

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Del Norte County Democratic Central Committee

ADDRESS (number and street) Post Office Box 15  
 Check if different than previously reported. (ACC)  
Crescent City CA 95531

2. **FEC IDENTIFICATION NUMBER** C00442616  
**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 Quarterly 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 \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 11 23 2010 through 12 31 2010

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 Rita Copeland

Signature of Treasurer Electronically Filed by Rita Copeland Date 01 31 2011

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)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Del Norte County Democratic Central Committee

Report Covering the Period: From: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		7545.26
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	6746.73									
(c) Total Receipts (from Line 19) .....	1458.74	20629.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	8205.47	28174.34								
7. Total Disbursements (from Line 31) .....	1960.36	21929.23								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	6245.11	6245.11								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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**

Write or Type Committee Name

Del Norte County Democratic Central Committee

Report Covering the Period: From: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	0.00	3550.00
(ii) Unitemized .....	0.00	1998.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	5548.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	7548.00
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	262.15	665.01
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	1196.59	12416.07
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	1196.59	12416.07
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1458.74	20629.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	262.15	8213.01

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	251.08	4472.25
(ii) Non-Federal Share.....	944.48	16303.38
(b) Other Federal Operating Expenditures.....	205.00	248.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1400.56	21024.43
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	14.12	14.12
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	545.68	545.68
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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	345.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	345.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1960.36	21929.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1015.88	5625.85

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 14

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) .....	0.00	7548.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	7548.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	456.08	4721.05
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	456.08	4721.05

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 6 / 14</span>
	(check only one)
<input 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 checked="" 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)  
Del Norte County Democratic Central Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Democratic State Central Committee Of California		Date of Receipt
	Mailing Address 1401 21st Street, Suite 100		<input type="text" value="11"/> <input type="text" value="24"/> <input type="text" value="2010"/>
	City	State	Zip Code
	Sacramento	CA	95811
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00105668"/>	
Name of Employer		Occupation	Transaction ID: INCA460
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="182.00"/>	
		Aggregate Year-to-Date ▼	VR Bounty
		<input type="text" value="431.50"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Julindra Recycling		Date of Receipt
	Mailing Address 1037 Harrold		<input type="text" value="12"/> <input type="text" value="10"/> <input type="text" value="2010"/>
	City	State	Zip Code
	Crescent City	CA	95531
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value=""/>	
Name of Employer		Occupation	Transaction ID: INCA468
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="80.15"/>	
		Aggregate Year-to-Date ▼	Recycling
		<input type="text" value="228.34"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="262.15"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="262.15"/>

**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"/> 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)  
Del Norte County Democratic Central Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Debra E. Broner</p> <hr/> <p>Mailing Address Post Office Box 830 185 Rose Lane</p> <hr/> <p>City Crescent City State CA Zip Code 95531</p> <hr/> <p>Purpose of Disbursement Signs</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> EXPB461</p> <p>Date of Disbursement  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <hr/> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: right;">205.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0	205.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	1	0													
205.00																						
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Barbara Boxer</p> <hr/> <p>Mailing Address Post Office Box 93969</p> <hr/> <p>City Los Angeles State CA Zip Code 90093</p> <hr/> <p>Purpose of Disbursement Signs</p> <p>Candidate Name Barbara Boxer</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> EDTB14EXPB461</p> <p>Date of Disbursement  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <hr/> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: right;">205.00</td> </tr> </table> <p><b>[MEMO ITEM]</b></p> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0	205.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	1	0													
205.00																						

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

205.00

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

205.00

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

NAME OF COMMITTEE (In Full) Del Norte County Democratic Central Committee		FEC IDENTIFICATION NUMBER <b>C</b> C00442616	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 1 0	
Full Name (Last, First, Middle, Initial) of Payee The Daily Triplicate, Inc.		Amount 7.06	
Mailing Address Post Office Box 277		Transaction ID: PDTE3	
City Crescent City	State CA	Zip Code 95531	Office Sought: <input type="checkbox"/> House State: CA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Purpose of Expenditure Print ads	Category/ Type	006	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Barbara Boxer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Calendar Year-To-Date Per Election for Office Sought		212.06	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	7.06
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	7.06
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.	
Rita Copeland Signature	Date M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 1 1



**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 / 14

<input 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 checked="" 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)  
Del Norte County Democratic Central Committee

A.

