PAGE 1 / 8

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or Other Than An Auth	orizea Committee	Office Use O	nly
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Rockingham County D	emocratic Committee			
ADDRESS (number and street)	11830 Fort Turley Trail			
▼ Check if different				
than previously reported. (ACC)	Linville		VA 22834	
2. FEC IDENTIFICATION NU	IMBER ▼ CITY	√ ▲	STATE ▲ ZIP	CODE A
C C00690198	3. IS	THIS NEW (N) OR	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M5		Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Mar 2	20 (M3) Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q		20 (M4) Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (Q	(c) 12-Day	Primary (12P)	General (12G)	Runoff (12R)
October 15	Report for the:	Convention (12C)	Special (12S)	
Quarterly Report (Q January 31 Year-End Report (Y)	Floation	n on		the ate of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	n on 11 06		the ate of VA
5. Covering Period 10		through 11	/ D D / Y Y Y Z Y Z 2018	Y
I certify that I have examined thi Type or Print Name of Treasurer	Sheridan, Susan, Bosworth,		rue, correct and complete.	
Signature of Treasurer Sheric	dan, Susan, Bosworth, Ms,	[Electronically Filed]	Date 12 / 07	2018
NOTE: Submission of false, errone	eous, or incomplete information	may subject the person signing	this Report to the penalties of	of 52 U.S.C. § 3010
Office Use				ORM 3X 05/2016

SUMMARY PAGE

OF FEC Form 3X (Rev. 05/2016)	RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
Rockingham County Democratic Cor	mmittee	
Report Covering the Period: From: 10	/ 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	o: 11 26 2018
_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2018		0.00
(b) Cash on Hand at Beginning of Reporting Period	11112.10	
(c) Total Receipts (from Line 19)	158.47	11270.57
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11270.57	11270.57
7. Total Disbursements (from Line 31)	4637.55	4637.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6633.02	6633.02
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)	0.00	
This committee has qualified as a multicand	didate committee. (see FEC FORM 1M)	
Fc	or further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Rockingham County Democratic Committee

10 2018 11 26 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)..... 158.47 158.47 (ii) Unitemized (iii) TOTAL (add 158.47 158.47 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 158.47 158.47 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 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 11112.10 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))....... 11270.57 158.47 20. Total Federal Receipts 158.47 11270.57 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
21. Operating Expenditures: (a) Allocated Federal/Non-Federal					
(i)	ctivity (from Schedule H4) Federal Share	0.00	0.00		
		0.00	0.00		
(ii) (b) O	Non-Federal Sharether Federal Operating	0.00	0.00		
	kpenditures	450.00	450.00		
. ,	otal Operating Expenditures	450.00	450.00		
	dd 21(a)(i), (a)(ii), and (b))▶ ers to Affiliated/Other Party	450.00	450.00		
Comm	ittees	0.00	0.00		
Federa	butions to all Candidates/Committees ther Political Committees	0.00	0.00		
. Indepe	ndent Expenditures	4 4	4 4		
. Coordi	chedule E) nated Party Expenditures S.C. § 30116(d))	4187.55	4187.55		
(use S	chedule F)	0.00	0.00		
. Loan F	Repayments Made	0.00	0.00		
	Made	0.00	0.00		
(a) In	dividuals/Persons Other nan Political Committees	0.00	0.00		
	-	45 45 45	45 1 45 1 45		
	blitical Party Committeesther Political Committees	0.00	0.00		
` '	uch as PACs)	0.00	0.00		
	otal Contribution Refunds		4 4		
(a	dd Lines 28(a), (b), and (c))	0.00	0.00		
	Disbursements (Including				
Non-Fe	ederal Donations)	0.00	0.00		
	Il Election Activity (52 U.S.C. § 30101(20))				
. ,	located Federal Election Activity om Schedule H6)				
	Federal Share	0.00	0.00		
()	-	, , , , ,	3.00		
	"Levin" Share	0.00	0.00		
	ederal Election Activity Paid ntirely With Federal Funds	0.00	0.00		
	otal Federal Election Activity (add	0.00	0.00		
Li	nes 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
	Disbursements (add Lines 21(c), 22,				
23, 24	, 25, 26, 27, 28(d), 29 and 30(c))	4637.55	4637.55		
	ederal Disbursements				
	ct Line 21(a)(ii) and Line 30(a)(ii) ine 31)	1007 55			
IIOIII L	IIIG 01)	4637.55	4637.55		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	158.47	158.47
44. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	158.47	158.47
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	450.00	450.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	450.00	450.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page (check only 11a)

FOR LINE NUMBER:				PAGE	6	OF	8		
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

