

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Democratic Headquarters of the Desert

ADDRESS (number and street) 67-555 E. Palm Canyon Drive Suite C-104 Cathedral City CA 92234 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00496679 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 / 01 / 2015 through 12 / 31 / 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 Arthur Copleston

Signature of Treasurer Arthur Copleston [Electronically Filed] Date 03 / 22 / 2016

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 table with 7 columns and 1 row. FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Democratic Headquarters of the Desert**

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="9458.26"/>	<input type="text" value="9458.26"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9296.31"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="6625.00"/>	<input type="text" value="13097.75"/>
(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="15921.31"/>	<input type="text" value="22556.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6861.38"/>	<input type="text" value="13496.08"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9059.93"/>	<input type="text" value="9059.93"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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)

Page 3

Write or Type Committee Name

**Democratic Headquarters of the Desert**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y 12 / 31 / 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).....	4410.00	7830.00
(ii) Unitemized .....	1710.00	4509.25
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6120.00	12339.25
(b) Political Party Committees .....	315.00	478.50
(c) Other Political Committees (such as PACs).....	190.00	280.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6625.00	13097.75
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 Transfers (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))..... ▶	6625.00	13097.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6625.00	13097.75

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6861.38	13496.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6861.38	13496.08
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 Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	6861.38	13496.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6861.38	13496.08

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6625.00	13097.75
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6625.00	13097.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	6861.38	13496.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	6861.38	13496.08

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

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

FOR LINE NUMBER: PAGE 6 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Jackie Atwood**

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
-----------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2015

**Transaction ID : SA11AI.C4598288**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Jackie Atwood**

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2015

**Transaction ID : SA11AI.C4605527**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Jackie Atwood**

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
-----------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

**Transaction ID : SA11AI.C4606089**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Jackie Atwood**

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.C4607452**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Jackie Atwood**

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11	/	01	/	2015

**Transaction ID : SA11AI.C4613103**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Jackie Atwood**

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12	/	01	/	2015

**Transaction ID : SA11AI.C4613948**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Susan Davis**

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2015

**Transaction ID : SA11AI.C4598279**

Amount of Each Receipt this Period  
25.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Susan Davis**

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2015

**Transaction ID : SA11AI.C4605525**

Amount of Each Receipt this Period  
25.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Susan Davis**

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2015

**Transaction ID : SA11AI.C4606087**

Amount of Each Receipt this Period  
25.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00

**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 9 OF 52	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Susan Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : SA11AI.C4607441**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. Susan Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2015

**Transaction ID : SA11AI.C4613123**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. Susan Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2015

**Transaction ID : SA11AI.C4613946**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 10 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Bob Edgerly**

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
875.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2015

**Transaction ID : SA11AI.C4598317**

Amount of Each Receipt this Period  
125.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Bob Edgerly**

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
875.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2015

**Transaction ID : SA11AI.C460533**

Amount of Each Receipt this Period  
125.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Bob Edgerly**

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
875.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

**Transaction ID : SA11AI.C4606096**

Amount of Each Receipt this Period  
125.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> 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: (check only one)	PAGE 11 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Bob Edgerly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.C4607461**

Amount of Each Receipt this Period  

125.00
--------

 Memo Item

**B. Bob Edgerly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2015

**Transaction ID : SA11AI.C4613112**

Amount of Each Receipt this Period  

125.00
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 Memo Item

**C. Bob Edgerly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

**Transaction ID : SA11AI.C4613956**

Amount of Each Receipt this Period  

125.00
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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>375.00</b>
<b>TOTAL</b> 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 OF 52
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Phil Flemion**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 10971

City Palm Desert	State CA	Zip Code 92255
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2015

**Transaction ID : SA11AI.C4598231**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Phil Flemion**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 10971

City Palm Desert	State CA	Zip Code 92255
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2015

**Transaction ID : SA11AI.C4605505**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Phil Flemion**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 10971

City Palm Desert	State CA	Zip Code 92255
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

**Transaction ID : SA11AI.C4606067**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 OF 52  
(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)  
**Democratic Headquarters of the Desert**

