

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**
Democratic Headquarters of the Desert

ADDRESS (number and street) 67-555 E. Palm Canyon Drive
Suite C-104
 Check if different than previously reported. (ACC) Cathedral City CA 92234

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00496679 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 [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [01] / [01] / [2017] through [06] / [30] / [2017]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Copleston, Arthur, , ,
Type or Print Name of Treasurer

Signature of Treasurer Copleston, Arthur, , , [Electronically Filed] Date [07] / [18] / [2017]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

Democratic Headquarters of the Desert

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		8469.55
(b) Cash on Hand at Beginning of Reporting Period.....	8469.55	
(c) Total Receipts (from Line 19)	9682.06	9682.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	18151.61	18151.61
7. Total Disbursements (from Line 31).....	10468.73	10468.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	7682.88	7682.88
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	406.76	

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

Write or Type Committee Name

Democratic Headquarters of the Desert

Report Covering the Period: From: / / To: / /

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).....	6010.00	6010.00
(ii) Unitemized	2910.00	2910.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8920.00	8920.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	750.00	750.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	9670.00	9670.00
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).....	12.06	12.06
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)).....▶	9682.06	9682.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	9682.06	9682.06

DETAILED SUMMARY PAGE
of Disbursements

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	10388.64	10388.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10388.64	10388.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	80.09	80.09
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	10468.73	10468.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10468.73	10468.73

DETAILED SUMMARY PAGE
of Disbursements

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)	9670.00	9670.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9670.00	9670.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10388.64	10388.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	12.06	12.06
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10376.58	10376.58

**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 39
(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
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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)
Democratic Headquarters of the Desert

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Atwood, Jackie, , ,

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2017

Transaction ID : SA11AI.C4649508

Amount of Each Receipt this Period
50.00

Memo Item
monthly recurring cc contr

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Atwood, Jackie, , ,

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2017

Transaction ID : SA11AI.C4652051

Amount of Each Receipt this Period
50.00

Memo Item
monthly recurring cc contr

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Atwood, Jackie, , ,

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2017

Transaction ID : SA11AI.C4653025

Amount of Each Receipt this Period
50.00

Memo Item
monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 7 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Atwood, Jackie, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2017

Transaction ID : SA11AI.C4653510

Amount of Each Receipt this Period
50.00

Memo Item
monthly recurring cc contr

B. Atwood, Jackie, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2017

Transaction ID : SA11AI.C4658403

Amount of Each Receipt this Period
50.00

Memo Item
monthly recurring cc contr

C. Atwood, Jackie, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2384 N. Murray Street

City Banning	State CA	Zip Code 92220
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2017

Transaction ID : SA11AI.C4659295

Amount of Each Receipt this Period
50.00

Memo Item
monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 8 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Edgerly, Bob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1110 Via Verde
 City Cathedral City State CA Zip Code 92234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **01 / 05 / 2017**
Transaction ID : SA11AI.C4649515
 Amount of Each Receipt this Period **125.00**
 Memo Item
 monthly recurring cc contr

B. Edgerly, Bob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1110 Via Verde
 City Cathedral City State CA Zip Code 92234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **02 / 02 / 2017**
Transaction ID : SA11AI.C4652055
 Amount of Each Receipt this Period **125.00**
 Memo Item
 monthly recurring cc contr

C. Edgerly, Bob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1110 Via Verde
 City Cathedral City State CA Zip Code 92234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 12 / 2017**
Transaction ID : SA11AI.C4653032
 Amount of Each Receipt this Period **125.00**
 Memo Item
 monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....	375.00
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 9 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Edgerly, Bob, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017

Transaction ID : SA11AI.C4653516

Amount of Each Receipt this Period
125.00

Memo Item
monthly recurring cc contr

B. Edgerly, Bob, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017

Transaction ID : SA11AI.C4658410

Amount of Each Receipt this Period
125.00

Memo Item
monthly recurring cc contr

C. Edgerly, Bob, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017

Transaction ID : SA11AI.C4659302

Amount of Each Receipt this Period
125.00

Memo Item
monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....	375.00
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 10 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Fisher, Judith, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3680 Bogert Trail

City Palm Springs	State CA	Zip Code 92264
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2017