	Statements may not be sold or used by any perse name and address of any political committee to				
NAME OF COMMITTEE (In Full) Rockingham County Democrat	ic Committee				
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Data of Receipt			
Mailing Address 1370 Lincolnshire	Date of Receipt				
	In the second	10 29 2018			
City Harrisonburg	State Zip Code VA 22802	Transaction ID : SA11AI.4123			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 450.15			
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item Donation			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				
Full Name of Individual (Last, First, Middle In Pupic, Nadina, , Ms.,	itial) or Full Organization Name	Date of Receipt			
Mailing Address 103 Berkleley Ave.		10 29 2018			
City Grottoes	State Zip Code VA 24441	Transaction ID : SA11AI.4125 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.					
Name of Employer (for Individual) United Way Greater Augusta	Occupation (for Individual) Community Relations Coordinator	Memo Item Contribution			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Date of Receipt			
Mailing Address		M = M / D = D / Y = Y = Y			
City	State Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	Amount of Each Necept this Feriod			
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼				
SUBTOTAL of Receipts This Page (optional)	•	0.00			
TOTAL This Period (last page this line number	only)	0.00			

S 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) Rockingham County Democratic Committee Full Name (Last, First, Middle Initial) A. The Building LLC Mailing Address 77 N. Willow St. City Harrisonburg Purpose of Disbursement Office rent Candidate Name LEWIS, JENNIFER LYNN, , Ms, Office Sought: Y House	SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 OF 8				
Detailed Summary Page 28 28 28 20 20 300	ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the					
Any Information copied from such Reports and Statements may not be seld or used by any person for the purpose of soliciting contributions for 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)								
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 Pful) Rockingham County Democratic Committee Full Name (Last, First, Middle Initial) A. The Building LLC Mailing Address 77 N. Willow St. City Marrianoburg WA 22802 Purpose of Disbursement Office Sought: Senate President Other (specify) Full Name (Last, First, Middle Initial) B. State City S	Any information conicd from such Departs and Clat		mat ha sald av					
Rockingham County Democratic Committee Full Name (Last, First, Middle Initial) A. The Building LLC Mailing Address 77 N. Willow St. City Mailing Address 77 N. Willow St. City Mailing Address 77 N. Willow St. City Purpose of Disbursement office rent LEWIS, JENNIFER LYNN, Ms. Office Sought: Prissident State: VA District: 06 Full Name (Last, First, Middle Initial) B. Mailing Address City State: District: Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) Category/ Type Office Sought: First, Middle Initial) Memo Item Substorant this Period First Conditication Number Category/ Type Office Sought: First, Middle Initial) Memo Item Substorant this Period Memo Item								
Full Name (Last, First, Middle Initial) A. The Building LLC Mailing Address 77 N. Willow St. City State Zip Code YA 22802 Purpose of Disbursement office rent Candidate Name LEWIS, JENNIFER LYNN, Ms. Office Sought: X House Senate President State: Disbursement For: Senate President Other (specify) Type Office Sought: House President State: Disbursement For: Senate President Other (specify) Type Office Sought: House President State: Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Primary General Memol Item Mem	NAME OF COMMITTEE (In Full)							
A. The Building LLC Mailing Address 77 N. Willow St. City Harrisonburg Purpose of Disbursement office rent Candidate Name LEWIS, JENNIFER LYNN, Ms, Office Sought: Va	Rockingham County Democratic	Committe	ee					
Mailing Address 77 N. Willow St. City	_				Data of Di	-h		
Mailing Address 77 N. Willow St. City Purpose of Disbursement office Sought:	A. The Building LLC							
Harrisonburg Purpose of Disbursement office rent Candidate Name LEWIS, JENNIFER LYNN, MS, Office Sought:	Mailing Address 77 N. Willow St.				7			
Harrisonburg Purpose of Disbursement office rent Candidate Name LEWIS, JENNIFER LYNN, Ms, Office Sought:	City	State	Zip Code		FEC Identi	fication Number		
office rent Candidate Name LEWIS, JENNIFER LYNN, MS, Office Sought:	· ·	VA	22802		<u> </u>	ilidation rambol		
Cardidate Name LEWIS, JENNIFER LYNN, MS, Office Sought:								
LEWIS, JENNIFER LYNN, MS, Office Sought: x House Senate President State: VA District: 06 Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Primary General President State: Disbursement For: 2018 State: VA District: 06 Full Name (Last, First, Middle Initial) B. Date of Disbursement Category/ Type Office Sought: House Disbursement For: Senate Primary General Disbursement Candidate Name Category/ Type Office Sought: District: District: Fell Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FeC Identification Number Category/ Type Date of Disbursement this Period Type Office Sought: House Disbursement For: Senate Primary General Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement Disbu	Candidate Name			Category/				
State: VA District: 06 Full Name (Last, First, Middle Initial) B. Mailing Address City					7 0			
State: VA District: 06 Full Name (Last, First, Middle Initial) B. City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) C. Category/ Type Office Sought: House Primary General Other (specify) City State Zip Code FEC Identification Number Category/ Type Memo Item For: Category/ Type Office Sought: State Zip Code FEC Identification Number Category/ Type Office Sought: State Zip Code FEC Identification Number Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Primary General Prima		ement For:	2018			400.00		
State: VA District: 06 Full Name (Last, First, Middle Initial) B. Mailing Address City								
B. Mailing Address Disbursement		Other (spe	ecny) \blacktriangledown		Memo	Item		
City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailling Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item Substreament Tor: Category/ Type Memo Item Substreament This Page (optional)								
Mailing Address City	B.				Date of Dis	sbursement		
City State Zip Code FEC Identification Number Candidate Name Category/ Type Amount of Each Disbursement this Period Office Sought:						D D / Y Y Y Y		
Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Date of Disbursement Category/ Type Category/ Type Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item State: District: Substract: Memo Item Substract: Memo Item Substract: Memo Item Substract: Memo Item	Mailing Address							
Candidate Name Category/ Type	City	State	Zip Code		FEC Identi	fication Number		
Candidate Name Category/ Type	Purnose of Dishursement					C		
Office Sought: House Senate Primary General Primary General Disbursement For: State: District: Date of Disbursement City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement Candidate Name Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item State: District: Substate: District: Memo Item FEC Identification Number Category/ Type Memo Item Memo Item Amount of Each Disbursement this Period Memo Item 400.00								
Office Sought:	Candidate Name Category/					Each Disbursement this Period		
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Senate Primary General Memo Item State: District: Subtrotal of Disbursements This Page (optional)				Type				
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State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) State: District: Substock Amount of Each Disbursement this Period Memo Item Memo Item Amount of Each Disbursement this Period Memo Item Memo Item		1	, ,					
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City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtotal of Disbursements This Page (optional)					D . (D)			
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Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Suate: District: Memo Item FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item 400.00	Mailing Address				M = M /			
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	City	State	Zip Code		FEC Identi	fication Number		
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Purpose of Disbursement					C		
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)				L				
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ SUBTOTAL of Disbursements This Page (optional)	Candidate Name				Amount of	Each Disbursement this Period		
State: Other (specify) Substrict: Memo Item 400.00	Office Sought: House Disburs	ement For:						
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)			·			,		
SUBTOTAL of Disbursements This Page (optional)		ecify) 🔻		Memo	Item			
400 00	State: DISTRICT:							
400.00	SUBTOTAL of Disbursements This Page (optional)					400.00		
					-	400.00		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

				FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
Rockingham County Democratic Com	mittee			C C00690198		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y = Y		
Full Name of Payee Daily News-Record		☐ Memo	Item [Date of Public Distribution/Dissemination		
,				10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 231 S. Liberty St.			,	Amount		
City	State	Zip Code		2093.77		
Harrisonburg	VA	22803		Transaction ID : SE.4135 Date of Disbursement or Obligation		
Purpose of Expenditure Advertisement for Jennifer Lewis		Category/ Type 004		10 24 7 2018		
Name of Federal Candidate:		✗ Support	Office \$	Sought:		
LEWIS, JENNIFER LYNN, , Ms,		Oppose		President Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought		2093.77	Disburs	ement For: Primary Seneral		
Fer Election for Office Sought	7 7		2010	Other (specify) ▶		
Full Name of Payee Daily News-Record		☐ Memo	Item [Date of Public Distribution/Dissemination		
Mailing Address				11 03 2018		
Mailing Address 231 S. Liberty St.			,	Amount		
City	State	Zip Code		2093.78		
Harrisonburg	VA	22803		Transaction ID : SE.4138 Date of Disbursement or Obligation		
Purpose of Expenditure Advertising		Category/ Type 004		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		✗ Support	Office S	Sought:		
LEWIS, JENNIFER LYNN, , Ms,		Oppose		President Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought		4187.55	Disburs	ement For: Primary General		
	,,			Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures.			. [4187.55		
(b) SUBTOTAL of Unitemized Independent Expenditure	98		. [
(c) TOTAL Independent Expenditures			• [4187.55		
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized	•				
Sheridan, Susan, Bosworth, Ms,	Electronically File	ed] Date	e 12	07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature						

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