

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** 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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on _____ in the State of _____

(d) 30-Day **Post -Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on _____ in the State of _____

5. Covering Period 04 01 2008 through 06 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 Sharon Gannon

Signature of Treasurer Electronically Filed by Sharon Gannon 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							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Placer County Democratic Central Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		6652.05
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	6370.68									
(c) Total Receipts (from Line 19)	16052.00	20355.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	22422.68	27007.05								
7. Total Disbursements (from Line 31)	10785.61	15369.98								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	11637.07	11637.07								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Placer County Democratic Central Committee

Report Covering the Period: From: To:

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)	2718.00	2788.00
(ii) Unitemized	7286.00	11076.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10004.00	13864.00
(b) Political Party Committees	392.00	792.00
(c) Other Political Committees (such as PACs)	5656.00	5699.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	16052.00	20355.00
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))	16052.00	20355.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16052.00	20355.00

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	2334.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	2334.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	1300.00	2300.00
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.....	9485.61	10735.61
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))..	10785.61	15369.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10785.61	15369.98

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 20

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)	16052.00	20355.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16052.00	20355.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	2334.37
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	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 / 20

(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)
Judy Cunningham

Mailing Address 3631 Bridlewood Way

City State Zip Code
Roseville CA 95747

FEC ID number of contributing federal political committee. C

Name of Employer NA Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt
05 / 16 / 2008

Transaction ID: SA11AI.5039

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Kevin Eckard

Mailing Address PO Box 240

City State Zip Code
Auburn CA 95604

FEC ID number of contributing federal political committee. C

Name of Employer Placer County Superior Court Occupation Probate Referee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 16 / 2008

Transaction ID: SA11AI.4933

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Rita Glenn

Mailing Address 877 Wildomar Lane

City State Zip Code
Lincoln CA 95645

FEC ID number of contributing federal political committee. C

Name of Employer NA Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
04 / 19 / 2008

Transaction ID: SA11AI.4942

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) 1208.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 20
(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)
Virginia C Haradon

Mailing Address 648 Gold Strike Court

City Lincoln State CA Zip Code 95648

FEC ID number of contributing federal political committee. C

Name of Employer NA Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt MM / DD / YYYY
04 / 16 / 2008

Transaction ID: SA11AI.4940

Amount of Each Receipt this Period 175.00

B. Full Name (Last, First, Middle Initial)
Highland Orchard

Mailing Address 2170 Aguilar Lane

City Penryn State CA Zip Code 95663

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
05 / 16 / 2008

Transaction ID: SA11AI.5031

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Carole L. Scales

Mailing Address 4831 Castana Drive

City Cameron Park State CA Zip Code 95682

FEC ID number of contributing federal political committee. C

Name of Employer NA Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
05 / 16 / 2008

Transaction ID: SA11AI.5032

Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) 975.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 20

(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

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NAME OF COMMITTEE (In Full)
Placer County Democratic Central Committee

A.

Full Name (Last, First, Middle Initial)
Marie Seward

Mailing Address 214 Live Oak Cir

City State Zip Code
Roseville CA 95678

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

Name of Employer Occupation
NA Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	0	8

Transaction ID: SA11AI.5024

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)
South Placer Heritage Foundation

Mailing Address PO Box 1152

City State Zip Code
Loomis CA 95650

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	8

Transaction ID: SA11AI.4854

Amount of Each Receipt this Period

500.00

Partial refund event venue

SUBTOTAL of Receipts This Page (optional)

535.00

TOTAL This Period (last page this line number only)

2718.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 20	
	(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"/> 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		Date of Receipt
	Mailing Address 1401 21st Street, Suite 200		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Sacramento	CA	95811
	FEC ID number of contributing federal political committee.		Transaction ID: SA11B.4817
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date ▼	<input type="text" value="392.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="792.00"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="392.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="392.00"/>

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

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

FOR LINE NUMBER: PAGE 10 / 20
(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)
California Teacher's Association

Mailing Address 1705 Murchison Drive

City State Zip Code
Burlingame CA 94010

FEC ID number of contributing federal political committee. **C** C70001227

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 6 / 2 0 0 8

Transaction ID: SA11C.4920

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
COMMUNICATION WORKERS OF AMERICA

Mailing Address 501 THIRD STREET NW

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C70000211

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 9 / 2 0 0 8

Transaction ID: SA11C.4961

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Democratic Club of Lincoln

Mailing Address 101 Sun Flare Court

City State Zip Code
Lincoln CA 95648

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 6 / 2 0 0 8

Transaction ID: SA11C.4827

Amount of Each Receipt this Period
16.00

SUBTOTAL of Receipts This Page (optional) ► **1516.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 20
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Friends of Rex Bloomfield

Mailing Address PO Box 1223

City State Zip Code
Meadow Vista CA 95722

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70.00

Date of Receipt
MM / DD / YYYY
04 / 19 / 2008

Transaction ID: SA11C.4971

Amount of Each Receipt this Period
70.00

B. Full Name (Last, First, Middle Initial)
IBEW Local 340 PAC

Mailing Address 3840 El Centro Rd, No. 115

City State Zip Code
Sacramento CA 95833

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2008

Transaction ID: SA11C.5014

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Laborers Local 185 PAC

Mailing Address Small Contributor Committee
555 Capital Mall, Ste 1425

City State Zip Code
Sacramento CA 95814

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 19 / 2008

Transaction ID: SA11C.4936

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2070.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 20
(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)
NORTHERN CALIFORNIA CARPENTERS REGIONAL COUNCIL

Mailing Address SMALL CONTRIBUTOR COMMITTEE
265 HEGENBERGER ROAD

City OAKLAND State CA Zip Code 94621

FEC ID number of contributing federal political committee. **C** C70003272

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: SA11C.5056

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
OPERATING ENGINEERS LOCAL UNION NO 3