Transaction ID : SA11AI.C4649521

Amount of Each Receipt this Period
200.00

Memo Item
monthly recurring cc contr

B. Fisher, Judith, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3680 Bogert Trail

City Palm Springs	State CA	Zip Code 92264
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2017

Transaction ID : SA11AI.C4652060

Amount of Each Receipt this Period
200.00

Memo Item
monthly recurring cc contr

C. Fisher, Judith, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3680 Bogert Trail

City Palm Springs	State CA	Zip Code 92264
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2017

Transaction ID : SA11AI.C4653038

Amount of Each Receipt this Period
200.00

Memo Item
monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 11 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Fisher, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3680 Bogert Trail
 City Palm Springs State CA Zip Code 92264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **04 / 01 / 2017**
Transaction ID : SA11AI.C4653522
 Amount of Each Receipt this Period 200.00
 Memo Item
 monthly recurring cc contr

B. Fisher, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3680 Bogert Trail
 City Palm Springs State CA Zip Code 92264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **05 / 01 / 2017**
Transaction ID : SA11AI.C4658416
 Amount of Each Receipt this Period 200.00
 Memo Item
 monthly recurring cc contr

C. Fisher, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3680 Bogert Trail
 City Palm Springs State CA Zip Code 92264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **06 / 01 / 2017**
Transaction ID : SA11AI.C4659324
 Amount of Each Receipt this Period 200.00
 Memo Item
 monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 12 OF 39
	<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)
Democratic Headquarters of the Desert

A. Flemion, Phil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 10971
 City Palm Desert State CA Zip Code 92255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **01 / 05 / 2017**
Transaction ID : SA11AI.C4649492
 Amount of Each Receipt this Period 50.00
 Memo Item
 monthly recurring cc contr

B. Flemion, Phil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 10971
 City Palm Desert State CA Zip Code 92255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 02 / 2017**
Transaction ID : SA11AI.C4652042
 Amount of Each Receipt this Period 50.00
 Memo Item
 monthly recurring cc contr

C. Flemion, Phil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 10971
 City Palm Desert State CA Zip Code 92255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 01 / 2017**
Transaction ID : SA11AI.C4652945
 Amount of Each Receipt this Period 50.00
 Memo Item
 monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 13 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
Democratic Headquarters of the Desert

A. Flemion, Phil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 10971
 City Palm Desert State CA Zip Code 92255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11AI.C4653495
 Amount of Each Receipt this Period
 50.00
 Memo Item
 monthly recurring cc contr

B. Flemion, Phil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 10971
 City Palm Desert State CA Zip Code 92255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11AI.C4658388
 Amount of Each Receipt this Period
 50.00
 Memo Item
 monthly recurring cc contr

C. Flemion, Phil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 10971
 City Palm Desert State CA Zip Code 92255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11AI.C4659281
 Amount of Each Receipt this Period
 50.00
 Memo Item
 monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 14 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Joosten, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1988 S. Mesa Drive
 City Palm Springs State CA Zip Code 92264-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 02 / 2017**
Transaction ID : SA11AI.C4652063
 Amount of Each Receipt this Period 50.00
 Memo Item
 monthly recurring cc contr

B. Joosten, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1988 S. Mesa Drive
 City Palm Springs State CA Zip Code 92264-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 12 / 2017**
Transaction ID : SA11AI.C4653041
 Amount of Each Receipt this Period 50.00
 Memo Item
 monthly recurring cc contr

C. Joosten, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1988 S. Mesa Drive
 City Palm Springs State CA Zip Code 92264-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 01 / 2017**
Transaction ID : SA11AI.C4653525
 Amount of Each Receipt this Period 50.00
 Memo Item
 monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....	150.00
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 15 OF 39
	<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)
Democratic Headquarters of the Desert

A. Joosten, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1988 S. Mesa Drive
 City Palm Springs State CA Zip Code 92264-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 01 / 2017**
Transaction ID : SA11AI.C4658419
 Amount of Each Receipt this Period 50.00
 Memo Item
 monthly recurring cc contr

B. Joosten, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1988 S. Mesa Drive
 City Palm Springs State CA Zip Code 92264-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **06 / 01 / 2017**
Transaction ID : SA11AI.C4659330
 Amount of Each Receipt this Period 50.00
 Memo Item
 monthly recurring cc contr

