

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER
2009 JAN 26 AM 10:21
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

WELLSTONE DEMOCRATIC RENEWAL CLUB PAC

ADDRESS (number and street)

P.O. BOX 65



Check if different than previously reported. (ACC)

BERKELEY CA 94701-0065

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00404525

3. IS THIS REPORT



NEW (N) OR



AMENDED (A)

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

MM / DD / YYYY

In the State of

CA

(d) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on

MM / DD / YYYY

In the State of

CA

5. Covering Period

MM / DD / YYYY

through

MM / DD / YYYY

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 Jack Korgweil

Signature of Treasurer Jack Korgweil

Date MM / DD / YYYY

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

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Wellstone Democratic Renewal Club - PAC

Report Covering the Period:

From:

10 / 06 / 2008

To:

10 / 24 / 2008

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand

January 1,

2008

1168640

(b) Cash on Hand at

Beginning of Reporting Period.....

4053-

(c) Total Receipts (from Line 19).....

3214-

(d) Subtotal (add Lines 6(b) and

6(c) for Column A and Lines

6(a) and 6(c) for Column B).....

4053

14900

Total Disbursements (from Line 31).....

3296-

14143-

Cash on Hand at Close of

Reporting Period

(subtract Line 7 from Line 6(d)).....

757

757-

9. Debts and Obligations Owed TO

the Committee (Itemize all on

Schedule C and/or Schedule D).....

10. Debts and Obligations Owed BY

the Committee (Itemize all on

Schedule C and/or Schedule D).....

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

3 2 9 6
3 2 9 6

1 4 1 4 3
1 4 1 4 3

29039991201

Oct 16 - Nov 24

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		OF	
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" 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)
Wellstone Democratic Renewal Club - PAC

29039991202

A.

Full Name (Last, First, Middle Initial)
Inkworks

Date of Disbursement
10 / 16 / 2008

Mailing Address
2827 7th St

City
Berkeley State
CA Zip Code
94710

Purpose of Disbursement
printing

Candidate Name

Amount of Each Disbursement this Period
715.58

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Katherine Gonzales

Date of Disbursement
10 / 23 / 2008

Mailing Address
416 Euclid Ave #2

City
Oakland State
CA Zip Code
94610

Purpose of Disbursement
Independent Contractor Fee

Candidate Name

Amount of Each Disbursement this Period
1,000.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Inkworks

Date of Disbursement
10 / 06 / 2008

Mailing Address
2827 7th St

City
Berkeley State
CA Zip Code
94710

Purpose of Disbursement
printing

Candidate Name

Amount of Each Disbursement this Period
320.95

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶ **2,037.00**

TOTAL This Period (last page this line number only).....▶ **3,296.00**

Oct 16 - Nov 24

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

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NAME OF COMMITTEE (In Full)
Wellstone Democratic Renewal Club - PAC

A. Full Name (Last, First, Middle Initial)
Katherine Gonsalves

Date of Disbursement
MM / DD / YYYY
10 / 14 / 2008

Mailing Address
416 Euclid Ave #2

City
Oakland State
CA Zip Code
94610

Purpose of Disbursement
Independent Contractor Fee

Candidate Name
[Blank] Category/Type
[Blank]

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: _____ District: _____

Amount of Each Disbursement this Period
1,000 -

B. Full Name (Last, First, Middle Initial)
Katherine Gonsalves

Date of Disbursement
MM / DD / YYYY
10 / 10 / 2008

Mailing Address
416 Euclid Ave #2

City
Oakland State
CA Zip Code
94610

Purpose of Disbursement
expenses

Candidate Name
[Blank] Category/Type
[Blank]

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: _____ District: _____

Amount of Each Disbursement this Period
5912

C. Full Name (Last, First, Middle Initial)
AJ Franken for Senate

Date of Disbursement
MM / DD / YYYY
10 / 19 / 2008

Mailing Address
[Blank]

City
[Blank] State
[Blank] Zip Code
[Blank]

Purpose of Disbursement
[Blank]

Candidate Name
[Blank] Category/Type
[Blank]

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **▼**

State: _____ District: _____

Amount of Each Disbursement this Period
100 -

SUBTOTAL of Disbursements This Page (optional).....▶ **1,159 -**

TOTAL This Period (last page this line number only).....▶ **~~1,259~~**

29039991203

Oct 16 - Nov 24

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

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NAME OF COMMITTEE (in Full)
Wellstone Democratic Renewal Club - PAC

A.

Full Name (Last, First, Middle Initial)
Charlie Brown for Congress

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 20 / 2008

Amount of Each Disbursement this Period
100 -

Category/Type

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

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

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

100

29039991204

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.

Date of Receipt

Hand Delivered

Postmarked

USPS First Class Mail

1/2/09

Postmarked (R/C)

USPS Registered/Certified

Postmarked

USPS Priority Mail

Delivery Confirmation™ or Signature Confirmation™ Label

Postmarked

USPS Express Mail

Postmark Illegible

No Postmark

Shipping Date

Overnight Delivery Service (Specify):

Next Business Day Delivery

Date of Receipt

Received from House Records & Registration Office

Date of Receipt

Received from Senate Public Records Office

Date of Receipt

Received from Electronic Filing Office

Date of Receipt or Postmarked

Other (Specify):

JmW
 PREPARER

1/26/09
 DATE PREPARED

29039991205