**A. Phil Flemion**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 10971

City Palm Desert	State CA	Zip Code 92255
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.C4607422**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Phil Flemion**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 10971

City Palm Desert	State CA	Zip Code 92255
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2015

**Transaction ID : SA11AI.C4613074**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Phil Flemion**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 10971

City Palm Desert	State CA	Zip Code 92255
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

**Transaction ID : SA11AI.C4613925**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 14 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. George Garcia**

Mailing Address 24 Chandra Lane

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 01 / 2015**

**Transaction ID : SA11AI.C4598264**

Amount of Each Receipt this Period  
**25.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. George Garcia**

Mailing Address 24 Chandra Lane

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 01 / 2015**

**Transaction ID : SA11AI.C4605516**

Amount of Each Receipt this Period  
**25.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. George Garcia**

Mailing Address 24 Chandra Lane

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 01 / 2015**

**Transaction ID : SA11AI.C4606080**

Amount of Each Receipt this Period  
**25.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **75.00**

**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 15 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. George Garcia**

Mailing Address 24 Chandra Lane

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.C4607432**

Amount of Each Receipt this Period  
25.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. George Garcia**

Mailing Address 24 Chandra Lane

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2015

**Transaction ID : SA11AI.C4613090**

Amount of Each Receipt this Period  
25.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. George Garcia**

Mailing Address 24 Chandra Lane

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

**Transaction ID : SA11AI.C4613938**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 16 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Tim Johnson**

Mailing Address 43101 Portola  
Spc 131

City State Zip Code  
Palm Desert CA 92260

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2015

**Transaction ID : SA11AI.C4598267**

Amount of Each Receipt this Period  
20.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Tim Johnson**

Mailing Address 43101 Portola  
Spc 131

City State Zip Code  
Palm Desert CA 92260

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2015

**Transaction ID : SA11AI.C4605518**

Amount of Each Receipt this Period  
20.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Tim Johnson**

Mailing Address 43101 Portola  
Spc 131

City State Zip Code  
Palm Desert CA 92260

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2015

**Transaction ID : SA11AI.C4606082**

Amount of Each Receipt this Period  
20.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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: (check only one)	PAGE 17 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Tim Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 43101 Portola  
Spc 131

City Palm Desert State CA Zip Code 92260

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
10 / 09 / 2015  
Transaction ID : SA11AI.C4607988

Amount of Each Receipt this Period  
20.00

Memo Item

**B. Tim Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 43101 Portola  
Spc 131

City Palm Desert State CA Zip Code 92260

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
11 / 01 / 2015  
Transaction ID : SA11AI.C4613092

Amount of Each Receipt this Period  
20.00

Memo Item

**C. Tim Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 43101 Portola  
Spc 131

City Palm Desert State CA Zip Code 92260

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
12 / 01 / 2015  
Transaction ID : SA11AI.C4613941

Amount of Each Receipt this Period  
20.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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 18 OF 52  
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Geoff Kors**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1455 N. Vine Ave.  
City State Zip Code  
Palm Springs CA 92262  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2015  
**Transaction ID : SA11AI.C4598283**  
Amount of Each Receipt this Period  
100.00  
 Memo Item

**B. Geoff Kors**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1455 N. Vine Ave.  
City State Zip Code  
Palm Springs CA 92262  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 01 / 2015  
**Transaction ID : SA11AI.C4605526**  
Amount of Each Receipt this Period  
100.00  
 Memo Item

**C. Geoff Kors**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1455 N. Vine Ave.  
City State Zip Code  
Palm Springs CA 92262  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 01 / 2015  
**Transaction ID : SA11AI.C4606088**  
Amount of Each Receipt this Period  
100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**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 19 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Geoff Kors**

Mailing Address 1455 N. Vine Ave.

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.C4607442**

Amount of Each Receipt this Period  
100.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Geoff Kors**

Mailing Address 1455 N. Vine Ave.