C. Kors, Geoff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1455 N. Vine Ave.
 City Palm Springs State CA Zip Code 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **01 / 07 / 2017**
Transaction ID : SA11AI.C4649527
 Amount of Each Receipt this Period 100.00
 Memo Item
 monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....	200.00
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 16 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Kors, Geoff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1455 N. Vine Ave.
 City Palm Springs State CA Zip Code 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 02 / 2017
Transaction ID : SA11AI.C4652050
 Amount of Each Receipt this Period 100.00
 Memo Item
 monthly recurring cc contr

B. Kors, Geoff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1455 N. Vine Ave.
 City Palm Springs State CA Zip Code 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 12 / 2017
Transaction ID : SA11AI.C4653024
 Amount of Each Receipt this Period 100.00
 Memo Item
 monthly recurring cc contr

C. Kors, Geoff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1455 N. Vine Ave.
 City Palm Springs State CA Zip Code 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 01 / 2017
Transaction ID : SA11AI.C4653509
 Amount of Each Receipt this Period 100.00
 Memo Item
 monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....	300.00
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 17 OF 39
	(check only one)	
<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"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Kors, Geoff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1455 N. Vine Ave.
 City Palm Springs State CA Zip Code 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 01 / 2017
Transaction ID : SA11AI.C4658402
 Amount of Each Receipt this Period 100.00
 Memo Item
 monthly recurring cc contr

B. Kors, Geoff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1455 N. Vine Ave.
 City Palm Springs State CA Zip Code 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.C4659294
 Amount of Each Receipt this Period 100.00
 Memo Item
 monthly recurring cc contr

C. Montes, Victor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42600 Mirage Road Bldg A-1
 City Rancho Mirage State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Contour Dermatology Occupation (for Individual) Nurse
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 18 / 2017
Transaction ID : SA11AI.C4652334
 Amount of Each Receipt this Period 200.00
 Memo Item
 one-time contribution to DHQ operating fund

SUBTOTAL of Receipts This Page (optional).....	400.00
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 18 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Montes, Victor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42600 Mirage Road
 Bldg A-1
 City Rancho Mirage State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Contour Dermatology Occupation (for Individual) Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 01 / 2017
Transaction ID : SA11AI.C4658373
 Amount of Each Receipt this Period 150.00
 Memo Item one-time contribution

B. O'Regan, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61379 Topaz Drive
 City La Quinta State CA Zip Code 92253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 01 / 05 / 2017
Transaction ID : SA11AI.C4649498
 Amount of Each Receipt this Period 110.00
 Memo Item monthly recurring cc contr

C. O'Regan, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61379 Topaz Drive
 City La Quinta State CA Zip Code 92253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 02 / 02 / 2017
Transaction ID : SA11AI.C4652046
 Amount of Each Receipt this Period 110.00
 Memo Item monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....	370.00
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 19 OF 39
	(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

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. O'Regan, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61379 Topaz Drive
 City La Quinta State CA Zip Code 92253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2017
Transaction ID : SA11AI.C4652950
 Amount of Each Receipt this Period
 110.00
 Memo Item
 monthly recurring cc contr

B. O'Regan, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61379 Topaz Drive
 City La Quinta State CA Zip Code 92253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2017
Transaction ID : SA11AI.C4653500
 Amount of Each Receipt this Period
 110.00
 Memo Item
 monthly recurring cc contr

C. O'Regan, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61379 Topaz Drive
 City La Quinta State CA Zip Code 92253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017
Transaction ID : SA11AI.C4658393
 Amount of Each Receipt this Period
 110.00
 Memo Item
 monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....	330.00
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 20 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. O'Regan, Kathleen, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61379 Topaz Drive

City La Quinta	State CA	Zip Code 92253
-------------------	-------------	-------------------

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

Name of Employer (for Individual) n/a	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2017

Transaction ID : SA11AI.C4659286

Amount of Each Receipt this Period
110.00

Memo Item
monthly recurring cc contr

B. Silver, Joy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2346 Paseo del Rey

City Palm Springs	State CA	Zip Code 92264
----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2017

