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2003 FEB 11 A 9 38

Office Use Only

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: K typing, type over the lines.

12 FEB 4 2005

SAN LUIS OBISPO COUNTY DEMOCRATIC CENTRAL COM

ADDRESS (number and street)

1110 MORRO ST

P.O. BOX 15155

Check if different than previously reported. (ACC)

SAN LUIS OBISPO

CA

93406

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00276659

3. IS THIS REPORT

NEW (N) OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(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)

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)

(c) 12-Day

Primary (12P)

General (12G)

Runoff (12R)

PRE-Election Report for the:

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

11 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

LEE M. GREENAWALT

Signature of Treasurer

Date

01 26 2003

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)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Report Covering the Period:

From:

07 01 2002

To:

12 31 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2002		4457.16
(b) Cash on Hand at Beginning of Reporting Period	3495.78	
(c) Total Receipts (from Line 19)	8528.70	22652.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12024.48	26401.36
7. Total Disbursements (from Line 30)	9809.29	24794.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2215.25	2215.25
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 Receipts

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

SAN LUIS OBISPO COUNTY DEMOCRATIC CENTRAL COMMITTEE

Report Covering the Period:

From:

07 01 2002

To:

12 31 2002

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals <del>Persons</del> Other Than Political Committees		
(i) Itemized (Use Schedule A) .....	1422.20	
(ii) Unitemized .....	6578.70	
(iii) TOTAL (a)(i) and (a)(ii) .....	7995.70	2227.20
(b) Political Party Committees .....	538.00	1024.00
(c) Other Political Committees (such as PACs) .....	0	
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) .....	8538.70	22252.20
12. Transfers From Affiliated/Other Party Committees .....		3000.00
13. All Loans Received .....		
14. Loan Repayments Received .....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....		
18. Transfers from Nonfederal Account for Joint Activity .....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	8538.70	22552.20
20. Total Federal Receipts (subtract Line 13 from Line 19) .....	8538.70	22552.20

**DETAILED SUMMARY PAGE  
of Disbursements**

FEC Form 3X (Revised 1/01)

Page 4

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 .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	898321	2315752
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	898321	2315752
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	20000	20000
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	62602	143218
29. Other Disbursements .....		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) .....	980923	2439911
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) .....		

**III. Net Contributions/Operating Expenditures**

32. Total Contributions (other than loans) (from Line 14(d), page 3) .....	252870	2255230
33. Total Contribution Refunds (from Line 28(d)) .....		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....	252870	
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	898321	2420670
36. Offsets to Operating Expenditures (from Line 15, page 3) .....		
37. Net Operating Expenditures (subtract Line 36 from Line 35) .....	898321	2420670

**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 7 OF 5
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 18

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)

**A. ASHBAUGH JOHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 193 LAS CERRAS  
 City: SAN LUIS OBISPO State: CA Zip Code: 93405  
 Name of Employer: SAN LUIS COASTAL SCHOOLS Occupation: TEACHER  
 Receipt For:  Primary  General  
 Aggregate Year-to-Date: 198.00

Date of Receipt: 09 22 2007  
 Amount of Each Receipt this Period: 24.00

**B. BRUND JOHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 528 MASON  
 City: SAN LUIS OBISPO State: CA Zip Code: 93401  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  
 Aggregate Year-to-Date: 198.00

Date of Receipt: 07 17 2007  
 Amount of Each Receipt this Period: 24.00

**C. FREDER DAVE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 213 ORCHARD  
 City: NIPOMA State: CA Zip Code: 93444  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  
 Aggregate Year-to-Date: 198.00

Date of Receipt: 07 17 2007  
 Amount of Each Receipt this Period: 24.00

SUBTOTAL of Receipts This Page (optional) 48.00  
 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 1 OF 5	
	<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)  
**SAN LUIS OBISPO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
A. **DREEFE, JOAN**

Mailing Address  
**9985 OLD MOORE RD**

City **ATASCADERO** State **CA** Zip Code **93422**

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

Name of Employer  
**RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) **148.00**

Date of Receipt  
**07 / 17 / 2002**

Amount of Each Receipt this Period  
**24.00**

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

Mailing Address  
**392 CHRISTINA WAY**

City **SAN LUIS OBISPO** State **CA** Zip Code **93425**

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

Name of Employer  
**SAN LUIS COASTAL School** Occupation **TEACHER**

Receipt For:  
 Primary  General  
 Other (specify) **200.00**

Date of Receipt  
**08 / 28 / 2002**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address  
**Box 2253**

City **AVILA BEACH** State **CA** Zip Code **93424**

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

Name of Employer  
**RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) **200.00**