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2015

**Transaction ID : SA11AI.C4613102**

Amount of Each Receipt this Period  
100.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Geoff Kors**

Mailing Address 1455 N. Vine Ave.

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

**Transaction ID : SA11AI.C4613947**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 20 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Elle Kurpiewski**

Mailing Address 69572 Huerta Court

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2015

**Transaction ID : SA11AI.C4598291**

Amount of Each Receipt this Period  
20.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Elle Kurpiewski**

Mailing Address 69572 Huerta Court

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2015

**Transaction ID : SA11AI.C4605649**

Amount of Each Receipt this Period  
20.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Elle Kurpiewski**

Mailing Address 69572 Huerta Court

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2015

**Transaction ID : SA11AI.C4606090**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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: (check only one)	PAGE 21 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Elle Kurpiewski**  
Full Name (Last, First, Middle Initial)

Mailing Address 69572 Huerta Court

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.C4607453**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. Elle Kurpiewski**  
Full Name (Last, First, Middle Initial)

Mailing Address 69572 Huerta Court

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2015

**Transaction ID : SA11AI.C4613104**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. Elle Kurpiewski**  
Full Name (Last, First, Middle Initial)

Mailing Address 69572 Huerta Court

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

**Transaction ID : SA11AI.C4613949**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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: (check only one)	PAGE 22 OF 52
	<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)  
**Democratic Headquarters of the Desert**

**A. Susan Moeller**  
Full Name (Last, First, Middle Initial)

Mailing Address 34260 Linda Way

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2015  
**Transaction ID : SA11AI.C4598249**

Amount of Each Receipt this Period  
 20.00

Memo Item

**B. Susan Moeller**  
Full Name (Last, First, Middle Initial)

Mailing Address 34260 Linda Way

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 01 / 2015  
**Transaction ID : SA11AI.C4605511**

Amount of Each Receipt this Period  
 20.00

Memo Item

**C. Susan Moeller**  
Full Name (Last, First, Middle Initial)

Mailing Address 34260 Linda Way

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 01 / 2015  
**Transaction ID : SA11AI.C4606076**

Amount of Each Receipt this Period  
 20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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: (check only one)	PAGE 23 OF 52
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Susan Moeller**  
Full Name (Last, First, Middle Initial)

Mailing Address 34260 Linda Way

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : SA11AI.C4607428**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. Susan Moeller**  
Full Name (Last, First, Middle Initial)

Mailing Address 34260 Linda Way

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2015

**Transaction ID : SA11AI.C4613124**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. Susan Moeller**  
Full Name (Last, First, Middle Initial)

Mailing Address 34260 Linda Way

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2015

**Transaction ID : SA11AI.C4613934**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> 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 24 OF 52  
(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)  
**Democratic Headquarters of the Desert**

**A. Kathleen O'Regan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 61379 Topaz Drive

City La Quinta	State CA	Zip Code 92253
-------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
07 / 01 / 2015  
**Transaction ID : SA11AI.C4598254**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Kathleen O'Regan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 61379 Topaz Drive

City La Quinta	State CA	Zip Code 92253
-------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
08 / 01 / 2015  
**Transaction ID : SA11AI.C4605512**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Kathleen O'Regan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 61379 Topaz Drive

City La Quinta	State CA	Zip Code 92253
-------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
09 / 01 / 2015  
**Transaction ID : SA11AI.C4606077**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 25 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Kathleen O'Regan**

Mailing Address 61379 Topaz Drive

City La Quinta	State CA	Zip Code 92253
-------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.C4607429**

Amount of Each Receipt this Period  
100.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Kathleen O'Regan**

Mailing Address 61379 Topaz Drive

City La Quinta	State CA	Zip Code 92253
-------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2015

**Transaction ID : SA11AI.C4613084**

Amount of Each Receipt this Period  
100.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Kathleen O'Regan**

Mailing Address 61379 Topaz Drive

City La Quinta	State CA	Zip Code 92253
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

**Transaction ID : SA11AI.C4613935**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 26 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Greg Rodriguez**

