REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

OCT 29 9 03 AM '96

1. NAME OF COMMITTEE (in full)
Cuyahoga County Democratic Party

ADDRESS (number and street) ☐ Check if different than previously reported
1466 St. Clair Ave N.E.

CITY, STATE and ZIP CODE
Cleveland Ohio 44114

2. FEC IDENTIFICATION NUMBER
6002 38147

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☑ October 15 Quarterly Report
☐ January 31 Year End 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 _____ (Type of Election) 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 July 1, 1996 through Sept 10, 1996		
6. (a) Cash on Hand January 1, 19 96		$ 562.31
(b) Cash on Hand at Beginning of Reporting Period	$ 4816.29	
(c) Total Receipts (from Line 19)	$ 619.93	$ 21,059.63
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 5436.22	$ 21,621.94
7. Total Disbursements (from Line 30)	$ 39.85	$ 16,225.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 5396.37	$ 5396.37
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)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
William C. Green

Signature of Treasurer
Will C. G

Date
10-15-96

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

FEC FORM 3X
(revised 9/93)

FE3AN009

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 6

FOR LINE NUMBER 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)

Cuyahoga County Democratic Party

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Key Bank, P.O. Box 94815, Cleveland Ohio 44101 Receipt For: ☐ Primary ☐ General ☒ Other (specify): Bank Interest	Employer: N/A Occupation: Aggregate Year-to-Date > $ 64.44	9-30-96	19.93
B.	Employer: Occupation: Aggregate Year-to-Date > $		
C.	Employer: Occupation: Aggregate Year-to-Date > $		
D.	Employer: Occupation: Aggregate Year-to-Date > $		
E.	Employer: Occupation: Aggregate Year-to-Date > $		
F.	Employer: Occupation: Aggregate Year-to-Date > $		
G.	Employer: Occupation: Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) >

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

FEBA0066

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 4 OF 15

FOR LINE NUMBER 11-11B

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): Cuyahoga County Democratic Party

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Elect Kucinich to Congress 4921 Decker Rd. Columbus, Ohio 43220 Receipt For: ☐ Primary ☒ General ☐ Other (specify): Donation	Aggregate Year-to-Date $ 1460.12	8/15/96	300.00
B. Lou Stokes for Congress Committee P.O. Box 99358 Cleveland, Ohio 44199 Receipt For: ☐ Primary ☒ General ☐ Other (specify): Donation	Aggregate Year-to-Date $ 1976.36	7/31/96	200.00
C. 96 Coyne for Congress Committee 14438 Sheldon Rd. Brook Park, Ohio 44142 Receipt For: ☐ Primary ☒ General ☐ Other (specify): Donation	Aggregate Year-to-Date $ 1038.75	8/14/96	100.00
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional) 600.00

TOTAL This Period (last page this line number only) 600.00

FE5AN088

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 5 OF 5

FOR LINE NUMBER 21-b

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)

Cuyahoga County Democratic Party

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Key Bank P.O. Box 94825 Cleveland, Ohio 44101	Bank Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9-30-96	39.85
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) .....

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

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
☐	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

TB

PREPARER

10-29-96

DATE PREPARED

FEC FORM 70-2 (12/92)

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

OCT 29 9 03 AM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

C00277954
GEORGE E MOYER 091695 N 238
PENN AG DEMOCRATS
251 FRYSTOWN ROAD
MYERSTOWN
PA 17067

2. FEC IDENTIFICATION NUMBER

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

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☐ Twelfth day report preceding _____ (Type of Election)
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 10/1/96 through 10/16/96		
6. (a) Cash on Hand January 1, 19____		$ 1377.45
(b) Cash on Hand at Beginning of Reporting Period	$ 2129.25	
(c) Total Receipts (from Line 19)	$ 0	$ 1405.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 2129.25	$ 2778.45
7. Total Disbursements (from Line 30)	$ 1332.00	$ 1981.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 797.25	$ 797.25
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)	$	

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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

Signature of Treasurer: George E. Moyer

Date: 10-21-96

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

FEC FORM 3X
(revised 3/93)

FEBAN069