Transaction ID : SA11AI.C4659254

Amount of Each Receipt this Period
1000.00

Memo Item

C. Westwood, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24 Chandra Lane

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2017

Transaction ID : SA11AI.C4649501

Amount of Each Receipt this Period
100.00

Memo Item
monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....	1210.00
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 21 OF 39
	<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)
Democratic Headquarters of the Desert

A. Westwood, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24 Chandra Lane

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2017

Transaction ID : SA11AI.C4652097

Amount of Each Receipt this Period
100.00

Memo Item
monthly recurring cc contr

B. Westwood, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24 Chandra Lane

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2017

Transaction ID : SA11AI.C4653018

Amount of Each Receipt this Period
100.00

Memo Item
monthly recurring cc contr

C. Westwood, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24 Chandra Lane

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2017

Transaction ID : SA11AI.C4653503

Amount of Each Receipt this Period
100.00

Memo Item
monthly recurring cc contr

SUBTOTAL of Receipts This Page (optional).....	300.00
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 22 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Westwood, Robert, , ,

Mailing Address 24 Chandra Lane

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2017

Transaction ID : SA11AI.C4658396

Amount of Each Receipt this Period
100.00

Memo Item
monthly recurring cc contr

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Westwood, Robert, , ,

Mailing Address 24 Chandra Lane

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017

Transaction ID : SA11AI.C4659289

Amount of Each Receipt this Period
100.00

Memo Item
monthly recurring cc contr

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	6010.00

**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 23 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Democratic Headquarters of the Desert

A. RCDP - Fed

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2384 North Murray St
C/o Jackie Atwood

City Banning State CA Zip Code 92220

FEC ID number of contributing federal political committee. **C** C00396994

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2017

Transaction ID : SA11C.C4658675

Amount of Each Receipt this Period
750.00

Memo Item
5 months of \$150/month support

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	750.00

**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"/> 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

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. Top of the Line Signs

Mailing Address PO Box 179

City La Quinta State CA Zip Code 92247-0000

Purpose of Disbursement
New office sign

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1653
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Top of the Line Signs

Mailing Address PO Box 179

City La Quinta State CA Zip Code 92247-0000

Purpose of Disbursement
Final balance paid in full for new office sign

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1654
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Spectrum

Mailing Address PO Box 60074

City City of Industry State CA Zip Code 91716

Purpose of Disbursement
Monthly cable bill

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E165
Amount of Each Disbursement this Period

Memo Item

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

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

**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"/> 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

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. Spectrum

Mailing Address PO Box 60074

City
City of Industry State CA Zip Code 91716

Purpose of Disbursement
Monthly cable bill

Category/
Type

Candidate Name

Office Sought: House Senate President
State: CA District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1655
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Spectrum

Mailing Address PO Box 60074

City
City of Industry State CA Zip Code 91716

Purpose of Disbursement
Monthly cable bill

Category/
Type

Candidate Name

Office Sought: House Senate President
State: CA District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1653
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Spectrum

Mailing Address PO Box 60074

City
City of Industry State CA Zip Code 91716

Purpose of Disbursement
March cable bill

Category/
Type

Candidate Name

Office Sought: House Senate President
State: CA District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E165:
Amount of Each Disbursement this Period

Memo Item

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

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

**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"/> 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

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NAME OF COMMITTEE (In Full)

Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. Promotivators

Mailing Address 1150 E. Palm Canyon Dr.
#92

City Palm Springs State CA Zip Code 92264

Purpose of Disbursement Misc. political items

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1655
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Promotivators

Mailing Address 1150 E. Palm Canyon Dr.
#92

City Palm Springs State CA Zip Code 92264

Purpose of Disbursement Misc. Headquarters operating supplies

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1652
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement cc transaction fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E165
Amount of Each Disbursement this Period

Memo Item

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

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

**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"/> 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

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
monthly cc transaction fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1654
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
cc transaction charge

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1654
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
monthly cc transaction fees

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1654
Amount of Each Disbursement this Period

Memo Item

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

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

**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"/> 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

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
daily cc transaction charge

001

Category/
Type

Office Sought: House Senate President
State: CA District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2017

FEC Identification Number

C

Transaction ID : SB21B.E1653

Amount of Each Disbursement this Period

0.86

Memo Item

Full Name (Last, First, Middle Initial)

B. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
daily cc transaction charge

001

Category/
Type

Office Sought: House Senate President
State: CA District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2017

