"/> Jan 31 (YE)
<input type="checkbox"/> January 31 Year-End Report (YE)				
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) (MY)				
<input type="checkbox"/> Termination Report (TER)				
(b) Monthly Report				
(c) 12-Day PRE-Election Report for the:				
<input type="checkbox"/> Primary (12P)				<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)				<input type="checkbox"/> Special (12S)
<input type="checkbox"/> Election on _____				In the State of _____
(d) 30-Day POST-Election Report for the:				
<input type="checkbox"/> General (30G)				<input type="checkbox"/> Runoff (30R)
<input type="checkbox"/> Election on _____				In the State of _____

5. Covering Period **04 01 2004** through **06 30 2004**

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 **DonRouay**
Signature of Treasurer *DonRouay* Date **01 12 2004**

NOTE: Submission of false, incorrect, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5457g.

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PEC Form 30X (Rev. 02/2003)

Name of Type Committee Name

FOURTH DISTRICT DEMOCRATIC CENTRAL COMMITTEE

Report Covering the Period: From: 04 01 2004 To: 06 30 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004	2004	60244
(b) Cash on Hand at Beginning of Reporting Period	132204	
(c) Total Receipts (from Line 1a)	1108900	1484900
(d) Subtotal (add Lines B(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1541144	1545144
7. Total Disbursements (from Line 3a)	1009905	1013905
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	531239	531239
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 PEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 2X (Rev. 02/2003)

Write or Type Committee Name

FORTH DISTRICT DEMOCRATIC CENTRAL COMMITTEE

Report Covering the Period:

From:

04 01 2004

To:

06 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)).....▶	11,089.00	14,849.00
(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 33, page 5).....▶	11,089.00	14,849.00
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 87, 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)).....▶	11,089.00	14,849.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	11,089.00	14,849.00

**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 12/23/05)

R. 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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	6099.05	6,139.05
(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	4,000.00	4,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use 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)		
(f) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H8)		
(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(a), 28 and 30(c))	10099.05	10,139.05
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(ii) from Line 31)	10099.05	10,139.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

BL Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 13(d), page 3)	11,089.00	14,849.00
34. Total Contribution Refunds (from Line 23(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11,089.00	14,849.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10,099.05	10,139.05
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10,099.05	10,139.05

**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 1 OF 2

<input checked="" type="checkbox"/> 21a	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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"/> 30a

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)

FOURTH DISTRICT DEMOCRATIC CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

HICKORY PARK RESTAURANT

04 23 2004

Mailing Address

104 S. DUFF

City

Ames

State

IA

Zip Code

50010

Purpose of Disbursement

CATERING CONVENTION

Candidate Name

Category/Type

Amount of Each Disbursement This Period

3,600.00

Office Sought

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify):

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

AMES COMMUNITY SCHOOLS

05 14 2004

Mailing Address

415 STANTON NW

City

AMES

State

IA

Zip Code

50010

Purpose of Disbursement

LUNCH CONVENTION

Candidate Name

Category/Type

Amount of Each Disbursement This Period

928.34

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify):

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

COASTER PRINTING

06 23 2004

Mailing Address

1739 E GRAND AVE

City

DES MOINES

State

IA

Zip Code

50316

Purpose of Disbursement

PRINTING CONVENTION

Candidate Name

Category/Type

Amount of Each Disbursement This Period

1,227.48

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify):

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

5,755.82

**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)					
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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"/> 28d	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (in Full)
FOURTH DISTRICT DEMOCRATIC CENTRAL COMMITTEE

A.

Full Name (Last, First, Middle Initial): **TEAL GALLIHAN**

Mailing Address: **110 SCHOOL ST.**

City: **GILBERT, IA** State: **IA** Zip Code: **50105**

Purpose of Disbursement: **CONVENTION SUPPLIES**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: **04 24 2004**

Amount of Each Disbursement this Period: **319.53**

B.

Full Name (Last, First, Middle Initial): **MARGO MONAGG**

Mailing Address: **1232 WISCONSIN AVE**

City: **AMES** State: **IA** Zip Code: **50014**

Purpose of Disbursement: **CONVENTION SUPPLIES**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: **04 24 2004**

Amount of Each Disbursement this Period: **23.70**

C.

Full Name (Last, First, Middle Initial): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: _____

Amount of Each Disbursement this Period: _____

SUBTOTAL of Disbursements This Page (optional): **343.23**

TOTAL This Period (last page this line number only): **6099.05**

**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"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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"/> 30		

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NAME OF COMMITTEE (In Full)
FOURTH DISTRICT DEMOCRATIC CENTRAL COMMITTEE

A

Full Name (Last, First, Middle Initial)
JOHNSON FOR CONGRESS

Date of Disbursement
06 01 2004

Mailing Address
P.O. Box 475

City
DECORAH State
IA Zip Code
52160

Purpose of Disbursement
CONTRIBUTION

Candidate Name
PAUL JOHNSON

Office Sought: House Senate President
State: **IA** District: **4**

Disbursement For: Primary General
 Other (specify) _____

Amount of Each Disbursement this Period
200000

B

Full Name (Last, First, Middle Initial)
JOHNSON FOR CONGRESS

Date of Disbursement
06 26 2004

Mailing Address
P.O. Box 475

City
DECORAH State
IA Zip Code
52160

Purpose of Disbursement
CONTRIBUTION

Candidate Name
PAUL JOHNSON

Office Sought: House Senate President
State: **IA** District: **4**

Disbursement For: Primary General
 Other (specify) _____

Amount of Each Disbursement this Period
200000

C

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State District

Disbursement For: Primary General
 Other (specify) _____

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) _____

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

400000

2004 FEB 11 10:53 AM

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 type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" 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 checked="" 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
JMD PREPARER (5/2004)	7-17-04 DATE PREPARED

2014-03-15 09:34:17