

**FEC  
FORM 3X**

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

RECEIVED  
2011 APR 20 AM 11:21  
FEC MAIL CENTER

Office Use Only

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

AUBURN AREA DEMOCRATIC CLUB

ADDRESS (number and street) 1700 COUNTRY HILL RUN

Check if different than previously reported. (ACC)

NEWCASTLE CA 95658 - 9438

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00422022

3. IS THIS REPORT NEW OR AMENDED (N) (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

X January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on M M / D D / Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

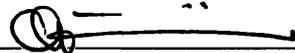
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y 10 01 2010 through 12 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer PATRICIA J. BURKE

Signature of Treasurer



Date

04 14 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**AUBURN AREA DEMOCRATIC CLUB**

Report Covering the Period: From: <sup>W</sup> <sup>ED</sup> / <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> **10 / 01 / 2010** To: <sup>W</sup> <sup>ED</sup> / <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> **12 / 31 / 2010**

11030600131

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <b>2010</b>		<b>5,463.15</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>4,596.90</b>	
(c) Total Receipts (from Line 19).....	<b>6,533.00</b>	<b>10,596.52</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<b>11,129.90</b>	<b>16,059.67</b>
7. Total Disbursements (from Line 31).....	<b>6,585.21</b>	<b>11,514.98</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<b>4,544.69</b>	<b>4,544.69</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>0.00</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>0.00</b>	

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

**AUBURN AREA DEMOCRATIC CLUB**

Report Covering the Period: From: <sup>M</sup>10 / <sup>D</sup>01 / <sup>Y</sup>2010 To: <sup>M</sup>12 / <sup>D</sup>31 / <sup>Y</sup>2010

11030600132

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).....	1,971.91	1,971.91
(ii) Unitemized .....	4,561.09	8,624.61
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	6,533.00	10,596.52
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)).....▶	6,533.00	10,596.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6,533.00	10,596.52

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	2,585.21	7,514.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2,585.21	7,514.98
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2,000.00	2,000.00
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 .....	2,000.00	2,000.00
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))..	6,585.21	11,514.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6,585.21	11,514.98

110306093M

**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) .....	6,533.00	10,596.52
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6,533.00	10,596.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2,585.21	7,514.98
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2,585.21	7,514.98

11030600134

**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 **9**

(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)

**AUBURN AREA DEMOCRATIC CLUB**

Full Name (Last, First, Middle Initial)

**A. BERGER, PAUL**

Date of Receipt

10 / 11 / 2010

Mailing Address

**962 HOLLY HILLS ROAD**

Amount of Each Receipt this Period

City

**AUBURN**

State

**CA**

Zip Code

**95603**

FEC ID number of contributing federal political committee.

**C**

Name of Employer

**STATE OF CALIFORNIA**

Occupation

**ATTORNEY**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**FUNDRAISER**

**345.00**

Full Name (Last, First, Middle Initial)

**B. HASWELL, KIMBERLEY LYNN**

Date of Receipt

10 / 11 / 2010

Mailing Address

**1630 BURLIN WAY**

Amount of Each Receipt this Period

City

**AUBURN**

State

**CA**

Zip Code

**95603**

FEC ID number of contributing federal political committee.

**C**

Name of Employer

**eHEALTH INSURANCE**

Occupation

**TECHNICAL ACCOUNT MANAGER**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**FUNDRAISER**

**325.66**

Full Name (Last, First, Middle Initial)

**C. JORDAN, WILLIAM THOMAS**

Date of Receipt

10 / 11 / 2010

Mailing Address

**15800 ROUGH AND READY HIGHWAY**

Amount of Each Receipt this Period

City

**ROUGH AND READY**

State

**CA**

Zip Code

**95975**

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 ▼

**FUNDRAISER**

**450.00**

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

**1120.66**

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

11030600135

**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 9  
(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)

**AUBURN AREA DEMOCRATIC CLUB**

Full Name (Last, First, Middle Initial)

**A. TAJBL, KAREN K.**

Mailing Address

**11473 SHERWOOD WAY**

City

**AUBURN**

State

**CA**

Zip Code

**95602**

FEC ID number of contributing federal political committee.

**C**

Name of Employer

**NONE**

Occupation

**RETIRED**

Receipt For:

Primary  General  
 Other (specify) ▼  
**FUNDRAISER**

Aggregate Year-to-Date ▼

**256.25**

Date of Receipt

**10 / 11 / 2010**

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**B. MOCK, ROBERT**

Mailing Address

**756 AUBURN RAVINE TERRACE #303**

City

**AUBURN**

State

**CA**

Zip Code

**95603**

FEC ID number of contributing federal political committee.

**C**

Name of Employer

**NONE**

Occupation

**RETIRED**

Receipt For:

Primary  General  
 Other (specify) ▼  
**FUNDRAISER**

Aggregate Year-to-Date ▼

**595.00**

Date of Receipt

**10 / 11 / 2010**

Amount of Each Receipt this Period

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

    /    /    

Amount of Each Receipt this Period

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

**851.25**

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

**1,971.91**

11030600136

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 9

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

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)

**AUBURN AREA DEMOCRATIC CLUB**

Full Name (Last, First, Middle Initial)

A.

**CLINT CURTIS FOR CONGRESS**

Date of Disbursement

M M / D D / Y Y Y Y  
**10 / 11 / 2010**

Mailing Address

**500 SUNRISE BLVD., SUITE 19**

City

**ROSEVILLE**

State

**CA**

Zip Code

**95661**

Purpose of Disbursement

**CAMPAIGN CONTRIBUTION**

**011**

Candidate Name

**CLINT CURTIS**

Category/  
Type

Amount of Each Disbursement this Period

**2,000.00**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **CAQ**

District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

, , .

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

, , .

11030600137

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

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

FOR LINE NUMBER:  
(check only one)

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

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)

**AUBURN AREA DEMOCRATIC CLUB**

Full Name (Last, First, Middle Initial)

A.

**NO ON 23**

Date of Disbursement

10 / 11 / 2010

Mailing Address

**1100 11TH STREET, SUITE 200**

City State Zip Code  
**SACRAMENTO CA 95814**

Purpose of Disbursement  
**CAMPAIGN CONTRIBUTION**

**011**

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

**N/A**

**1,000.00**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: **CA** District:

Full Name (Last, First, Middle Initial)

B.

**YES ON 'L'**

Date of Disbursement

10 / 11 / 2010

Mailing Address

**11850 KEMPER ROAD, SUITE D**

City State Zip Code  
**AUBURN CA 95603**

Purpose of Disbursement  
**CAMPAIGN CONTRIBUTION**

**011**  
Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

**N/A**

**1,000.00**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: **CA** District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL of Disbursements This Page (optional)..... 2,000.00**

**TOTAL This Period (last page this line number only)..... 4,000.00**

11030600133

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
---	-----------------

<input type="checkbox"/> USPS First Class Mail	Postmarked
--	------------

<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 4/15/11
---	-----------------------------

<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	

<input type="checkbox"/> USPS Express Mail	Postmarked
--	------------

<input type="checkbox"/> Postmark Illegible	
---	--

<input type="checkbox"/> No Postmark	
--------------------------------------	--

<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
--	-----------------

<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
---	-------------------------------

	4/18/11
PREPARER	DATE PREPARED

11030900139