

4th Qtr

RECEIVED
FEDERAL MAIL CENTER
2010 MAR 10 AM 7:13

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**
WNC FOR CHANGE

ADDRESS (number and street) 26 SYLVAN AVE
 Check if different than previously reported. (ACC) ASHEVILLE NC 28801

2. FEC IDENTIFICATION NUMBER **CITY** **STATE** **ZIP CODE**
000446195

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)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
 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 10 01 2009 through 12 31 2009

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 Catherine Alter

Signature of Treasurer Catherine Alter Date 01 09 2010

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

10030264361

446

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Report Covering the Period: From:

10 01 2009

To:

12 31 2010

COLUMN A
This Period

COLUMN B
Calendar Year-to-Date

6. (a) Cash on Hand
January 1,

2009

4,610.24

(b) Cash on Hand at
Beginning of Reporting Period.....

3,554.43 ✓

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

31.00 ✓

984.67 ✓

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B).....

3,585.43 ✓

5,594.91

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

1,230.40 ✓

3,239.08 ✓

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d)).....

2,355.03 ✓

2,355.03

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

10030264362

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Report Covering the Period: From:

10 01 2009

To:

12 31 2010

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).....
 - (ii) Unitemized.....
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

31.00
31.00
31.00

984.67
984.67
984.67

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b))..

Blank boxes for lines 12-18.

Blank boxes for lines 12-18.

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

31.00

984.67

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

31.00

984.67

10030264363

**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Ex-
penditures**

**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)

31.00
31.00

984.67
984.67

10030264365

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WNC For Change	FEC IDENTIFICATION NUMBER ▼ C 00446195
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee Paul Choi	Date 11 15 2009
Mailing Address 27 Parkway Loop	Amount 768.98
City Asheville, NC	State NC
Zip Code 28803	

Purpose of Expenditure technology, supplies	Category/Type
web host costs	
Name of Federal Candidate Supported or Opposed by Expenditure:	

Office Sought:	<input type="checkbox"/> House	State:
	<input type="checkbox"/> Senate	District:
	<input type="checkbox"/> President	
Check One:	<input type="checkbox"/> Support	<input type="checkbox"/> Oppose

Calendar Year-To-Date Per Election for Office Sought	1,659.46
------------------------------------------------------	-----------------

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Tomato Jam	Date 11 06 2009
Mailing Address 379 Biltmore NC	Amount 200.00
City Asheville, NC	State NC
Zip Code 28801	

Purpose of Expenditure Catering	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure:	

Office Sought:	<input type="checkbox"/> House	State:
	<input type="checkbox"/> Senate	District:
	<input type="checkbox"/> President	
Check One:	<input type="checkbox"/> Support	<input type="checkbox"/> Oppose

Calendar Year-To-Date Per Election for Office Sought	200.00
------------------------------------------------------	---------------

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____	Date <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
-----------------	---------------------------------------------------------------------------------

10030264366

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE OF
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WNC For Change	FEC IDENTIFICATION NUMBER ▼ C00446195
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee Buncombe County Democratic Party		Date 01 15 2009
Mailing Address PO Box 1544		Amount 540.00
City Asheville	State NC	Zip Code 28801
Purpose of Expenditure Space Rental	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought 540.00		

Full Name (Last, First, Middle Initial) of Payee Henk Pearson		Date 08 01 2009
Mailing Address 16 Spears		Amount 300.00
City Asheville	State NC	Zip Code 28801
Purpose of Expenditure digital projector	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought 300.00		

(a) SUBTOTAL of Itemized Independent Expenditures	2,699.46
(b) SUBTOTAL of Unitemized Independent Expenditures	540.42
(c) TOTAL Independent Expenditures	3,239.88

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature **Catherine Acker** Date **03 04 2010**

10030264367

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked
3/4/10

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

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

Other (Specify): Date of Receipt or Postmarked

ER
PREPARER

3/10/10
DATE PREPARED