FEC Identification Number

C

Transaction ID : SB21B.E1653

Amount of Each Disbursement this Period

0.43

Memo Item

Full Name (Last, First, Middle Initial)

C. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
daily cc transaction charge

001

Category/
Type

Office Sought: House Senate President
State: CA District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2017

FEC Identification Number

C

Transaction ID : SB21B.E1653

Amount of Each Disbursement this Period

0.60

Memo Item

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

1.89

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

**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"/> 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

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
daily cc transaction charge

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1653
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
monthly cc charges

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1653
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
monthly cc svc chg

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1653
Amount of Each Disbursement this Period

Memo Item

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

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

**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"/> 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

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NAME OF COMMITTEE (In Full)

Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
monthly cc processing fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.E1652
Amount of Each Disbursement this Period
[] 180.95

Memo Item

Full Name (Last, First, Middle Initial)

B. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
cc processing fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.E1652
Amount of Each Disbursement this Period
[] 0.26

Memo Item

Full Name (Last, First, Middle Initial)

C. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
cc processing fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	2		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B.E1652
Amount of Each Disbursement this Period
[] 0.86

Memo Item

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

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

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]

**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"/> 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

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement cc processing fee
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
01 / 08 / 2017

FEC Identification Number
C
Transaction ID : **SB21B.E1652**
Amount of Each Disbursement this Period
2.14

Memo Item

Full Name (Last, First, Middle Initial)

B. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement monthly recurring cc processing fee
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
01 / 04 / 2017

FEC Identification Number
C
Transaction ID : **SB21B.E1652**
Amount of Each Disbursement this Period
0.34

Memo Item

Full Name (Last, First, Middle Initial)

C. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement monthly recurring cc processing fee
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
01 / 03 / 2017

FEC Identification Number
C
Transaction ID : **SB21B.E1652**
Amount of Each Disbursement this Period
17.03

Memo Item

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

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

19.51

**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"/> 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

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
cc processing fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1656
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
cc processing fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1656
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ICS

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement
cc monthly processing fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.E1656
Amount of Each Disbursement this Period

Memo Item

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

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

**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"/> 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

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NAME OF COMMITTEE (In Full)

Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
cc transaction charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	7

FEC Identification Number

C
Transaction ID : SB21B.E1655

Amount of Each Disbursement this Period

0	4	3
---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
cc transaction charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	7

FEC Identification Number

C
Transaction ID : SB21B.E1655

Amount of Each Disbursement this Period

1	7	1	0
---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
cc transaction charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	7

FEC Identification Number

C
Transaction ID : SB21B.E1655

Amount of Each Disbursement this Period

2	2	7	5
---	---	---	---

Memo Item

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

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

4	0	2	8
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**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"/> 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

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NAME OF COMMITTEE (In Full)

Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
cc trans charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1654

Amount of Each Disbursement this Period

[REDACTED]	0.86
------------	------

Memo Item

Full Name (Last, First, Middle Initial)

B. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
monthly cc processing charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1654

Amount of Each Disbursement this Period

[REDACTED]	97.05
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

C. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
cc transaction charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1654

Amount of Each Disbursement this Period

[REDACTED]	4.36
------------	------

Memo Item

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

[REDACTED]	102.27
------------	--------

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

[REDACTED]	
------------	--

**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"/> 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

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NAME OF COMMITTEE (In Full)

Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
cc processing transaction charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1654

Amount of Each Disbursement this Period

[REDACTED] 20.36

Memo Item

Full Name (Last, First, Middle Initial)

B. ICS

Mailing Address PO Box 3429

City
Thousand Oaks

State
CA

Zip Code
91359-0000

Purpose of Disbursement
daily cc transaction charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1653

Amount of Each Disbursement this Period

[REDACTED] 3.42

Memo Item

Full Name (Last, First, Middle Initial)

C. Copleston, Arthur, , ,

Mailing Address 1581 Concha Circle

City
Palm Springs

State
CA

Zip Code
92264

Purpose of Disbursement
Reimburse misc. office expense

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	0		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E165;

Amount of Each Disbursement this Period

[REDACTED] 595.01

Memo Item

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

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

[REDACTED] 618.79

[REDACTED]

**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"/> 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

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NAME OF COMMITTEE (In Full)

Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. Desert Willow Golf Resort

Mailing Address 38-005 Desert Willow Drive

City
Palm Desert

State
CA

Zip Code
92260

Purpose of Disbursement
Staff working luncheon

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	0		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1652

Amount of Each Disbursement this Period

[REDACTED] 405.01

Memo Item Sub-vendor itemization of Arthur Copleston

Full Name (Last, First, Middle Initial)

B. Constant Contact

Mailing Address 1601 Trapelo Rd.

