

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2009 MAR -3 A 10:25 Office Use Only

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

12FE4M5

DEMOCRATIC ACTION CLUB OF CHICO

ADDRESS (number and street)

884 VALLOMBROSA AVE.

Check if different than previously reported. (ACC)

CHICO

CA

95926

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 00407866

3. 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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P), Convention (12C), General (12G), Special (12S), Runoff (12R)

Election on

MM/DD/YYYY

in the State of

State

(d) 30-Day POST-Election Report for the:

- General (30G), Runoff (30R), Special (30S)

Election on

MM/DD/YYYY

in the State of

State

5. Covering Period

07 01 2008

through

09 30 2008

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

MARIA A. PHILLIPS

Signature of Treasurer

Maria A. Phillips

Date

07 25 2009

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

Office Use Only

FEC FORM 3X Rev. 12/2004

29030043025

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DEMOCRATIC ACTION CLUB OF CHICO

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="2008"/>	<input type="text" value="307668"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="174154"/>
(c) Total Receipts (from Line 19)	<input type="text" value="1419985"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<input type="text" value="1594139"/>
7. Total Disbursements (from Line 31)	<input type="text" value="969967"/>
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="624172"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

29030043026

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

DEMOCRATIC ACTION CLUB OF CHICO

Report Covering the Period: From: **07** ' **01** ' **2008** To: **09** ' **30** ' **2008**

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

	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).....	1350.-	1350.00
(ii) Unitemized.....	12849.85	14386.61
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	14199.85	15736.61
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	14199.85	15736.61
12. Transfers From Affiliated/Other Party Committees.....	0	0
3. 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)).....▶	14199.85	15736.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	14199.85	15736.61

29030043027

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	342866	630058
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	342866	630058
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E)	627099	627099
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
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	0	0
(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))..	969967	1257157
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	969967	1257157

29030043028

DETAILED SUMMARY PAGE
of Disbursements.

FEC Form 3X (Rev. 02/2003)

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)	1419.985	15736.61
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3428.66	6308.58
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3428.66	6308.58

29030043029

**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 16

<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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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 ACTION CLUB OF CHICO

Full Name (Last, First, Middle Initial)

A. BOSWELL, DOROTHY

Mailing Address

69 PLUMWOOD COURT

City

CHICO

State

CA

Zip Code

95928

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

20000

Date of Receipt

07 ' 16 ' 2008

Amount of Each Receipt this Period

20000

Full Name (Last, First, Middle Initial)

B. LESLIE, JANET

Mailing Address

25 GIDEON ST

City

CHICO

State

CA

Zip Code

95973

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

20000

Date of Receipt

07 ' 27 ' 2008

Amount of Each Receipt this Period

20000

Full Name (Last, First, Middle Initial)

C. WOODS, ROBERT

Mailing Address

3230 PRAIRIE CREEK AVE

City

CHICO

State

CA

Zip Code

95928

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

30000

Date of Receipt

07 ' 27 ' 2008

Amount of Each Receipt this Period

20000

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

60000

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

29030043030

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

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

FOR LINE NUMBER: PAC 7 OF 16

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC ACTION CLUB OF CHICO

A. Full Name (Last, First, Middle Initial)
WALKER, JIM

Mailing Address
1670 HOOKER OAK AVE

City **CHICO** State **CA** Zip Code **95926**

FEC ID number of contributing federal political committee.
C

Name of Employer
DR. RODNEY THOMPSON Occupation **PHYSICIAN'S ASSISTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.-

Date of Receipt
08' 28' 2008

Amount of Each Receipt this Period
250.-

B. Full Name (Last, First, Middle Initial)
RENERO, ELIZABETH

Mailing Address
945 LABURNUM

City **CHICO** State **CA** Zip Code **95926**

FEC ID number of contributing federal political committee.
C

Name of Employer
CA STATE U, CHICO Occupation **PROFESSOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.000

Date of Receipt
08' 29' 2008

Amount of Each Receipt this Period
50.000

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)..... **750.00**

TOTAL This Period (last page, this line number only)..... **1350.00** ✓

29030043031

**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 **8** OF **16**

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

DEMOCRATIC ACTION CLUB OF CHICO

Full Name (Last, First, Middle Initial)

A. MAIN & MAIN INVESTMENTS

Date of Disbursement

08 / **04** / **2008**

Mailing Address

2550 LAKEWEST DR STE 50

City

CHICO CA 95928

Purpose of Disbursement

OFFICE RENT

001

Amount of Each Disbursement this Period

500.00

Candidate Name

N/A

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. MAIN & MAIN INVEST

Date of Disbursement

09 / **08** / **2008**

Mailing Address

SAME

City

State Zip Code

Purpose of Disbursement

OFFICE RENT

001

Amount of Each Disbursement this Period

500.00

Candidate Name

N/A

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. AT & T

Date of Disbursement

09 / **18** / **2008**

Mailing Address

P.O. Box 78230

City

SAN FRANCISCO CA 94107

Purpose of Disbursement

Phones - Office

001

Amount of Each Disbursement this Period

2120.7

Candidate Name

N/A

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

12120.7

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

12120.7

29030043032

**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 9 of 16

<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"/> 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)