Full Name (Last, First, Middle Initial)  
The Daily Triplicate, Inc.

Transaction ID: EXPB458  
Date of Disbursement

Mailing Address Post Office Box 277

<sup>M</sup> 1	<sup>M</sup> 1	/	<sup>D</sup> 2	<sup>D</sup> 9	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 1	<sup>Y</sup> 0
-------------------	-------------------	---	-------------------	-------------------	---	-------------------	-------------------	-------------------	-------------------

City State Zip Code  
Crescent City CA 95531

Amount of Each Disbursement this Period

545.68
--------

Purpose of Disbursement  
Print ads

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

545.68
--------

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

545.68
--------

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Del Norte County Democratic Central Committee

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> The Daily Triplicate, Inc.			Nature of Debt (Purpose): Print ads
Mailing Address Post Office Box 277			
City	State	ZIP Code	
Crescent City	CA	95531	

Outstanding Balance Beginning This Period		Transaction ID: PAYD454	
14.12			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	14.12	0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> The Daily Triplicate, Inc.			Nature of Debt (Purpose): Print ads
Mailing Address Post Office Box 277			
City	State	ZIP Code	
Crescent City	CA	95531	

Outstanding Balance Beginning This Period		Transaction ID: PAYD455	
545.68			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	545.68	0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	0.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	0.00

B. Form/Schedule : **SD10**

In-kind to state committee

Transaction ID : **PAYD455**

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Del Norte County Democratic Central Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Del Norte County Democratic Central Committee- State Account	M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0	1196.59

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	1196.59	Transaction ID: INCH3AD470
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	1196.59
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	1196.59

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Del Norte County Democratic Central Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Charter Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Post Office Box 78063			Allocated Activity or Event Year-To-Date 20533.06		
City	State	Zip Code	001		
Phoenix	AZ	85062			
Purpose of Disbursement: TV & Internet			Category/ Type		
Activity or Event Identifier: Administrative			Date <span style="font-size:small;">M M / D D / Y Y Y Y</span> 1 1 / 3 0 / 2 0 1 0		
			Transaction ID: EXPH4462		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.92		82.44		104.36

<b>B. Full Name (Last, First, Middle Initial)</b> Frontier			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Post Office Box 2951			Allocated Activity or Event Year-To-Date 20533.06		
City	State	Zip Code	001		
Phoenix	AZ	85062			
Purpose of Disbursement: Telephone			Category/ Type		
Activity or Event Identifier: Administrative			Date <span style="font-size:small;">M M / D D / Y Y Y Y</span> 1 1 / 3 0 / 2 0 1 0		
			Transaction ID: EXPH4463		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.34		61.46		77.80

<b>C. Full Name (Last, First, Middle Initial)</b> Frontier			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Post Office Box 2951			Allocated Activity or Event Year-To-Date 20533.06		
City	State	Zip Code	001		
Phoenix	AZ	85062			
Purpose of Disbursement: Telephone			Category/ Type		
Activity or Event Identifier: Administrative			Date <span style="font-size:small;">M M / D D / Y Y Y Y</span> 1 2 / 2 3 / 2 0 1 0		
			Transaction ID: EXPH4467		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.26		64.92		82.18

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.52		208.82		264.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Del Norte County Democratic Central Committee

**A. Full Name (Last, First, Middle Initial)**  
Pacific Power

Mailing Address  
1033 NE 6th Avenue

City	State	Zip Code	001
Portland	OR	97256	

Purpose of Disbursement:  
Utilities

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
20533.06

Date  /  /   
**Transaction ID:** EXPH4466

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.42		20.38		25.80

**B. Full Name (Last, First, Middle Initial)**  
River City Business Services

Mailing Address  
5429 Madison Avenue

City	State	Zip Code	001
Sacramento	CA	95841	

Purpose of Disbursement:  
Bookkeeping Services, Postage, Faxes and Copies

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
20533.06

Date  /  /   
**Transaction ID:** EXPH4465

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
190.14		715.28		905.42

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
195.56		735.66		931.22

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
251.08		944.48		1195.56