

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2015 JUN 6 AM 9:00

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

SOUTH ORANGE COUNTY DEMOCRATIC CLUB

ADDRESS (number and street)

PO BOX 7292

Check if different than previously reported. (ACC)

CARLESTRAND BEACH CA 92624-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00921057

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) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- 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

04 / 01 / 2015

through

06 / 30 / 2015

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 WILLA PORTER

Signature of Treasurer

Willia Porter

Date

07 / 31 / 2015

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SOUTH ORANGE COUNTY DEMOCRATIC CLUB

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="2015"/>	<input type="text" value="1323540"/>	<input type="text" value="1323540"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1308208"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="63600"/>	<input type="text" value="77600"/>
(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="1371808"/>	<input type="text" value="1401140"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="122444"/>	<input type="text" value="151776"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1249364"/>	<input type="text" value="1249364"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="000"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="000"/>	

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

SOUTH ORANGE COUNTY DEMOCRATIC CLUB

Report Covering the Period: From: **04** ' **01** ' **2015** To: **06** ' **30** ' **2015**

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).....	000	000
(ii) Unitemized.....	636.00	776.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	636.00	776.00
(b) Political Party Committees.....	000	000
(c) Other Political Committees (such as PACs).....	000	000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	636.00	776.00
12. Transfers From Affiliated/Other Party Committees.....	000	000
13. All Loans Received.....	000	000
14. Loan Repayments Received.....	000	000
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	000	000
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	000	000
17. Other Federal Receipts (Dividends, Interest, etc.).....	000	000
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	000	000
(b) Levin Funds (from Schedule H5).....	000	000
(c) Total Transfers (add 18(a) and 18(b))..	000	000
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	636.00	776.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	636.00	776.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	1,224.44	1,517.76
(ii) Non-Federal Share	000	000
(b) Other Federal Operating Expenditures	000	000
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1,224.44	1,517.76
22. Transfers to Affiliated/Other Party Committees	000	000
23. Contributions to Federal Candidates/Committees and Other Political Committees	000	000
24. Independent Expenditures (use Schedule E)	000	000
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	000	000
26. Loan Repayments Made	000	000
27. Loans Made	000	000
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	000	000
(b) Political Party Committees	000	000
(c) Other Political Committees (such as PACs)	000	000
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	000	000
29. Other Disbursements	000	000
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	000	000
(ii) "Levin" Share	000	000
(b) Federal Election Activity Paid Entirely With Federal Funds	000	000
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	000	000
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1,224.44	1,517.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,224.44	1,517.76

**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 <u>3</u> OF <u>3</u>	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 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)
SOUTH ORANGE COUNTY DEMOCRATIC CLUB

A. Full Name (Last, First, Middle Initial) FAUSTINO OCHOA		Date of Disbursement 06 17 2015
Mailing Address 26895 ALISO CREEK ROAD		Amount of Each Disbursement this Period 157.00
City ALISO VIEJO	State CA	
Purpose of Disbursement Catered food for meeting	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

B. Full Name (Last, First, Middle Initial) SQUARE INC.		Date of Disbursement 06 30 2015
Mailing Address		Amount of Each Disbursement this Period 4.92
City	State Zip Code	
Purpose of Disbursement TOTAL FOR PROCESSING PAYMENT	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

C. Full Name (Last, First, Middle Initial) USPS		Date of Disbursement 06 30 2015
Mailing Address		Amount of Each Disbursement this Period 106.87
City	State Zip Code	
Purpose of Disbursement TOTAL FOR POSTAGE	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	268.99
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 2 OF 3

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

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NAME OF COMMITTEE (In Full)

SOUTH ORANGE COUNTY DEMOCRATIC CLUB

Full Name (Last, First, Middle Initial)

A. LANTERN BAY REALTY		Date of Disbursement 04/15/2015
Mailing Address 34179 GOLDEN LANTERN #103		Amount of Each Disbursement this Period 120.00
City DANA POINT	State Zip Code CA 92629	
Purpose of Disbursement facility rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

B. DPOC		Date of Disbursement 03/20/2015
Mailing Address 1916 W CHAPMAN AVE.		Amount of Each Disbursement this Period 250.00
City ORANGE	State Zip Code CA	
Purpose of Disbursement hospitality suite rental share		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

C. LANTERN BAY REALTY		Date of Disbursement 05/25/2015
Mailing Address 34179 GOLDEN LANTERN #103		Amount of Each Disbursement this Period 125.00
City DANA POINT	State Zip Code CA 92629	
Purpose of Disbursement facility rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

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

495.00

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input 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 1 OF 3

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NAME OF COMMITTEE (In Full)
SOUTH ORANGE COUNTY DEMOCRATIC CLUB

A. **LANTERN BAY REALTY**

Mailing Address: **34179 GOLDEN LANTERN #103**

City: **DANA POINT** State: **CA** Zip Code: **92629**

Purpose of Disbursement: **FACILITY RENT**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: **03 / 21 / 2015**

Amount of Each Disbursement this Period: **1,100.00**

Category/Type: _____

B. **FEDEX**

Mailing Address: **22972 MOULTON PARKWAY**

City: **LAGUNA HILLS** State: **CA** Zip Code: **92653**

Purpose of Disbursement: **POSTAGE**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: **04 / 10 / 2015**

Amount of Each Disbursement this Period: **10.65**

Category/Type: _____

C. **THE CATERING FACTORY**

Mailing Address: **26895 ALISO CREEK ROAD**

City: **ALISO VIEJO** State: **CA** Zip Code: _____

Purpose of Disbursement: **CATERED DINNER FOR MEETING**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: **04 / 15 / 2015**

Amount of Each Disbursement this Period: **340.00**

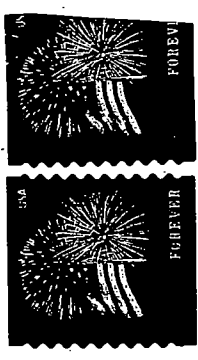
Category/Type: _____

SUBTOTAL of Disbursements This Page (optional).....▶ **4,606.50**

TOTAL This Period (last page this line number only).....▶ **12,244.44**

2011
PO Box 7292
Capistrano Beach, CA 92624

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FIRST CLASS PERMIT NO. 10000 CAPE MICHIGAN MI



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Federal Election Commission
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Washington, DC 20463

Federal Election Commission
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

MP
PREPARER
(3/2015)

8/6/2015
DATE PREPARED