Date of Receipt  
**09 / 01 / 2002**

Amount of Each Receipt this Period  
**200.00**

SUBTOTAL of Receipts This Page (optional) **424.00**

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 3 OF 5	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (in Full)  
**SAN LUIS OBISPO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. VOGEL SIEGFRIED**

Mailing Address  
**803 BRIGHTON ST**

City  
**GROVER BEACH** State  
**CA** Zip Code  
**93433**

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2,000.00**

Date of Receipt  
**09 22 2002**

Amount of Each Receipt this Period  
**1,000.00**

Full Name (Last, First, Middle Initial)  
**YUDOVICH DIANA**

Mailing Address  
**117 STUART ST**

City  
**CAMBRIA** State  
**CA** Zip Code  
**93428**

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**4,000.00**

Date of Receipt  
**07 07 2002**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**LA ECHNER RAYMOND**

Mailing Address  
**265 BROAD ST**

City  
**SAN LUIS OBISPO** State  
**CA** Zip Code  
**93405**

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5,500.00**

Date of Receipt  
**09 22 2002**

Amount of Each Receipt this Period  
**2,000.00**

SUBTOTAL of Receipts This Page (optional) ..... **5,500.00**

TOTAL This Period (last page this line number only) ..... **5,500.00**

SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 4 OF 5	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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)  
**SAN LUIS OBISPO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

A. Full Name (Last, First, Middle Initial)  
**HARPER THOMAS**

Mailing Address  
**310 KINGS AVE**

City  
**SAN LUIS OBISPO** State **CA** Zip Code **93447**

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

Name of Employer  
**RETIREE**

Occupation  
**RETIREE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**4,000.00**

Date of Receipt  
**11 / 14 / 2007**

Amount of Each Receipt this Period  
**4,000.00**

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

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) **4,000.00**

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 5 OF 5	
(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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAN JUAN ORISPO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. CALIFORNIA DEMOCRATIC PARTY**

Mailing Address  
**400 21st St**

City State Zip Code  
**SACRAMENTO CA 95814**

FEC ID number of contributing federal political committee  
**C105668**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
**1024.00**

Date of Receipt  
**11 08 2003**

Amount of Each Receipt this Period  
**538.00**

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

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) **538.00**

TOTAL This Period (last page this line number only) **1960.00**

**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				

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NAME OF COMMITTEE (in Full)

*San Luis Obispo County Central Democratic Central Center*

Full Name (Last, First, Middle Initial)

A. *PACIFIC GAS AND ELECTRIC*

Mailing Address *BOX 9973 00*

City *SACRAMENTO* State *CA* Zip Code *95899*

Purpose of Disbursement *ELECTRICITY AHS - NOV*

Candidate Name \_\_\_\_\_ Category Type *001*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement *11 12 2002*

Amount of Each Disbursement This Period *98.00*

*23 APR*  
*22 SEP*  
*6 adj. of*  
*24 OCT*  
*27 NOV*  
*372*

B. *PACIFIC BELL SBC*

Mailing Address *PAYMENT CENTER*

City *SACRAMENTO* State *CA* Zip Code *95885*

Purpose of Disbursement *PHONE*

Candidate Name \_\_\_\_\_ Category Type *001*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement *12 12 2002*

Amount of Each Disbursement This Period *275.10*

*134.65 6/9*  
*143.45 9/12*  
*275.10*

C. *DOWNTOWN ASSOCIATION*

Mailing Address *Box 1402*

City *SAN LUIS OBISPO* State *CA* Zip Code *93406*

Purpose of Disbursement *FARMER'S MARKET INFO BROCH.*

Candidate Name \_\_\_\_\_ Category Type *004*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement *12 12 2002*

Amount of Each Disbursement This Period *538.00*

*250*  
*288*

SUBTOTAL of Disbursements This Page (optional) \_\_\_\_\_

TOTAL This Period (last page this line number only) \_\_\_\_\_

*911.10*

**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"/> 28	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (in full)

San Luis Obispo County Central Democratic Central Center

Full Name (Last, First, Middle Initial)

A. GOODFIELD CORP

Mailing Address: BOX 1117

City: SUMMERLAND State: CA Zip Code: 93067

Purpose of Disbursement: RENT ON OFFICE

Candidate Name:

001  
Category Type

Date of Disbursement

7 / 27 / 2002

Amount of Each Disbursement this Period

3,300.00

550  
X 6 MONTHS' RENTS

3300

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

State: District:

Full Name (Last, First, Middle Initial)

B. SLO NEWS

Mailing Address: 265 SOUTH ST

City: SAN LUIS OBISPO State: CA Zip Code: 93401

Purpose of Disbursement: PUBLISH NEWSPAPER BROADSIDE

Candidate Name:

004  
Category Type

Date of Disbursement

10 / 15 / 2002

Amount of Each Disbursement this Period

449.89

248.89 AUG  
201.02 OCT

449.89

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

State: District:

