

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 Women of the Desert

ADDRESS (number and street) PO Box 6207
Check if different than previously reported. (ACC) La Quinta CA 92248

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00416347 3. IS THIS REPORT NEW (N) OR AMENDED (A) 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 M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2013 through 06 / 30 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Shawnda Deane

Signature of Treasurer Shawnda Deane [Electronically Filed] Date 05 / 14 / 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Democratic Women 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="2013"/>	<input type="text" value="4615.29"/>	<input type="text" value="4615.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4615.29"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="15531.21"/>	<input type="text" value="15531.21"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="20146.50"/>	<input type="text" value="20146.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11633.95"/>	<input type="text" value="11633.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="8512.55"/>	<input type="text" value="8512.55"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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 Women 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).....	5128.21	5128.21
(ii) Unitemized	10323.00	10323.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	15451.21	15451.21
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	80.00	80.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	15531.21	15531.21
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).....	0.00	0.00
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))..... ▶	15531.21	15531.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15531.21	15531.21

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	8967.47	8967.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8967.47	8967.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25.00	25.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	2641.48	2641.48
30. Federal Election Activity (2 U.S.C. §431(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)) ..	11633.95	11633.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11633.95	11633.95

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15531.21	15531.21
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15531.21	15531.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8967.47	8967.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8967.47	8967.47

**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 33
<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

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 Women of the Desert

Full Name (Last, First, Middle Initial) A. Cardriner Bowden		Date of Receipt
Mailing Address 78017 Freisha Court		<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
Palm Desert	CA	92211
FEC ID number of contributing federal political committee.		Transaction ID : INCA144
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="40.00"/>
Name of Employer	Occupation	
n/a	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="527.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Cardriner Bowden		Date of Receipt
Mailing Address 78017 Freisha Court		<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
Palm Desert	CA	92211
FEC ID number of contributing federal political committee.		Transaction ID : INCA253
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2.00"/>
Name of Employer	Occupation	
n/a	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="527.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Cardriner Bowden		Date of Receipt
Mailing Address 78017 Freisha Court		<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
Palm Desert	CA	92211
FEC ID number of contributing federal political committee.		Transaction ID : NONA293
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
n/a	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="527.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="92.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Cardriner Bowden
 Full Name (Last, First, Middle Initial)
 Mailing Address 78017 Freisha Court
 City State Zip Code
 Palm Desert CA 92211
 Date of Receipt: 05 / 19 / 2013
Transaction ID : INCA273
 Amount of Each Receipt this Period: 250.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: n/a Occupation: Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 527.00

B. Cardriner Bowden
 Full Name (Last, First, Middle Initial)
 Mailing Address 78017 Freisha Court
 City State Zip Code
 Palm Desert CA 92211
 Date of Receipt: 05 / 20 / 2013
Transaction ID : INCA208
 Amount of Each Receipt this Period: 100.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: n/a Occupation: Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 527.00

C. Cardriner Bowden
 Full Name (Last, First, Middle Initial)
 Mailing Address 78017 Freisha Court
 City State Zip Code
 Palm Desert CA 92211
 Date of Receipt: 06 / 04 / 2013
Transaction ID : INCA230
 Amount of Each Receipt this Period: 15.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: n/a Occupation: Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 527.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 365.00
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 33
	<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 Women of the Desert

A. Yvonne Burk
Full Name (Last, First, Middle Initial)

Mailing Address 81563 Corte Valdemor

City Bakersfield	State CA	Zip Code 93303
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
212.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2013

Transaction ID : NONA291

Amount of Each Receipt this Period
212.50

In-Kind Contribution - Fundraising Supplies

B. Kathryn Reed Coon
Full Name (Last, First, Middle Initial)

Mailing Address 2575 Adams

City Riverside	State CA	Zip Code 92504
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation 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	/	20	/	2013

Transaction ID : NONA290

Amount of Each Receipt this Period
750.00

In-Kind Contribution - Fundraising Supplies

C. Arthur S. Copleston
Full Name (Last, First, Middle Initial)

Mailing Address 1581 Concha Circle

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

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

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : INCA127

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	1212.50
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 10 OF 33
	<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 Women of the Desert

