

**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

Placer County Democratic Central Committee

ADDRESS (number and street)

PO Box 423

☐Check if different  
than previously  
reported. (ACC)

Roseville

CA

95678

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00433318

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 (12G)

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

01

01

2008

through

03

31

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

Linda Hall

Signature of Treasurer

Electronically Filed by Linda Hall

Date

02

02

2010

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

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name

Placer County Democratic Central Committee

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 1 | 0 | 1 | 2 | 0 | 0 | 8 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 3 | 3 | 1 | 2 | 0 | 0 | 8 |

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1 <span>2008</span>   |                         | 6652.05                           |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....   | 6652.05                 |                                   |
| (c) Total Receipts (from Line 19) .....  | 4303.00                 | 4303.00                           |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....             | 10955.05                | 10955.05                          |
| 7. Total Disbursements (from Line 31) .....  | 4584.37                 | 4584.37                           |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 6370.68                 | 6370.68                           |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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. 06/2004)

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Write or Type Committee Name

Placer County Democratic Central Committee

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | W | Y |
| 0 | 1 | 0 | 1 | 2 | 0 | 0 | 8 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 3 | 3 | 1 | 2 | 0 | 0 | 8 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | 70.00                         | 70.00                             |
| (ii) Unitemized .....  | 3790.00                       | 3790.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 3860.00                       | 3860.00                           |
| (b) Political Party Committees .....   | 400.00                        | 400.00                            |
| (c) Other Political Committees (such as PACs) .....  | 43.00                         | 43.00                             |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 4303.00                       | 4303.00                           |
| 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.) .....   | 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 Transfer (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)) .....                          | 4303.00                       | 4303.00                           |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 4303.00                       | 4303.00                           |

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS  |         | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|---------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |         |                               |                                   |
| (a) Shared 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.....  | 2334.37 | 2334.37                       |                                   |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤                        | 2334.37 | 2334.37                       |                                   |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00    | 0.00                          |                                   |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 1000.00 | 1000.00                       |                                   |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00    | 0.00                          |                                   |
| 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.....   | 1250.00 | 1250.00                       |                                   |
| 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    | 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))..       | 4584.37 | 4584.37                       |                                   |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 4584.37 | 4584.37                       |                                   |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 4303.00                       | 4303.00                           |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 4303.00                       | 4303.00                           |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 2334.37                       | 2334.37                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 2334.37                       | 2334.37                           |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 12

(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

Placer County Democratic Central Committee

**A.**

Full Name (Last, First, Middle Initial)

Barbara Blank

Mailing Address 4541 Coach Lamp Lane

City

Roseville

State

CA

Zip Code

95747

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAOccupation  
Retired

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 9 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.4755

Amount of Each Receipt this Period

70.00

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

70.00

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

70.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 12

(check only one)

|                              |   |                              |                             |                             |                             |                             |                             |                             |
|------------------------------|---|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input checked="" 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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NAME OF COMMITTEE (In Full)

Placer County Democratic Central Committee

**A.**

Full Name (Last, First, Middle Initial)

California Democratic Party

Mailing Address 1401 21st Street, Suite 200

City

Sacramento

State

CA

Zip Code

95811

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

C00105668

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 1 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11B.4700

Amount of Each Receipt this Period

400.00

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

400.00

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

400.00

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

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

FOR LINE NUMBER: PAGE 8 / 12

(check only one)

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

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NAME OF COMMITTEE (In Full)

Placer County Democratic Central Committee

**A.**

Full Name (Last, First, Middle Initial)

Take Back Red California

Mailing Address 21 Convent Court

City

San Rafael

State

CA

Zip Code

94901

FEC ID number of contributing  
federal political committee.

**C**

C00421388

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

43.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 1 / 2 0 0 8

Transaction ID: SA11C.4740

Amount of Each Receipt this Period

43.00

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

43.00

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

43.00



# **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 / 12

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

Placer County Democratic Central Committee

|   |  |
|---|--|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Gold Country Fair</p> <p>Mailing Address 1273 High Street</p> <p>City Auburn State CA Zip Code 95603</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>               | <p><b>Transaction ID:</b> SB21B.4805</p> <p><b>Date of Disbursement</b><br/> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 2 / 2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b><br/> <div>600.00</div> </p> <p><b>003</b><br/>Category/Type</p> |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Kim Haswell</p> <p>Mailing Address 1630 Burlin Way</p> <p>City Auburn State CA Zip Code 95603</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                      | <p><b>Transaction ID:</b> SB21B.4811</p> <p><b>Date of Disbursement</b><br/> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 0 / 2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b><br/> <div>193.78</div> </p> <p><b>003</b><br/>Category/Type</p> |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Placer County Fair</p> <p>Mailing Address 800 All American City Blvd</p> <p>City Roseville State CA Zip Code 95678</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB21B.4802</p> <p><b>Date of Disbursement</b><br/> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b><br/> <div>375.00</div> </p> <p><b>003</b><br/>Category/Type</p> |

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

**1168.78**

**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 / 12

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

Placer County Democratic Central Committee

A.

Full Name (Last, First, Middle Initial)

Save Clover Valley

Mailing Address 3031 Stanford Ranch Rd  
Ste 2-201

City State Zip Code  
Rocklin CA 95765

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4799

Date of Disbursement

/   /

Amount of Each Disbursement this Period

990.00

012

Category/  
Type

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

990.00

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

2158.78

# **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 / 12

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" 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)

Placer County Democratic Central Committee

A.

Full Name (Last, First, Middle Initial)

BROWN, CHARLES

Mailing Address 400 UNITY COURT

City  
ROSEVILLE

State  
CA

Zip Code  
95678

Purpose of Disbursement  
Brown for Congress

Candidate Name  
BROWN, CHARLES

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: CA District: 04

Special-Primary

Transaction ID: SB23.5195

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 2 |   | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

1000.00

# **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 12 / 12

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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NAME OF COMMITTEE (In Full)

Placer County Democratic Central Committee

**A.**

Full Name (Last, First, Middle Initial)

Montgomery for Supervisor

Mailing Address PO Box 747

City  
Soda Springs

State  
CA

Zip Code  
95728

Purpose of Disbursement  
local candidate contribution

012

Category/  
Type

Candidate Name  
Montgomery for Supervisor

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Special-Primary

Transaction ID: SB29.5197

Date of Disbursement

03 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Planned Parenthood Mar Monte

Mailing Address 201 29th St,  
Ste A

City  
Sacramento

State  
CA

Zip Code  
95818

Purpose of Disbursement

012

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5200

Date of Disbursement

03 / 29 / 2008

Amount of Each Disbursement this Period

250.00

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

1250.00

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

1250.00