22037821159

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER
2002 OCT 26 P 12:20
Office Use Only

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example if typing, type over the lines. 12FE4M5

OHLONE AREA UNITED DEMOCRATIC CAMPAIGN AKA
OAUDC

ADDRESS (number and street) ▼ P.O. BOX 223

☐ Check if different than previously reported. (ACC)

SAN LEANDRO CA 94577-0022

2. FEC IDENTIFICATION NUMBER ▼ C00382283

CITY ▲ STATE ▲ ZIP CODE ▲

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☒ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)	☐ 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 ☐ ☐ ☐ In the State of ☐

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

Election on ☐ ☐ ☐ In the State of ☐

5. Covering Period 07 01 2002 through 09 30 2002

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 Gregory E. Sanborn

Signature of Treasurer [signature] Date 10 19 2002

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 (Revised 1/01)

FE1AH042

22037821160

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

Ohlone Area United Democratic Campaign

Report Covering the Period: From: 07 / 01 / 2002 To: 09 / 30 / 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2002		0
(b) Cash on Hand at Beginning of Reporting Period	0	
(c) Total Receipts (from Line 19)	1321507	1321507
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1321507	1321507
7. Total Disbursements (from Line 30)	1151884	1151884
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	169623	169623
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

☐ 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 (Revised 1/91)

Write or Type Committee Name

Ohlone Area United Democratic Campaign

Report Covering the Period: From: 07 01 2002 to: 09 30 2002

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(i) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	, , . Ø	
(ii) Unitemized	, , . Ø	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	, , . Ø	, , . Ø
(b) Political Party Committees	, 3,000.00	, 3,000.00
(c) Other Political Committees (such as PACs)	, . . Ø	, . . Ø
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) ▶	, 3,000.00	, 3,000.00
Transfers From Affiliated/Other Party Committees	, , . Ø	, , . Ø
13. Loans Received	, 5,000.00	, 5,000.00
14. Loan Repayments Received	, , . Ø	, , . Ø
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	, , . Ø	, , . Ø
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	, , . Ø	, , . Ø
17. Other Federal Receipts (Dividends, Interest, etc.)	, , . Ø	, , . Ø
18. Transfers from Nonfederal Account for Joint Activity	, 5,215.07	, 5,215.07
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	, 13,215.07	, 13,215.07
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	, 8,000.00	, 8,000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	130377	130377
(ii) Non-Federal Share	521507	521507
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	651884	651884
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	500000	500000
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0	0
29. Other Disbursements	0	0
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) ▶	1151884	1151884
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	630377	630377

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	300000	300000
33. Total Contribution Refunds (from Line 28(d))	0	0
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	300000	300000
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	130377	130377
36. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	130377	130377

22037821163

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 1 OF 1

☐ 11a ☒ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Ohlone Area United Democratic Campaign

Full Name (Last, First, Middle Initial)
Pete Stark Re-election Committee

Mailing Address
P.O. Box 8331

City State Zip Code
Fremont, CA 94537

FEC ID number of contributing federal political committee. C 00020974

Name of Employer | Occupation

Receipt For: ☐ Primary ☒ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300000

Date of Receipt 09 / 23 / 2002

Amount of Each Receipt this Period 300000

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

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

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶ 300000

FEC Schedule A (Form 3X) (Revised 1/01)

PK1A0042

22037821164

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 1 OF 1

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

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NAME OF COMMITTEE (In Full)
Oakland Area United Democratic Campaign

A. Full Name (Last, First, Middle Initial)
Toredio, Mary R.

Mailing Address
653 Bowling Green St.

City State Zip Code
San Leandro, CA 94577

FEC ID number of contributing federal political committee. C

Name of Employer
Marsh Risk & Ins. Services

Occupation
Consultant

Receipt For: ☐ Primary ☒ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
09 / 28 / 2002

Amount of Each Receipt this Period
500000

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

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

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶ 500000

FEC Schedule A (Form 3X) (Revised 1/01)

22037821165

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☒ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE 1 OF 1

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)
Oakland Area United Democratic Campaign

Full Name (Last, First, Middle Initial)
Torello, Mary R.

Mailing Address
653 Bowling Green St.

City State Zip Code
San Leandro, CA 94577

Purpose of Disbursement
Loan Repayment

Candidate Name

Category/Type: 009

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

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

Date of Disbursement: 09 30 2002

Amount of Each Disbursement this Period: 5,000.00

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

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

Date of Disbursement

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

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

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶ 5,000.00

Schedule B (Form 3X) (Revised 1/01)

22037821166

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 1 OF 1

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Oakland Area United Democratic Campaign

LOAN SOURCE Full Name (Last, First, Middle Initial)
Torello, Mary R.

Mailing Address
653 Bowling Green St., San Leandro, CA 94577

City State ZIP Code

Election:
[ ] Primary
[X] General
[ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5,000.00	5,000.00	Ø

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
09 28 2002	09 30 2002	Ø % (zero)	[ ] Yes [X] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶

TOTALS This Period (last page in this line only) ▶ Ø

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FEC Schedule C (Form 3X) (Revised 1/01)

FF1AH042

22037821167

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR SHARED FEDERAL AND NON-FEDERAL ADMINISTRATIVE EXPENSES AND GENERIC VOTER DRIVE COSTS

NAME OF COMMITTEE (In Full)

Ohlone Area United Democratic Campaign

USE ONLY ONE SECTON

A. NATIONAL PARTY COMMITTEES

FIXED FEDERAL PERCENTAGE (Check the appropriate line and enter % in box to right) ..... %

- [ ] Presidential Year (65%)
- [ ] All Other Years (60)%

B. HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

[ ] MINIMUM FEDERAL PERCENTAGE (65%) (If checked, enter 65% in box to right) ..... %

OR

[ ] FUNDS EXPENDED:

- Estimated Direct Candidate Support -- Federal ..... %
- Estimated Direct Candidate Support -- Non-Federal ..... %

ADJUSTMENTS TO FUNDS EXPENDED:

Actual Direct Candidate Support -- Federal ..... %

Actual Direct Candidate Support -- Non-Federal .....