Full Name (Last, First, Middle Initial) A. Amalia Uribe Deaztlan		Date of Receipt MM / DD / YYYY 01 / 26 / 2013 Transaction ID : INCA57
Mailing Address 79170 Fred Waring Drive		Amount of Each Receipt this Period 25.00
City Bermuda Dunes	State CA	Zip Code 92203
FEC ID number of contributing federal political committee. C	Name of Employer n/a	
Occupation Retired		Aggregate Year-to-Date ▼ 298.21
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Amalia Uribe Deaztlan		Date of Receipt MM / DD / YYYY 02 / 10 / 2013 Transaction ID : INCA75
Mailing Address 79170 Fred Waring Drive		Amount of Each Receipt this Period 30.00
City Bermuda Dunes	State CA	Zip Code 92203
FEC ID number of contributing federal political committee. C	Name of Employer n/a	
Occupation Retired		Aggregate Year-to-Date ▼ 298.21
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Amalia Uribe Deaztlan		Date of Receipt MM / DD / YYYY 02 / 10 / 2013 Transaction ID : INCA1486
Mailing Address 79170 Fred Waring Drive		Amount of Each Receipt this Period 38.21
City Bermuda Dunes	State CA	Zip Code 92203
FEC ID number of contributing federal political committee. C	Name of Employer n/a	
Occupation Retired		Aggregate Year-to-Date ▼ 298.21
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	93.21
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 33
	<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 Women of the Desert

A. Amalia Uribe Deaztlan
Full Name (Last, First, Middle Initial)

Mailing Address 79170 Fred Waring Drive

City State Zip Code
Bermuda Dunes CA 92203

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

Name of Employer Occupation
n/a Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
298.21

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2013

Transaction ID : INCA102

Amount of Each Receipt this Period
30.00

B. Amalia Uribe Deaztlan
Full Name (Last, First, Middle Initial)

Mailing Address 79170 Fred Waring Drive

City State Zip Code
Bermuda Dunes CA 92203

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

Name of Employer Occupation
n/a Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
298.21

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : INCA123

Amount of Each Receipt this Period
100.00

C. Amalia Uribe Deaztlan
Full Name (Last, First, Middle Initial)

Mailing Address 79170 Fred Waring Drive

City State Zip Code
Bermuda Dunes CA 92203

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

Name of Employer Occupation
n/a Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
298.21

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2013

Transaction ID : INCA147

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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 33
	<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 Women of the Desert

Full Name (Last, First, Middle Initial) A. Amalia Uribe Deaztlan		Date of Receipt MM / DD / YYYY 05 / 20 / 2013 Transaction ID : INCA196
Mailing Address 79170 Fred Waring Drive		Amount of Each Receipt this Period 35.00
City Bermuda Dunes	State CA	Zip Code 92203
FEC ID number of contributing federal political committee. C	Name of Employer n/a	
Occupation Retired		Aggregate Year-to-Date ▼ 298.21
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Suzann Holman		Date of Receipt MM / DD / YYYY 05 / 14 / 2013 Transaction ID : INCA192
Mailing Address 12421 Saubel Road		Amount of Each Receipt this Period 40.00
City Banning	State CA	Zip Code 92220
FEC ID number of contributing federal political committee. C	Name of Employer n/a	
Occupation Retired		Aggregate Year-to-Date ▼ 317.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Suzann Holman		Date of Receipt MM / DD / YYYY 05 / 19 / 2013 Transaction ID : INCA271
Mailing Address 12421 Saubel Road		Amount of Each Receipt this Period 250.00
City Banning	State CA	Zip Code 92220
FEC ID number of contributing federal political committee. C	Name of Employer n/a	
Occupation Retired		Aggregate Year-to-Date ▼ 317.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 13 OF 33
	(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 Women of the Desert

A. Suzann Holman
Full Name (Last, First, Middle Initial)

Mailing Address 12421 Saubel Road

City Banning State CA Zip Code 92220

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

Name of Employer n/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **317.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2013

Transaction ID : NONA287

Amount of Each Receipt this Period
27.00

In-Kind Contribution - Fundraising Supplies

B. Maxine Marcellin
Full Name (Last, First, Middle Initial)

Mailing Address 43695 Old Troon Court

City Indio State CA Zip Code 92201

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

Name of Employer n/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 15 / 2013

Transaction ID : INCA8

Amount of Each Receipt this Period
15.00

C. Maxine Marcellin
Full Name (Last, First, Middle Initial)

Mailing Address 43695 Old Troon Court

City Indio State CA Zip Code 92201

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

Name of Employer n/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 04 / 2013