Mailing Address District 8 PAC

City Alameda State CA Zip Code 94502

FEC ID number of contributing federal political committee. **C** C70004288

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2008

Transaction ID: SA11C.5017

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Re-Elect Robert Weygant

Mailing Address For Supervisor Committee
4595 Wise Road

City Lincoln State CA Zip Code 95648

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2008

Transaction ID: SA11C.5029

Amount of Each Receipt this Period
70.00

SUBTOTAL of Receipts This Page (optional) ► **1570.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 20	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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) State Legislative Board		Date of Receipt		
	Mailing Address United Transportation Union 1005 12th Street Ste 4		M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 8		
	City Sacramento	State CA	Zip Code 95814	Transaction ID: SA11C.5057	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00		
	Name of Employer		Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	5656.00

**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 14 / 20

<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

Transaction ID: SB23.4833
Date of Disbursement

Mailing Address 400 UNITY COURT

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	8

City State Zip Code
ROSEVILLE CA 95678

Amount of Each Disbursement this Period

1300.00

Purpose of Disbursement

011
Category/ Type

Candidate Name
BROWN, CHARLES

Office Sought: House
 Senate
 President
State: CA District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

1300.00

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

1300.00

**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 15 / 20

<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) Actblue Mailing Address 14 Arrow Street Suite 11 City Cambridge State MA Zip Code 02138 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4852 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 8 Amount of Each Disbursement this Period 6.92 003 Category/ Type
B.	Full Name (Last, First, Middle Initial) Actblue Mailing Address 14 Arrow Street Suite 11 City Cambridge State MA Zip Code 02138 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4858 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 8 Amount of Each Disbursement this Period 2.77 003 Category/ Type
C.	Full Name (Last, First, Middle Initial) California Democratic Party Mailing Address 1401 21st Street, Suite 200 City Sacramento State CA Zip Code 95811 Purpose of Disbursement Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.5043 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 8 Amount of Each Disbursement this Period 675.00 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	684.69
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 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) Lawrence DuBois <hr/> Mailing Address 3195 Humphrey Rd <hr/> City Loomis State CA Zip Code 95650 <hr/> Purpose of Disbursement fundraising expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.5201 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 8	Amount of Each Disbursement this Period 350.55
B.	Full Name (Last, First, Middle Initial) Lawrence DuBois <hr/> Mailing Address 3195 Humphrey Rd <hr/> City Loomis State CA Zip Code 95650 <hr/> Purpose of Disbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4859 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8	Amount of Each Disbursement this Period 242.40
C.	Full Name (Last, First, Middle Initial) Lawrence DuBois <hr/> Mailing Address 3195 Humphrey Rd <hr/> City Loomis State CA Zip Code 95650 <hr/> Purpose of Disbursement Booth at Roseville Tuesday Nights Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.5045 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8	Amount of Each Disbursement this Period 501.00

SUBTOTAL of Disbursements This Page (optional)	1093.95
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 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) Four Waters Media <hr/> Mailing Address 624 Todhunter Avenue <hr/> City West Sacramento State CA Zip Code 95605 <hr/> Purpose of Disbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4840 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 250.50 <hr/> 003 Category/ Type
B.	Full Name (Last, First, Middle Initial) Gathering Inn <hr/> Mailing Address PO Box 297 <hr/> City Roseville State CA Zip Code 95678 <hr/> Purpose of Disbursement Memorial gift honoring Bill Santucci Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4831 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 75.00 <hr/> 012 Category/ Type
C.	Full Name (Last, First, Middle Initial) Kim Haswell <hr/> Mailing Address 1630 Burlin Way <hr/> City Auburn State CA Zip Code 95603 <hr/> Purpose of Disbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4845 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1100.51 <hr/> 003 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1426.01

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 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) Kim Haswell	Transaction ID: SB29.5042 Date of Disbursement
	Mailing Address 1630 Burlin Way	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City Auburn State CA Zip Code 95603	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="800.00"/>
	Candidate Name	<input type="text" value="003"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kim Haswell	Transaction ID: SB29.4863 Date of Disbursement
	Mailing Address 1630 Burlin Way	<input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City Auburn State CA Zip Code 95603	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1836.15"/>
	Candidate Name	<input type="text" value="003"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Valerie Hromatka	Transaction ID: SB29.4856 Date of Disbursement
	Mailing Address 1425 Everett Way	<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City Roseville State CA Zip Code 95747	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="95.00"/>
	Candidate Name	<input type="text" value="003"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2731.15"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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) Jim Dyar Band	Transaction ID: SB29.4843
	Mailing Address 4633 Mira Vista Court	Date of Disbursement MM / DD / YYYY 04 / 10 / 2008
	City Redding State CA Zip Code 96001	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement	003 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
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Miller for School Board	Transaction ID: SB29.4836
	Mailing Address 5098 Foothills Blvd #3339	Date of Disbursement MM / DD / YYYY 06 / 13 / 2008
	City Rosville State CA Zip Code 95747	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Miller for School Board	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Montgomery for Supervisor	Transaction ID: SB29.4834
	Mailing Address PO Box 747	Date of Disbursement MM / DD / YYYY 05 / 11 / 2008
	City Soda Springs State CA Zip Code 95728	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement	011 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
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3050.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 20

<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) Union Bank of California	Transaction ID: SB29.5047 Date of Disbursement
	Mailing Address 1850 Douglas Blvd Suite 102	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Roseville State CA Zip Code 95661	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charge	<input type="text" value="2.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Viking Printing Company	Transaction ID: SB29.4849 Date of Disbursement
	Mailing Address 1125 11th Street	<input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="497.81"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

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