

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2020 JAN 27 AM 11:12
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

WYOMING COUNTY DEMOCRATIC COMMITTEE

ADDRESS (number and street) 48 OATKA ST
WARSAW NY 14569

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00532606

3. IS THIS REPORT NEW OR AMENDED
 (N) (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 [MM/DD/YYYY] in the State of []

- (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on [MM/DD/YYYY] in the State of []

5. Covering Period 10/01/2019 through 12/31/2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Marsh, Jack, . . .
Type or Print Name of Treasurer

Signature of Treasurer Marsh, Jack, [Signature] Date 01/18/2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

WYOMING COUNTY DEMOCRATIC COMMITTEE

Report Covering the Period: From:

/ /

To:

/ /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		5625.43
(b) Cash on Hand at Beginning of Reporting Period.....	5977.40	
(c) Total Receipts (from Line 19).....	1650.00	7769.56
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7627.40	13394.99
7. Total Disbursements (from Line 31).....	3388.41	9156.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4238.99	4238.99
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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. 05/2016)

Page 3

Write or Type Committee Name

WYOMING COUNTY DEMOCRATIC COMMITTEE

Report Covering the Period: From: / / To: / /

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).....	425.00	1240.00
(ii) Unitemized.....	225.00	4300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	650.00	5540.00
(b) Political Party Committees.....	0.00	50.00
(c) Other Political Committees (such as PACs).....	1000.00	1675.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	1650.00	7265.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	504.56
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5).....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1650.00	7769.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1650.00	7769.56

NON-FEDERAL RECEIPTS

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	0.00	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating Expenditures	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees	3264.80	4464.80	
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	
24. Independent Expenditures (use Schedule E)	123.61	123.61	
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00	
26. Loan Repayments Made	0.00	0.00	
27. Loans Made	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements (Including Non-Federal Donations)	0.00	4567.59	
30. Federal Election Activity (52 U.S.C. § 30101(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3388.41	9156.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	3388.41	9156.00	

NON-FEDERAL DONATIONS

**DETAILED SUMMARY PAGE
of Disbursements**

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Page 5

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)	1650.00	7265.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1650.00	7265.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	504.56
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	- 504.56

DISBURSEMENTS

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

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

FOR LINE NUMBER: PAGE 6 OF 11

(check only one)

<input checked="" 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
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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)
WYOMING COUNTY DEMOCRATIC COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Coffey, Denise, , ,

Mailing Address 18 Church St.

City State Zip Code
Silver Springs NY 14550

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
225.00

Date of Receipt

MM / DD / YYYY
10 / 11 / 2019

Transaction ID : SA11A1.4407

Amount of Each Receipt this Period

225.00

Memo Item
Fall Dinner RSVP

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Miscellaneous Cash donation, , , ,

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
765.00

Date of Receipt

MM / DD / YYYY
10 / 11 / 2019

Transaction ID : SA11A1.4433

Amount of Each Receipt this Period

200.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

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

425.00

425.00

**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 7 OF 11
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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	

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NAME OF COMMITTEE (In Full)
WYOMING COUNTY DEMOCRATIC COMMITTEE

A. CSE Political Action Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 143 Washington Ave.

City Albany	State NY	Zip Code 12210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
10 / 11 / 2019

Transaction ID : SA11C.4431

Amount of Each Receipt this Period
600.00

Memo Item
RSVP Fall Dinner

B. NYS DRC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 709 E. State St.

City Olean	State NY	Zip Code 14760
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
10 / 04 / 2019

Transaction ID : SA11C.4432

Amount of Each Receipt this Period
400.00

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

NON-PROFIT ORGANIZATION

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

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NAME OF COMMITTEE (In Full)
WYOMING COUNTY DEMOCRATIC COMMITTEE

A. Attica Town Democratic Committee

Full Name (Last, First, Middle Initial)
Attica Town Democratic Committee

Mailing Address N. Water St.

City Attica State NY Zip Code 14011

Purpose of Disbursement
Fall 2019 Elections

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 15 / 2019

FEC Identification Number
C []
Transaction ID : SB22.4415
Amount of Each Disbursement this Period
[] 1000.00

Memo Item

B. Eagle Town Democratic Committee

Full Name (Last, First, Middle Initial)
Eagle Town Democratic Committee

Mailing Address 3426 Wing St.

