

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Democratic Party of Nez Perce County

Report Covering the Period:

From:

04 01 2006

To:

06 30 2006

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2006		193381
(b) Cash on Hand at Beginning of Reporting Period	137626	
(c) Total Receipts (from Line 19)	265890	352375
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	403516	545756
7. Total Disbursements (from Line 51)	156414	298654
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	247102	247102
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		



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

26039120756

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Democratic Party of Nez Perce County

Report Covering the Period: From: **04** **01** **2006** To: **06** **30** **2006**

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)	29250	
(ii) Unitemized	236640	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	265890	352375
(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)	265890	352375
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 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))	265890	352375
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	265890	352375

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DETAILED SUMMARY PAGE
of Disbursements

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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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	156414	298654
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	156414	298654
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
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)		
(d) 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 H6)		
(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(d), 29 and 30(c)) ..	156414	298654
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	156414	298654

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DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	265890	352375
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	265890	352375
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	156414	298654
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	156414	298654

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

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

FOR LINE NUMBER: PAGE 1 OF 2
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
 Democratic Party of Nez Perce County

A. Full Name (Last, First, Middle Initial)
 Liz Chavez
 Mailing Address
 1521 15th Ave
 City Lewiston State ID Zip Code 83501
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Teacher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 24250

Date of Receipt
 04 / 21 / 2006
 Amount of Each Receipt this Period
 20250

B. Full Name (Last, First, Middle Initial)
 Liz Chavez
 Mailing Address
 1521 15th Ave
 City Lewiston State ID Zip Code 83501
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Teacher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 31250

Date of Receipt
 04 / 22 / 2006
 Amount of Each Receipt this Period
 7000

C. Full Name (Last, First, Middle Initial)
 Liz Chavez
 Mailing Address
 1521 15th Ave
 City Lewiston State ID Zip Code 83501
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Teacher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 32250

Date of Receipt
 05 / 01 / 2006
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional) 28250
 TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 2 OF 2
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Nez Perce County

A. Full Name (Last, First, Middle Initial)
Liz Chavez

Mailing Address
1521 15th Ave

City *Lewiston* State *Id* Zip Code *83501*

FEC ID number of contributing federal political committee. C

Name of Employer *Retired* Occupation *Teacher*

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ *332.50*

Date of Receipt
 MM / DD / YYYY
06 / 01 / 2006

Amount of Each Receipt this Period
 10.00

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
 MM / DD / YYYY

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
 MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) *10.00*

TOTAL This Period (last page this line number only) *292.50*

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**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 checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)
Democratic Party of Nez Perce County

A. *Tribune Publishing*
Mailing Address

City: *Lewiston* State: *ID* Zip Code: *83501*

Purpose of Disbursement: *Ads*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *04* / *10* / *2006*

Amount of Each Disbursement this Period: *269.81*

B. *City of Lewiston*
Mailing Address

City: *Lewiston* State: *ID* Zip Code: *83501*

Purpose of Disbursement: *Building Rental*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *04* / *21* / *2006*

Amount of Each Disbursement this Period: *202.50*

C. *Nez Perce County Fair*
Mailing Address: *1229 Burrell*

City: *Lewiston* State: *ID* Zip Code: *83501*

Purpose of Disbursement: *September Fair Booth*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *04* / *10* / *2006*

Amount of Each Disbursement this Period: *200.00*

SUBTOTAL of Disbursements This Page (optional) _____

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

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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.

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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FED-EX</i>	Shipping Date <i>7/13/06</i>
Next Business Day Delivery <input checked="" type="checkbox"/>	
<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

JAC
 PREPARER

7/14/06
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