Transaction ID : INCA70

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **72.00**

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 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Maxine Marcellin

Mailing Address 43695 Old Troon Court

City State Zip Code
Indio CA 92201

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

Name of Employer Occupation
n/a Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 17 / 2013
Transaction ID : INCA145

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Maxine Marcellin

Mailing Address 43695 Old Troon Court

City State Zip Code
Indio CA 92201

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

Name of Employer Occupation
n/a Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 18 / 2013
Transaction ID : INCA151

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
C. Maxine Marcellin

Mailing Address 43695 Old Troon Court

City State Zip Code
Indio CA 92201

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

Name of Employer Occupation
n/a Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 24 / 2013
Transaction ID : NONA286

Amount of Each Receipt this Period
25.00

In-Kind Contribution - Fundraising Supplies

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00

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 15 OF 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Carlyne A. McDonnell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1141 Vista Sol
 City State Zip Code
 Palm Springs CA 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2013
Transaction ID : INCA172
 Amount of Each Receipt this Period
 100.00

B. Carlyne A. McDonnell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1141 Vista Sol
 City State Zip Code
 Palm Springs CA 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2013
Transaction ID : INCA171
 Amount of Each Receipt this Period
 100.00

C. Carlyne A. McDonnell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1141 Vista Sol
 City State Zip Code
 Palm Springs CA 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2013
Transaction ID : INCA272
 Amount of Each Receipt this Period
 275.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00
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 33
	<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 Women of the Desert

Full Name (Last, First, Middle Initial)
A. Magdalena T. Molina

Mailing Address 2650 East Vincentia Road

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2013

Transaction ID : INCA62

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Palm Greens Cafe

Mailing Address 611 S Palm Canyon Drive, #6

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013

Transaction ID : INCA126

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Elsa Rivas

Mailing Address PO Box 10652

City Palm Desert	State CA	Zip Code 92255
---------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2013

Transaction ID : INCA83

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional).....▶	545.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA126

Contribution Refunded

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Elsa Rivas
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 10652
 City State Zip Code
 Palm Desert CA 92255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 236.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2013
Transaction ID : INCA105
 Amount of Each Receipt this Period
 35.00

B. Elsa Rivas
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 10652
 City State Zip Code
 Palm Desert CA 92255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 236.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 10 / 2013
Transaction ID : NONA298
 Amount of Each Receipt this Period
 116.00
 In-Kind Contribution - Fundraising Supplies

C. Elsa Rivas
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 10652
 City State Zip Code
 Palm Desert CA 92255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 236.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2013
Transaction ID : INCA187
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 191.00
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 19 OF 33
	<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 Women of the Desert

A. Richard Schiefer
Full Name (Last, First, Middle Initial)

Mailing Address 81563 Corte Valdemor

City Bakersfield State CA Zip Code 93303

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

Name of Employer n/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
05 / 01 / 2013
Transaction ID : **NONA292**

Amount of Each Receipt this Period
212.50

In-Kind Contribution - Fundraising Supplies

B. Dorea Smith
Full Name (Last, First, Middle Initial)

Mailing Address 29 Via Cielo Azul

City Palm Desert State CA Zip Code 92260

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

Name of Employer n/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
01 / 18 / 2013
Transaction ID : **INCA26**

Amount of Each Receipt this Period
20.00

C. Dorea Smith
Full Name (Last, First, Middle Initial)

Mailing Address 29 Via Cielo Azul

City Palm Desert State CA Zip Code 92260

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

Name of Employer n/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
03 / 03 / 2013
Transaction ID : **INCA161**

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 262.50

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 33
	<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 Women of the Desert

A. Dorea Smith
Full Name (Last, First, Middle Initial)
Mailing Address 29 Via Cielo Azul

City Palm Desert	State CA	Zip Code 92260
---------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2013

Transaction ID : INCA174

Amount of Each Receipt this Period

80.00

B. Dorea Smith
Full Name (Last, First, Middle Initial)
Mailing Address 29 Via Cielo Azul

City Palm Desert	State CA	Zip Code 92260
---------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2013

Transaction ID : NONA289

Amount of Each Receipt this Period

70.00

In-Kind Contribution - Fundraising Supplies

C. Dorea Smith
Full Name (Last, First, Middle Initial)
Mailing Address 29 Via Cielo Azul

City Palm Desert	State CA	Zip Code 92260
---------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2013