City Bliss State NY Zip Code 14024

Purpose of Disbursement
Fall 2019 Elections

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 22 / 2019

FEC Identification Number
C []
Transaction ID : SB22.4421
Amount of Each Disbursement this Period
[] 200.00

Memo Item

C. Gainesville Town Democratic Committee

Full Name (Last, First, Middle Initial)
Gainesville Town Democratic Committee

Mailing Address 4579 Miller Rd.
PO Box 104

City Silver Springs State NY Zip Code 14550

Purpose of Disbursement
Fall 2019 Elections

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 15 / 2019

FEC Identification Number
C []
Transaction ID : SB22.4416
Amount of Each Disbursement this Period
[] 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ [] 2200.00

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)

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

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NAME OF COMMITTEE (In Full)
WYOMING COUNTY DEMOCRATIC COMMITTEE

Full Name (Last, First, Middle Initial) A. Java Town Democratic Committee		Date of Disbursement MM / DD / YYYY 10 / 22 / 2019
Mailing Address 1733 Rt. 78		FEC Identification Number C Transaction ID : SB22.4419 Amount of Each Disbursement this Period 400.00
City Java Center	State NY	
Purpose of Disbursement Fall 2019 Elections	Zip Code 14082	Memo Item <input type="checkbox"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Jeanne Williams - Arcade Town Democratic Committee		Date of Disbursement MM / DD / YYYY 12 / 11 / 2019
Mailing Address 347 Circle Ct.		FEC Identification Number C Transaction ID : SB22.4423 Amount of Each Disbursement this Period 200.00
City Arcade	State NY	
Purpose of Disbursement Fall 2019 Election	Zip Code 14009	Memo Item <input type="checkbox"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Rachel Towsley - Genesee Falls Town Democratic Committee		Date of Disbursement MM / DD / YYYY 12 / 11 / 2019
Mailing Address 6536 East Koy Rd.		FEC Identification Number C Transaction ID : SB22.4425 Amount of Each Disbursement this Period 64.80
City Portageville	State NY	
Purpose of Disbursement Fall 2019 Election	Zip Code 14536	Memo Item <input type="checkbox"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	664.80
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 10 OF 11	
	<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<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 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)
WYOMING COUNTY DEMOCRATIC COMMITTEE

A. Warsaw Town Democratic Committee

Full Name (Last, First, Middle Initial)
Mailing Address 48 Oatka St.

City Warsaw State NY Zip Code 14569

Purpose of Disbursement Fall 2019 Elections

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2019

FEC Identification Number: C

Transaction ID: SB22.4418

Amount of Each Disbursement this Period: 400.00

Memo Item

B.

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	3264.80

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WYOMING COUNTY DEMOCRATIC COMMITTEE	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00532606 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report >>> New report Amends report filed on	

Full Name of Payee Metro Graphics <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y _____ / _____ / _____
Mailing Address 4879 Old Buffalo Rd.	
City Warsaw State NY Zip Code 14569	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ 123.61 </div>
Purpose of Expenditure Office Stationery Category/Type _____	Transaction ID : SE.4428 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 17 / 2019
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ 123.61 </div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y _____ / _____ / _____
Mailing Address	
City _____ State _____ Zip Code _____	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ </div>
Purpose of Expenditure Category/Type _____	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y _____ / _____ / _____
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ </div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ 123.61 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ 123.61 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date M M / D D / Y Y Y Y Y Y

Signature

NONPROFIT 27 - ON DEMAND



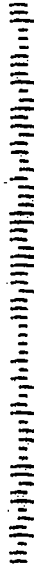
WYOMING COUNTY DEMOCRATIC COMMITTEE

126 JEFFERSON STREET
WARSAW, NEW YORK 14569

RECEIVED
MAIN CENTER
2020 JAN 27 AM 11:12

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

20463-



POSTNET

POSTNET NY 144

21 JAN 2020 09:21

FOREVER / USA

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	Date of Receipt
Postmarked <i>1/21/20</i>	<i>1/27/20</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input 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

PREPARER *MP* *1/27/20*
 (3/2015) DATE PREPARED

20150120 10:40:00 AM