Mailing Address 233 Camino sur

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer House of Representatives	Occupation District Director
----------------------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2015

**Transaction ID : SA11AI.C4598228**

Amount of Each Receipt this Period  
25.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Greg Rodriguez**

Mailing Address 233 Camino sur

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer House of Representatives	Occupation District Director
----------------------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2015

**Transaction ID : SA11AI.C4605504**

Amount of Each Receipt this Period  
25.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Greg Rodriguez**

Mailing Address 233 Camino sur

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer House of Representatives	Occupation District Director
----------------------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2015

**Transaction ID : SA11AI.C4606066**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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: (check only one)	PAGE 27 OF 52
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Greg Rodriguez**  
Full Name (Last, First, Middle Initial)

Mailing Address 233 Camino sur

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer House of Representatives	Occupation District Director
----------------------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2015  
**Transaction ID : SA11AI.C4607421**

Amount of Each Receipt this Period  
 25.00

Memo Item

**B. Greg Rodriguez**  
Full Name (Last, First, Middle Initial)

Mailing Address 233 Camino sur

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer House of Representatives	Occupation District Director
----------------------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2015  
**Transaction ID : SA11AI.C4613073**

Amount of Each Receipt this Period  
 25.00

Memo Item

**C. Greg Rodriguez**  
Full Name (Last, First, Middle Initial)

Mailing Address 233 Camino sur

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer House of Representatives	Occupation District Director
----------------------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2015  
**Transaction ID : SA11AI.C4613922**

Amount of Each Receipt this Period  
 25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 28 OF 52  
(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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Mary Schambach**

Mailing Address 120 Lake Shore Drive

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2015

**Transaction ID : SA11AI.C4598325**

Amount of Each Receipt this Period  
20.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Mary Schambach**

Mailing Address 120 Lake Shore Drive

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2015

**Transaction ID : SA11AI.C4605534**

Amount of Each Receipt this Period  
20.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Mary Schambach**

Mailing Address 120 Lake Shore Drive

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

**Transaction ID : SA11AI.C4606097**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 29 OF 52  
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Mary Schambach**

Mailing Address 120 Lake Shore Drive

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.C4607462**

Amount of Each Receipt this Period  
20.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Mary Schambach**

Mailing Address 120 Lake Shore Drive

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2015

**Transaction ID : SA11AI.C4613114**

Amount of Each Receipt this Period  
20.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Mary Schambach**

Mailing Address 120 Lake Shore Drive

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

**Transaction ID : SA11AI.C4613959**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 30 OF 52  
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Mary Schambach**

Mailing Address 120 Lake Shore Drive

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **12 / 02 / 2015**

**Transaction ID : SA11AI.C4614023**

Amount of Each Receipt this Period **200.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Rick Weingard**

Mailing Address 1150 E. Palm Canyon Dr. #92

City Palm Springs State CA Zip Code 92264

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

Name of Employer Promotivators Occupation Sales/Mktg

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **08 / 09 / 2015**

**Transaction ID : SA11AI.C4605697**

Amount of Each Receipt this Period **100.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Rick Weingard**

Mailing Address 1150 E. Palm Canyon Dr. #92

City Palm Springs State CA Zip Code 92264

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

Name of Employer Promotivators Occupation Sales/Mktg

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **08 / 09 / 2015**

**Transaction ID : SA11AI.C4605698**

Amount of Each Receipt this Period **5.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **305.00**

**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: (check only one)	PAGE 31 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Rick Weingard**  
Full Name (Last, First, Middle Initial)

Mailing Address 1150 E. Palm Canyon Dr.  
#92

City State Zip Code  
Palm Springs CA 92264

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

Name of Employer Occupation  
Promotivators Sales/Mktg

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2015

**Transaction ID : SA11AI.C4614024**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. Robert Westwood**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 Chandra Lane

City State Zip Code  
Rancho Mirage CA 92270

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2015

**Transaction ID : SA11AI.C4598266**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Robert Westwood**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 Chandra Lane