Transaction ID : INCA274

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional).....▶	260.00
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 33
	<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 Women of the Desert

A. Dorea Smith
Full Name (Last, First, Middle Initial)

Mailing Address 29 Via Cielo Azul

City Palm Desert	State CA	Zip Code 92260
---------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2013

Transaction ID : INCA277

Amount of Each Receipt this Period

30.00

B. Jessie L. Stoddart
Full Name (Last, First, Middle Initial)

Mailing Address 78893 Golden Reed Drive

City Palm Desert	State CA	Zip Code 92211
---------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : INCA128

Amount of Each Receipt this Period

250.00

C. John-Paul Valdez
Full Name (Last, First, Middle Initial)

Mailing Address 62691 South Starcross Drive

City Desert Hot Springs	State CA	Zip Code 92240
----------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2013

Transaction ID : INCA255

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 22 OF 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. John-Paul Valdez
 Full Name (Last, First, Middle Initial)
 Mailing Address 62691 South Starcross Drive
 City State Zip Code
 Desert Hot Springs CA 92240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2013
Transaction ID : INCA259
 Amount of Each Receipt this Period
 40.00

B. John-Paul Valdez
 Full Name (Last, First, Middle Initial)
 Mailing Address 62691 South Starcross Drive
 City State Zip Code
 Desert Hot Springs CA 92240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2013
Transaction ID : INCA218
 Amount of Each Receipt this Period
 200.00

C. Suzan Wilkinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 78515 Sunrise Canyon Avenue
 City State Zip Code
 Palm Desert CA 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2013
Transaction ID : INCA23
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.00
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 24 OF 33
	<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 Women of the Desert

A. Suzan Wilkinson
Full Name (Last, First, Middle Initial)
Mailing Address 78515 Sunrise Canyon Avenue

City Palm Desert	State CA	Zip Code 92262
---------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2013

Transaction ID : INCA160

Amount of Each Receipt this Period
90.00

B. Suzan Wilkinson
Full Name (Last, First, Middle Initial)
Mailing Address 78515 Sunrise Canyon Avenue

City Palm Desert	State CA	Zip Code 92262
---------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2013

Transaction ID : NONA296

Amount of Each Receipt this Period
45.00

In-Kind Contribution - Fundraising Supplies

C. Suzan Wilkinson
Full Name (Last, First, Middle Initial)
Mailing Address 78515 Sunrise Canyon Avenue

City Palm Desert	State CA	Zip Code 92262
---------------------	-------------	-------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2013

Transaction ID : INCA254

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	5128.21

**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 25 OF 33
<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 Women of the Desert

A. Manuel Perez for Assembly 2012 OHA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1787 Tribute Road, Suite K
 City Sacramento State CA Zip Code 95815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 80.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2013
Transaction ID : INCA153
 Amount of Each Receipt this Period
 80.00

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	80.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Yvonne Burk

Mailing Address 81563 Corte Valdemor

City Bakersfield State CA Zip Code 93303

Purpose of Disbursement
In-Kind Contribution - Fundraising Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2013

Transaction ID : NONB291

Amount of Each Disbursement this Period

212.50

Full Name (Last, First, Middle Initial)

B. Kathryn Reed Coon

Mailing Address 2575 Adams

City Riverside State CA Zip Code 92504

Purpose of Disbursement
In-Kind Contribution - Fundraising Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2013

Transaction ID : NONB290

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

C. Jackalope Ranch Restaurant

Mailing Address 80400 US Highway 111

City Indio State CA Zip Code 92201

Purpose of Disbursement
Food & Beverages for Meeting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2013

Transaction ID : EXPB300

Amount of Each Disbursement this Period

596.16

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

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

1558.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Mission Hills Country Club

Mailing Address 34600 Mission Hills Drive

City Rancho Mirage State CA Zip Code 92270

Purpose of Disbursement
Membership Meeting Expenses

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2013

Transaction ID : EXPB5

Amount of Each Disbursement this Period

681.86

Full Name (Last, First, Middle Initial)

B. Mission Hills Country Club

Mailing Address 34600 Mission Hills Drive

City Rancho Mirage State CA Zip Code 92270

Purpose of Disbursement
Membership Meeting Expenses

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2013

Transaction ID : EXPB283

Amount of Each Disbursement this Period

711.50

Full Name (Last, First, Middle Initial)