DEMOCRATIC ACTION CLUB OF ETHIO

Full Name (Last, First, Middle Initial)

A. A T & T

Mailing Address

P O Box 78230

City SAN FRANCISCO CA 94107

Purpose of Disbursement

Phones - Office

Candidate Name

001
Category/
Type

Date of Disbursement

08 / 06 / 2008

Amount of Each Disbursement this Period

27180

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

27180

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

148387

29030043033

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

OK

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"/> 29	<input type="checkbox"/> 30b

PAGE 10 of 16

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 ACTION CLUB OF CHICO

A. Full Name (Last, First, Middle-Initial)
KAREN WILKE

Date of Disbursement
09' 06' 2008

Mailing Address
P.O. BOX 131

City
CHICO State
CA Zip Code
95927

Purpose of Disbursement
Reimb. on expenses, voter reg.

Candidate Name
as below

Amount of Each Disbursement this Period
278.05

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B. Full Name (Last, First, Middle-Initial)
DCBA Farmer's Market

Date of Disbursement
09' 06' 2008

Mailing Address
330 SALEM ST.

City
CHICO State
CA Zip Code
95928

Purpose of Disbursement
Registr. Booth

Candidate Name

Amount of Each Disbursement this Period
241.00
MEMO

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C. Full Name (Last, First, Middle-Initial)
Fed Ex Kinkos

Date of Disbursement
07' 08' 2008

Mailing Address
1722 Mangrove Ave

City
CHICO State
CA Zip Code
95926

Purpose of Disbursement
Voter Registr mats

Candidate Name

Amount of Each Disbursement this Period
225.7
MEMO

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... **278.05**

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

29030043034

**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 11 OF 16
	<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"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
DEMOCRATIC ACTION CLUB OF CHICO

A.

Full Name (Last, First, Middle Initial) _____

Mailing Address **DOLLAR TREE STORE**
801 EAST AVE, STE. 129

City **CHICO** State **CA** Zip Code **95926**

Purpose of Disbursement **POSTER MAT'L'S VOTER REG** 007
Candidate Name _____ Category/Type

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

State: _____ District: _____

Date of Disbursement **07 / 08 / 2008**

Amount of Each Disbursement this Period **1448**

MEMO (in previous page)

B.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____ _____
Candidate Name _____ Category/Type

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

State: _____ District: _____

Date of Disbursement _____

Amount of Each Disbursement this Period _____

C.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____ _____
Candidate Name _____ Category/Type

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)..... **0**

TOTAL This Period (last page this line number only)..... **278.05**

29030043035

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

PAGE 12 OF 16
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) DEMOCRATIC ACTION CLUB OF CHICO	FEC IDENTIFICATION NUMBER C 00407866
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee GALLO, EMILY	Date 09' 26' 2008
Mailing Address 1166 STANLEY AVE	Amount 2104.71
City CHICO State CA Zip Code 95928	

Purpose of Expenditure Reimbursement for CAMPAIGN MATS brought online	Category/Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose

Calendar Year-To-Date Per Election for Office Sought 2104.71	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
--	---

Full Name (Last, First, Middle Initial) of Payee WWW.STOREBARACKOBAMA.COM	Date 09' 23' 2008
Mailing Address	Amount MEMO
City State Zip Code	2104.71

Purpose of Expenditure Campaign mats (above)	Category/Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose

Calendar Year-To-Date Per Election for Office Sought 2104.71	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
--	--

(a) SUBTOTAL of Itemized Independent Expenditures	2104.71
(b) SUBTOTAL of Unitemized Independent Expenditures	0
(c) TOTAL Independent Expenditures	2104.71

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.

Maia A. Quinn
Signature

Date **01' 25' 2009**

29030043036

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

PAGE 13 OF 16
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) DEMOCRATIC ACTION CLUB OF CHICO	FEC IDENTIFICATION NUMBER C 00407866
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee GALLO, DAVID	Date 09' 06' 2008
Mailing Address 1166 STANLEY AVE	Amount 275.80
City State Zip Code CHICO CA 95928	
Purpose of Expenditure <i>reimbursement of campaign materials bought on-line</i> Category/Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2380.51	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee WWW-STOREBARACKOBAMA.COM	Date 08' 26' 2008
Mailing Address	Amount MEMO 275.80
City State Zip Code	
Purpose of Expenditure <i>campaign matt's (as above)</i> Category/Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2380.51	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	275.80
(b) SUBTOTAL of Unitemized Independent Expenditures	0
(c) TOTAL Independent Expenditures	275.80

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.