City State Zip Code  
Rancho Mirage CA 92270

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 01 / 2015

**Transaction ID : SA11AI.C4605515**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> 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: (check only one)	PAGE 32 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Robert Westwood**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 Chandra Lane

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : SA11AI.C4606081**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Robert Westwood**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 Chandra Lane

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : SA11AI.C4607433**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Robert Westwood**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 Chandra Lane

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2015

**Transaction ID : SA11AI.C4613091**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 33 OF 52  
(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)  
**Democratic Headquarters of the Desert**

**A. Robert Westwood**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 Chandra Lane

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
12 / 01 / 2015  
Transaction ID : SA11AI.C4613939

Amount of Each Receipt this Period  
100.00

Memo Item

**B.**  
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**C.**  
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4410.00

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

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

FOR LINE NUMBER: PAGE 34 OF 52  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. RCDCC - Fed**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11333 Lakeport Drive  
 City Riverside State CA Zip Code 92505  
 FEC ID number of contributing federal political committee. **C** C00396994  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 478.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 03 / 2015  
**Transaction ID : SA11B.C4598441**  
 Amount of Each Receipt this Period  
 22.50  
 Memo Item

**B. RCDCC - Fed**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11333 Lakeport Drive  
 City Riverside State CA Zip Code 92505  
 FEC ID number of contributing federal political committee. **C** C00396994  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 478.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2015  
**Transaction ID : SA11B.C4603957**  
 Amount of Each Receipt this Period  
 22.50  
 Memo Item

**c. RCDCC - Fed**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11333 Lakeport Drive  
 City Riverside State CA Zip Code 92505  
 FEC ID number of contributing federal political committee. **C** C00396994  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 478.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2015  
**Transaction ID : SA11B.C4606612**  
 Amount of Each Receipt this Period  
 54.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 99.00  
**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: (check only one)	PAGE 35 OF 52
<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)  
**Democratic Headquarters of the Desert**

**A. RCDCC - Fed**

Full Name (Last, First, Middle Initial)  
Mailing Address 11333 Lakeport Drive

City Riverside	State CA	Zip Code 92505
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00396994

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
478.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : SA11B.C4607767**

Amount of Each Receipt this Period  
54.00

Memo Item

**B. RCDCC - Fed**

Full Name (Last, First, Middle Initial)  
Mailing Address 11333 Lakeport Drive

City Riverside	State CA	Zip Code 92505
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00396994

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
478.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2015

**Transaction ID : SA11B.C4613373**

Amount of Each Receipt this Period  
54.00

Memo Item

**c. RCDCC - Fed**

Full Name (Last, First, Middle Initial)  
Mailing Address 11333 Lakeport Drive

City Riverside	State CA	Zip Code 92505
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00396994

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
478.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2015

**Transaction ID : SA11B.C4614053**

Amount of Each Receipt this Period  
54.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	162.00
<b>TOTAL</b> 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 36 OF 52  
(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)  
**Democratic Headquarters of the Desert**

**A. RCDCC - Fed**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11333 Lakeport Drive  
City Riverside State CA Zip Code 92505  
FEC ID number of contributing federal political committee. **C** C00396994  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 478.50

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2015  
**Transaction ID : SA11B.C4614697**  
Amount of Each Receipt this Period  
54.00  
 Memo Item

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period  
 Memo Item

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	54.00
<b>TOTAL</b> This Period (last page this line number only).....▶	315.00

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

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

FOR LINE NUMBER: PAGE 37 OF 52  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)  
**A. Democratic Women of the Desert**  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 28 / 2015  
**Transaction ID : SA11C.C4613901**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. Democratic Women of the Desert PAC**  
 Mailing Address PO Box 6207  
 City State Zip Code  
 La Quinta CA 92248  
 FEC ID number of contributing federal political committee. **C** C00416347  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 180.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2015  
**Transaction ID : SA11C.C4613422**  
 Amount of Each Receipt this Period  
 90.00  
 Memo Item

Full Name (Last, First, Middle Initial)  
**C.**  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	190.00
<b>TOTAL</b> This Period (last page this line number only).....▶	190.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. Time Warner Cable**