City
Waltham

State
MA

Zip Code
02451

Purpose of Disbursement
monthly newsletter distribution

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: MA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	0		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1652

Amount of Each Disbursement this Period

[REDACTED] 40.00

Memo Item Sub-vendor itemization of Arthur Copleston

Full Name (Last, First, Middle Initial)

C. DirectFile

Mailing Address PO Box 362

City
Fresno

State
CA

Zip Code
93708

Purpose of Disbursement
monthly software lease

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	0		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1652

Amount of Each Disbursement this Period

[REDACTED] 150.00

Memo Item Sub-vendor itemization of Arthur Copleston

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

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

[REDACTED] 0.00

[REDACTED]

**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"/> 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

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NAME OF COMMITTEE (In Full)

Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial)

A. Canyon Plaza South

Mailing Address c/o Spinello Ppty. Mgmt., Inc.
PO Box 1419

City Cathedral City State CA Zip Code 92235

Purpose of Disbursement
June 2017 rent

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: CA District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2017

FEC Identification Number

C
Transaction ID : SB21B.E1655
Amount of Each Disbursement this Period
1196.41

Memo Item

Full Name (Last, First, Middle Initial)

B. Canyon Plaza South

Mailing Address c/o Spinello Ppty. Mgmt., Inc.
PO Box 1419

City Cathedral City State CA Zip Code 92235

Purpose of Disbursement
April office rent

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: CA District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2017

FEC Identification Number

C
Transaction ID : SB21B.E1653
Amount of Each Disbursement this Period
1196.41

Memo Item

Full Name (Last, First, Middle Initial)

C. Canyon Plaza South

Mailing Address c/o Spinello Ppty. Mgmt., Inc.
PO Box 1419

City Cathedral City State CA Zip Code 92235

Purpose of Disbursement
Monthly rent

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: CA District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2017

FEC Identification Number

C
Transaction ID : SB21B.E165
Amount of Each Disbursement this Period
1196.41

Memo Item

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

3589.23

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

**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"/> 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

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NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

Full Name (Last, First, Middle Initial) A. Canyon Plaza South		Date of Disbursement MM / DD / YYYY 03 / 01 / 2017
Mailing Address c/o Spinello Ppty. Mgmt., Inc. PO Box 1419		FEC Identification Number C [] Transaction ID : SB21B.E1653 Amount of Each Disbursement this Period [] 1196.41
City Cathedral City	State CA	Zip Code 92235
Purpose of Disbursement monthly office rent	Category/ Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District:		

Full Name (Last, First, Middle Initial) B. Alex Advertising		Date of Disbursement MM / DD / YYYY 05 / 02 / 2017
Mailing Address 9424 Eton Ave Suite i		FEC Identification Number C [] Transaction ID : SB21B.E1654 Amount of Each Disbursement this Period [] 800.00
City Chatsworth	State CA	Zip Code 91311
Purpose of Disbursement Replacement check for #1584 and #1588, both lost in mail	Category/ Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1996.41
TOTAL This Period (last page this line number only).....▶	9485.26

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 39 OF 39
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Democratic Headquarters of the Desert

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ICS			Nature of Debt (Purpose): cc processing charge
Mailing Address PO Box 3429			
City Thousand Oaks	State CA	Zip Code 91359-0000	

Outstanding Balance Beginning This Period		Transaction ID : SD10.E1641206	
0.01			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	0.01	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Top of the Line Signs			Nature of Debt (Purpose): New office sign
Mailing Address PO Box 179			
City La Quinta	State CA	Zip Code 92247-0000	

Outstanding Balance Beginning This Period		Transaction ID : SD10.E1653793	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
813.51	406.76	406.75	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	406.76
2) TOTALS This Period (last page this line number only)..... ▶	406.76
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	406.76