NOTE: Funds expended must be used if the Federal proportion is greater than 65% in any year

C. SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:

- Estimated Direct Candidate Support -- Federal ..... 20 %
- Estimated Direct Candidate Support -- Non-Federal ..... 80 %

ADJUSTMENTS TO FUNDS EXPENDED:

Actual Direct Candidate Support -- Federal ..... %

Actual Direct Candidate Support -- Non-Federal .....

D. STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

Check all Offices appearing on the next General Election Ballot:

			NUMBER OF POINTS
1. President	[ ]	(1 Point)	
2. U.S. Senate	[ ]	(1 Point)	
3. U.S. Congress	[ ]	(1 Point)	
4. SUBTOTAL -- Federal (ADD 1, 2, AND 3)			
5. Governor	[ ]	(1 Point)	
6. Other Statewide Office(s)	[ ]	(1 or 2 Points)	
7. State Senate	[ ]	(1 Point)	
8. State Representative	[ ]	(1 Point)	
9. Local Candidates	[ ]	(1 or 2 Points)	
10. Extra Non-Federal Point	[ ]	(1 Point)	
11. SUBTOTAL -- Non-Federal (Add 5, 6, 7, 8, 9, and 10)			
12. TOTAL POINTS (Line 4 plus Line 11)			

FEDERAL ALLOCATION = Line 4 divided by Line 12 ..... %

22037821168

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NON-FEDERAL ACCOUNTS

PAGE 1 OF 1
FOR LINE 18 OF FORM 3X

NAME OF COMMITTEE (In Full)
Ohione Area United Democratic Campaign

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Ohione Area United Democratic Campaign-State Account	09 30 2002	521507

BREAKDOWN OF TRANSFER RECEIVED

	ADMINISTRATIVE/VOTER DRIVE AMOUNT
i) Total Administrative/Voter Drive	521507

ii) Direct Fundraising (List Events-Amount For Each)	DIRECT FUNDRAISING AMOUNT
a)	
b)	
c)	
d)	
e) Total Amount Transferred For Direct Fundraising	Ø

iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)	EXEMPT ACTIVITY/ DIRECT CANDIDATE SUPPORT
a)	
b)	
c)	
d)	
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support	Ø

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative/Voter Drive Amount)	521507
TOTAL This Period (Direct Fundraising Amount)	Ø
TOTAL This Period (Exempt Activity/Direct Candidate Support)	Ø
TOTAL This Period (Total Amount Transferred)	521507

22037821169

DISBURSEMENT SCHEDULE H4 (FEC Form 3X)
JOINT FEDERAL/NON-FEDERAL ACTIVITY SCHEDULE

PAGE 1 OF 1
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full): Ohlone Area United Democratic Campaign

A. Full Name (Last, First, Middle Initial): Torello, Mary R.
Mailing Address: 653 Bowling Green St.
City: San Leandro, State: CA, Zip Code: 94577
Category/Type: 009
Purpose/Event: Loan Repayment
Description: Rental Payment for Campaign Office
Type of Allocated Activity: [X] Admin/Voter Drive [ ] Fundraising [ ] Exempt [ ] Direct Candidate Support
Event Year-To-Date: 500000
Date: 09 / 30 / 2002

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
100000		400000		500000

B. Full Name (Last, First, Middle Initial): Pacific Bell
Mailing Address: 616 Folsom Street #1123
City: San Francisco, State: CA, Zip Code: 94107
Category/Type: 001
Purpose/Event: Adm. Expense
Description: Telephone Deposit
Type of Allocated Activity: [X] Admin/Voter Drive [ ] Fundraising [ ] Exempt [ ] Direct Candidate Support
Event Year-To-Date: 106884
Date: 09 / 30 / 2002

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
21377		85507		106884

C. Full Name (Last, First, Middle Initial): California Democratic Party
Mailing Address: 1401 21st Street, Suite 100
City: Sacramento, State: CA, Zip Code: 95814
Category/Type: 001
Purpose/Event: Adm. Expense
Description: Insurance Premium
Type of Allocated Activity: [X] Admin/Voter Drive [ ] Fundraising [ ] Exempt [ ] Direct Candidate Support
Event Year-To-Date: 651884
Date: 09 / 30 / 2002

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
9000		36000		45000

SUBTOTAL of Joint Federal and Non-Federal Activity This Page

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
130377		521507		651884

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and non-Federal share to 21(a)(ii))

FEDERAL SHARE: 130377
TOTAL AMOUNT: 651884

TOTAL This Period for the Non-Federal Share (used for line 31 of the detailed summary page): NON-FEDERAL SHARE 521507

22037821170

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
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☐	No Postmark	
☑	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

PREPARER	DATE PREPARED

(6/2000)