Mailing Address PO Box 60074

City State Zip Code  
City of Industry CA 91716

Purpose of Disbursement  
Monthly cable bill

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1612191**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Time Warner Cable**

Mailing Address PO Box 60074

City State Zip Code  
City of Industry CA 91716

Purpose of Disbursement  
Cable bill

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1613739**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Southern California Edison**

Mailing Address PO Box 300

City State Zip Code  
Rosemead CA 91772

Purpose of Disbursement  
monthly electric bill

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1615884**

Amount of Each Disbursement this Period

Memo Item

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. Southern California Edison**

Mailing Address PO Box 300

City Rosemead State CA Zip Code 91772

Purpose of Disbursement  
Monthly Electric bill

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1618156**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Southern California Edison**

Mailing Address PO Box 300

City Rosemead State CA Zip Code 91772

Purpose of Disbursement  
monthly electric bill

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1613640**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
monthly cc processing charge

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1616865**

Amount of Each Disbursement this Period

Memo Item

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily charge

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2015

Transaction ID : SB21B.E1622549

Amount of Each Disbursement this Period

3.65

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc monthly charge

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 02 / 2015

Transaction ID : SB21B.E1622547

Amount of Each Disbursement this Period

14.89

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily charge

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

Transaction ID : SB21B.E1621414

Amount of Each Disbursement this Period

0.16

Memo Item

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

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

18.70



**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

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City State Zip Code  
Thousand Oaks CA 91359

Purpose of Disbursement  
cc monthly processing charge

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2015			

**Transaction ID : SB21B.E1621412**

Amount of Each Disbursement this Period

14.90
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Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City State Zip Code  
Thousand Oaks CA 91359

Purpose of Disbursement  
cc monthly processing charge

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2015			

**Transaction ID : SB21B.E1621410**

Amount of Each Disbursement this Period

63.15
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City State Zip Code  
Thousand Oaks CA 91359

Purpose of Disbursement  
cc daily processing charge

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2015			

**Transaction ID : SB21B.E1619090**

Amount of Each Disbursement this Period

1.57
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Memo Item

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

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

79.62
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**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

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily processing charge

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 11 / 2015

**Transaction ID : SB21B.E1619088**

Amount of Each Disbursement this Period

0.31

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc monthly processing charge

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

**Transaction ID : SB21B.E1619086**

Amount of Each Disbursement this Period

14.29

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc monthly processing charge

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2015

**Transaction ID : SB21B.E1619084**

Amount of Each Disbursement this Period

68.27

Memo Item

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

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

82.87

**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

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.E1617722**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.E1617720**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.E1617716**

Amount of Each Disbursement this Period

Memo Item

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
monthly cc charge

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1617714**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc monthly processing charge

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1612371**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1616869**

Amount of Each Disbursement this Period

Memo Item

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.E1616867**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily processing charge

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.E1615912**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily processing charge

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.E1615910**

Amount of Each Disbursement this Period

Memo Item

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc monthly processing charge

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.E1615908**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc monthly processing charge

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.E1615906**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily processing charge

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.E1622551**

Amount of Each Disbursement this Period

Memo Item

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359

Purpose of Disbursement  
cc daily

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1617718**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Arthur Copleston**

Mailing Address 1581 Concha Circle

City Palm Springs State CA Zip Code 92264

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1618151**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. DirectFile**

Mailing Address PO Box 362

City Fresno State CA Zip Code 93708

Purpose of Disbursement  
Monthly Lease Charge

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1618151.0**

Amount of Each Disbursement this Period

Memo Item  
Sub-vendor itemization of Arthur Copleston

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. Arthur Copleston**

Mailing Address 1581 Concha Circle

City State Zip Code  
Palm Springs CA 92264

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1619044**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Constant Contact**

Mailing Address 1601 Trapelo Rd.