C. Mission Hills Country Club

Mailing Address 34600 Mission Hills Drive

City Rancho Mirage State CA Zip Code 92270

Purpose of Disbursement
Membership Meeting Expenses

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2013

Transaction ID : EXPB284

Amount of Each Disbursement this Period

758.94

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

2152.30

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of the Desert

Full Name (Last, First, Middle Initial)

A. Mission Hills Country Club

Mailing Address 34600 Mission Hills Drive

City Rancho Mirage State CA Zip Code 92270

Purpose of Disbursement
Membership Meeting Expenses

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2013

Transaction ID : EXPB219

Amount of Each Disbursement this Period

3366.47

Full Name (Last, First, Middle Initial)

B. Richard Schiefer

Mailing Address 81563 Corte Valdemor

City Bakersfield State CA Zip Code 93303

Purpose of Disbursement
In-Kind Contribution - Fundraising Supplies

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2013

Transaction ID : NONB292

Amount of Each Disbursement this Period

212.50

Full Name (Last, First, Middle Initial)

C. Suzan Wilkinson

Mailing Address 78515 Sunrise Canyon Avenue

City Palm Desert State CA Zip Code 92262

Purpose of Disbursement
Gift for Member

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2013

Transaction ID : EXPB94

Amount of Each Disbursement this Period

107.75

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

3686.72

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Suzan Wilkinson

Mailing Address 78515 Sunrise Canyon Avenue

City State Zip Code
Palm Desert CA 92262

Purpose of Disbursement
In-Kind Contribution - Fundraising Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2013

Transaction ID : NONB296

Amount of Each Disbursement this Period

45.00

Full Name (Last, First, Middle Initial)

B. Suzan Wilkinson

Mailing Address 78515 Sunrise Canyon Avenue

City State Zip Code
Palm Desert CA 92262

Purpose of Disbursement
Fundraising Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2013

Transaction ID : EXPB132

Amount of Each Disbursement this Period

83.79

Full Name (Last, First, Middle Initial)

C. Suzan Wilkinson

Mailing Address 78515 Sunrise Canyon Avenue

City State Zip Code
Palm Desert CA 92262

Purpose of Disbursement
Fundraising Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2013

Transaction ID : EXPB220

Amount of Each Disbursement this Period

170.01

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

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

298.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Suzan Wilkinson

Mailing Address 78515 Sunrise Canyon Avenue

City State Zip Code
Palm Desert CA 92262

Purpose of Disbursement
Plaques & Certificates for Award Luncheon

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB299

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

Full Name (Last, First, Middle Initial)

A. Riverside County Democratic Central Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	26	/	2013

Mailing Address 35125 Calle Nopal

Transaction ID : EXPB96

City Temecula State CA Zip Code 92592

Amount of Each Disbursement this Period

25.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name

Riverside County Democratic Central Committee

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

25.00

25.00

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

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

Full Name (Last, First, Middle Initial)

A. Democratic Women of the Desert Scholarship

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2013

Mailing Address PO Box 6207

Transaction ID : EXPB240

City La Quinta State CA Zip Code 92248

Amount of Each Disbursement this Period

750.00

Purpose of Disbursement
Transfer to Affiliated Committee

008
Category/ Type

Candidate Name

Democratic Women of the Desert Scholarship

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

Full Name (Last, First, Middle Initial)

B. Eduardo Garcia for Assembly 2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2013

Mailing Address 3605 Long Beach Blvd., Suite 426

Transaction ID : EXPB241

City Long Beach State CA Zip Code 90807

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name

Eduardo Garcia for Assembly 2014

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

Full Name (Last, First, Middle Initial)

C. Nicole Hernandez

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2013

Mailing Address 43-500 Monterey Avenue

Transaction ID : EXPB100

City Palm Desert State CA Zip Code 92260

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Scholarship

012
Category/ Type

Candidate Name

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

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

1250.00

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

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

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

Full Name (Last, First, Middle Initial)

A. Diana Root

Mailing Address 43-500 Monterey Avenue

City State Zip Code
Palm Desert CA 92260

Purpose of Disbursement
Scholarship

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB97

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Mayte Vargas

Mailing Address 43-500 Monterey Avenue

City State Zip Code
Palm Desert CA 92260

Purpose of Disbursement
Scholarship

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB99

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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