Signature *Maria A. Quinn* Date **01' 25' 2009**

29030043037

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

NAME OF COMMITTEE (in Full) DEMOCRATIC ACTION CLUB OF CHICO	FEC IDENTIFICATION NUMBER C 00407866
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee QUINN DESIGNS	Date 08 ' 26 ' 2008
Mailing Address P.O. BOX 1493	Amount 270.00
City State Zip Code PARADISE CA 95967	
Purpose of Expenditure T-Shirts, campaign materials	Category/Type 006
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2650.51	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee LIMEY TEES	Date 08 ' 01 ' 2008
Mailing Address 730 W. 9th street	Amount 950.49
City State Zip Code CHICO CA 95928	
Purpose of Expenditure SIGNS & T-Shirts, campaign	Category/Type 006
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3601.00	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures	1220.49
(b) SUBTOTAL of Unitemized Independent Expenditures	0
(c) TOTAL Independent Expenditures	1220.49

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.

Marcia A. Quinn
Signature

Date **01 ' 25 ' 2009**

29030043038

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

NAME OF COMMITTEE (In Full) DEMOCRATIC ACTION CLUB OF CHICO	FEC IDENTIFICATION NUMBER C 00407866
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee LIMEY TEES	Date 09' 06' 2008
Mailing Address 730 W. 9th St.	Amount 51480
City State Zip Code CHICO CA 95928	
Purpose of Expenditure Campaign Signs & T-shirts Mats	Category/Type 006
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	
Calendar Year-To-Date Per Election for Office Sought 411580	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee LIMEY TEES	Date 08' 26' 2008
Mailing Address 730 W. 9th St.	Amount 73413
City State Zip Code CHICO CA 95928	
Purpose of Expenditure T-shirts Campaign Mats	Category/Type 006
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	
Calendar Year-To-Date Per Election for Office Sought 484993	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures	124893
(b) SUBTOTAL of Unitemized Independent Expenditures	0
(c) TOTAL Independent Expenditures	124893

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.

Maia A. Rivers
Signature

Date **01' 25' 2009**

29030043039

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

NAME OF COMMITTEE (In Full) DEMOCRATIC ACTION CLUB OF CHICO	FEC IDENTIFICATION NUMBER C 00407866
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee LIMEY TEES	Date 09' 17' 2008
Mailing Address 730 W. 9th ST.	Amount 21450
City State Zip Code CHICO CA 95928	
Purpose of Expenditure T-shirts (campaign materials)	Category/Type 006
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____
Calendar Year-To-Date Per Election for Office Sought 5064.43	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Limey T-s (same)	Date 09' 26' 2008
Mailing Address 730 W. 9th AVE	Amount 120656
City State Zip Code CHICO, CA 95928	
Purpose of Expenditure Lawn signs (Camp. Mat'l)	Category/Type 006
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____
Calendar Year-To-Date Per Election for Office Sought 6270.99	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	142106
(b) SUBTOTAL of Unitemized Independent Expenditures.....	0
(c) TOTAL Independent Expenditures.....	142106

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.

Maia A. Flynn
Signature

Date **01' 25' 2009**

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FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

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2009 MAR -3 A 10: 25

January 9, 2009

Maria Phillips, Treasurer
Democratic Action Club of Chico
884 Vallombrosa Avenue
Chico, CA 95926

**Response Due Date:
February 9, 2009**

Identification Number: C00407866

Reference: October Quarterly Report (7/1/08-9/30/08)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following item:

-Schedule B discloses an expenditure(s) for "REIMBURSEMENT FOR CAMPAIGN MAT'S PURCHAS," "T-SHIRTS (CAMPAIGN MAT'L'S)," "REIMBURSEMENT FOR CAMPAIGN MAT'LS PURCH," "SIGNS & T-SHIRTS," "T-SHIRTS," "LAWN SIGNS," "REIMB. FOR EXPENSES, VOTER REG. AS BELOW," "REGISTR. BOOTH," "VOTER REGISTR MAT'S" and "POSTER MAT'LS VOTER REG." If a portion or all of these expenditures were for public communications (as defined by 11 CFR §100.26) or voter drive activity (under 11 CFR §106.6(b)(2)(i)) containing express advocacy as defined under 11 CFR §100.22, this would constitute an in-kind contribution or an independent expenditure and should be properly disclosed on a Schedule B or E supporting Line 23 or 24 as appropriate. Public communications and voter drive activity that refer to a clearly identified Federal candidate, but that do not expressly advocate the election or defeat of that candidate should be reported on Schedule B for Line 21(b) of the Detailed Summary Page. Please clarify whether this activity contained express advocacy and amend your report to properly disclose this activity, if necessary.

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action

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will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1177.

Sincerely,



Corbin T. Jones
Senior Campaign Finance Analyst
Reports Analysis Division

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked
1/28/09 *W*

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

[Signature] 3/3/09
 PREPARER DATE PREPARED

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