City State Zip Code  
Waltham MA 02451

Purpose of Disbursement  
Monthly Constant Contact charge

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1619044.0**

Amount of Each Disbursement this Period

Memo Item  
Sub-vendor itemization of Arthur Copleston

Full Name (Last, First, Middle Initial)

**C. Arthur Copleston**

Mailing Address 1581 Concha Circle

City State Zip Code  
Palm Springs CA 92264

Purpose of Disbursement  
Reimburse monthly Direct File expense

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1619047**

Amount of Each Disbursement this Period

Memo Item

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. DirectFile**

Mailing Address PO Box 362

City Fresno State CA Zip Code 93708

Purpose of Disbursement  
Monthly Direct File lease charge

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2015			

**Transaction ID : SB21B.E1619047.0**

Amount of Each Disbursement this Period

150.00
--------

Memo Item  
Sub-vendor itemization of Arthur Copleston

Full Name (Last, First, Middle Initial)

**B. Arthur Copleston**

Mailing Address 1581 Concha Circle

City Palm Springs State CA Zip Code 92264

Purpose of Disbursement

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2015			

**Transaction ID : SB21B.E1618148**

Amount of Each Disbursement this Period

40.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Constant Contact**

Mailing Address 1601 Trapelo Rd.

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Monthly Constant Contact charge

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: MA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2015			

**Transaction ID : SB21B.E1618148.0**

Amount of Each Disbursement this Period

40.00
-------

Memo Item  
Sub-vendor itemization of Arthur Copleston

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

40.00
-------

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

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**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

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. Arthur Copleston**

Mailing Address 1581 Concha Circle

City State Zip Code  
Palm Springs CA 92264

Purpose of Disbursement  
Reimburse for check printing, window envelopes and monthly Desert Sun digital charge

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1620821**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Deluxe**

Mailing Address PO Box 742572

City State Zip Code  
Cincinnati OH 45274

Purpose of Disbursement  
Window envelopes

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1620821.0**

Amount of Each Disbursement this Period

Memo Item  
Sub-vendor itemization of Arthur Copleston

Full Name (Last, First, Middle Initial)

**C. Deluxe**

Mailing Address PO Box 742572

City State Zip Code  
Cincinnati OH 45274

Purpose of Disbursement  
Print Checks

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1620821.1**

Amount of Each Disbursement this Period

Memo Item  
Sub-vendor itemization of Arthur Copleston

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. The Desert Sun**

Mailing Address 750 N Gene Autry Trl

City State Zip Code  
Palm Springs CA 92262

Purpose of Disbursement  
Reimburse monthly charge digital copy TDS

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 09 / 2015

**Transaction ID : SB21B.E1620821.2**

Amount of Each Disbursement this Period

10.00

Memo Item  
Sub-vendor itemization of Arthur Copleston

Full Name (Last, First, Middle Initial)

**B. Canyon Plaza South**

Mailing Address c/o Spinello Ppty. Mgmt., Inc.  
PO Box 1419

City State Zip Code  
Cathedral City CA 92235

Purpose of Disbursement  
December rent

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2015

**Transaction ID : SB21B.E1619821**

Amount of Each Disbursement this Period

1161.57

Memo Item

Full Name (Last, First, Middle Initial)

**C. Canyon Plaza South**

Mailing Address c/o Spinello Ppty. Mgmt., Inc.  
PO Box 1419

City State Zip Code  
Cathedral City CA 92235

Purpose of Disbursement  
rent - Sep 2015

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2015

**Transaction ID : SB21B.E1616089**

Amount of Each Disbursement this Period

1161.57

Memo Item

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

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

2323.14

**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

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. Canyon Plaza South**

Mailing Address c/o Spinello Ppty. Mgmt., Inc.  
PO Box 1419

City Cathedral City State CA Zip Code 92235

Purpose of Disbursement  
Rent - Aug 2015

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.E1615427**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Canyon Plaza South**

Mailing Address c/o Spinello Ppty. Mgmt., Inc.  
PO Box 1419

City Cathedral City State CA Zip Code 92235

Purpose of Disbursement  
November rent

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.E1618437**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

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

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