Full Name (Last, First, Middle Initial)

C. POSTMASTER

Mailing Address: 893 MARSH

City: SAN LUIS OBISPO State: CA Zip Code: 93406

Purpose of Disbursement: POSTAGE BULK PERMIT

Candidate Name:

001  
Category Type

Date of Disbursement

10 / 17 / 2002

Amount of Each Disbursement this Period

350.00

150.00 BULK PERMIT  
200.00 OCT

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)

4,099.89

**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 3 OF 5	
<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"/> 29

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NAME OF COMMITTEE (in full)

*San Luis Obispo County Central Democratic Central Committee*

Full Name (Last, First, Middle Initial)

**A. LEE GREENAWALT**

Mailing Address

*499 NEVIS ST*

City

*MORRO BAY CA 93442*

Purpose of Disbursement

*PRINTER CARTRIDGE*

Candidate Name

**001**

Category Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

*08 16 2007*

Amount of Each Disbursement this Period

*128.00*

Full Name (Last, First, Middle Initial)

**B. NANCY BRUNO**

Mailing Address

*528 MASON WAY*

City

*SAN LUIS OBISPO CA 93401*

Purpose of Disbursement

*FOOD & DECOR SHARON DAVIS IN S.L.O.*

Candidate Name

**007**

Category Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

*10 15 2007*

Amount of Each Disbursement this Period

*308.54*

Full Name (Last, First, Middle Initial)

**C. WYNN THOMPSON**

Mailing Address

*970 HILLCREST*

City

*CAMBRIA CA 93428*

Purpose of Disbursement

Candidate Name

**001**

Category Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

*09 17 2007*

Amount of Each Disbursement this Period

*183.00*

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

*619.54*

**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"/> 29a
<input type="checkbox"/> 29b				

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NAME OF COMMITTEE (in full)

*San Luis Obispo County Central Democratic Central Committee*

Full Name (Last, First, Middle Initial)

*CHAMBER OF COMMERCE*

Mailing Address

*1039 CHERRY ST*

City

*SAN LUIS OBISPO*

State

*CA*

Zip Code

*93401*

Purpose of Disbursement

*MEMBERSHIP IN CHAMBER*

Candidate Name

*004*

Category Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

*09 27 2004*

Amount of Each Disbursement this Period

*165.00*

Full Name (Last, First, Middle Initial)

*S. L. O. COUNTY PARK DEPT.*

Mailing Address

*1087 SANTA ROSA ST*

City

State

Zip Code

*93401*

Purpose of Disbursement

*RENT WINDY PARK FOR LABOR DAY*

Candidate Name

*007*

Category Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

*07 15 2002*

Amount of Each Disbursement this Period

*155.00*

*LABOR DAY PICNIC*

Full Name (Last, First, Middle Initial)

*QUINCO CATERERS*

Mailing Address

*778 HIGHWAY*

City

*SAN LUIS OBISPO*

State

*CA*

Zip Code

*93401*

Purpose of Disbursement

*FOOD LABOR DAY PICNIC*

Candidate Name

*007*

Category Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

*10 01 2002*

Amount of Each Disbursement this Period

*732.68*

*LABOR DAY PICNIC*

SUBTOTAL of Disbursements This Page (optional)

*1252.68*

TOTAL This Period (last page this line number only)

*1252.68*

**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 6 OF 6

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
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NAME OF COMMITTEE (in Full)

*San Luis Obispo County Central Democratic Central Office*

Full Name (Last, First, Middle Initial)

**A. CORVERA FOR ASSEMBLY**

Mailing Address: *127 GINGER LANE*

City: *PASO ROBLES CA* State: *CA* Zip Code: *93446*

Purpose of Disbursement: *TRAVEL LIT.* Category/Type: *011*

Candidate Name: *JAME CORVERA*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

*10 17 2002*

Amount of Each Disbursement this Period

*700.00*

**B. LARRY HOWL GATE FOR ASSEMBLY**

Mailing Address: *Box 1523*

City: *SANTA MARIA CA* State: *CA* Zip Code: *93456*

Purpose of Disbursement: *TRAVEL GET* Category/Type: *011*

Candidate Name: *LARRY HOWL GATE*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

*10 17 2002*

Amount of Each Disbursement this Period

*1400.00*

**C. FRIENDS OF LOLS CAPP'S**

Mailing Address: *Box 23940*

City: *SANTA BARBARA CA* State: *CA* Zip Code: *93121*

Purpose of Disbursement: *LITERATURE* Category/Type: *011*

Candidate Name: *LOLS CAPP'S*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

*10 17 2002*

Amount of Each Disbursement this Period

*200.00*

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

*2300.00*

Federal Election Commission

### ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
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