

**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
REPORTNEW
(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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

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

M M M / D D D / Y Y Y Y Y Y
07 01 2012

through

M M M / D D D / Y Y Y Y Y Y
09 30 2012

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 Josephine Kennedy

Signature of Treasurer

Josephine Kennedy

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 14 2012

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

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="2012"/> | | <input type="text" value="2843.09"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="4832.80"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="2660.00"/> | <input type="text" value="16268.45"/> |
| (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="7492.80"/> | <input type="text" value="19111.54"/> |
| 7. Total Disbursements (from Line 31) | <input type="text" value="3656.74"/> | <input type="text" value="15275.48"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | <input type="text" value="3836.06"/> | <input type="text" value="3836.06"/> |
| 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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Democratic Women of the Desert

Report Covering the Period:

From:

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07 | / | 01 | / | 2012 |

To:

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09 | / | 30 | / | 2012 |

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).....

550.00

3223.00

(ii) Unitemized

1860.00

12351.50

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

2410.00

15574.50

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

250.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

2410.00

15824.50

12. Transfers From Affiliated/Other

Party Committees.....

0.00

193.95

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.....

250.00

250.00

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))..... ▶

2660.00

16268.45

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

2660.00

16268.45

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| 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 | 1822.74 | 13441.48 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 1822.74 | 13441.48 |
| 22. Transfers to Affiliated/Other Party Committees..... | 1584.00 | 1584.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 250.00 | 250.00 |
| 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 | 0.00 | 0.00 |
| 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)) .. | 3656.74 | 15275.48 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 3656.74 | 15275.48 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) | 2410.00 | 15824.50 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 2410.00 | 15824.50 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ► | 1822.74 | 13441.48 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ► | 1822.74 | 13441.48 |

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 6 OF 12

☒ 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. Julie Buchanan

Mailing Address 79915 Parkway Esplanade N

City State Zip Code
 La Quinta CA 92253

FEC ID number of contributing
federal political committee.

C

Name of Employer

NA

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 13 / 2012

Transaction ID : SA11AI.4675

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Eduardo Garcia

Mailing Address 83103 Ave 48 Ste 1B/Box 111

City State Zip Code
 Coachella CA 92236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coachella

Occupation

Mayor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

09 / 09 / 2012

Transaction ID : SA11AI.4651

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Josephine Kennedy

Mailing Address 82715 Cota Drive

City State Zip Code
 Indio CA 92211

FEC ID number of contributing
federal political committee.

C

Name of Employer

NA

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

08 / 15 / 2012

Transaction ID : SA11AI.4609

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

480.00

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

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

FOR LINE NUMBER: PAGE 7 OF 12
(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. Dorea Smith

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

NA

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

551.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2012

Transaction ID : SA11AI.4627

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

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)..... ►

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

70.00

550.00

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 8 OF 12

☐ 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. OBAMA FOR AMERICA

Mailing Address PO BOX 8102

City
CHICAGO

State Zip Code
IL 60680

FEC ID number of contributing
federal political committee.

C C00431445

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 26 2012

Transaction ID : SA16.4678

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B.

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

Full Name (Last, First, Middle Initial)

C.

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)..... ►

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

250.00

250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 12

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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 Dr

City Rancho Mirage State CA Zip Code 92270

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2012
Transaction ID : SB21B.4689

Amount of Each Disbursement this Period

1585.35

Full Name (Last, First, Middle Initial)

B. Dorea Smith

Mailing Address 29 Via Cielo Azul

City Palm Desert State CA Zip Code 92260

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2012
Transaction ID : SB21B.4690

Amount of Each Disbursement this Period

86.78

Full Name (Last, First, Middle Initial)

C. Suzan Wilkinson

Mailing Address 78515 Sunrise Canyon Ave

City Palm Desert State CA Zip Code 92211

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2012
Transaction ID : SB21B.4685

Amount of Each Disbursement this Period

35.61

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1707.74

1707.74

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 12

☐ 21b ☒ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of the Desert

Full Name (Last, First, Middle Initial)

A. Democratic Headquarters of the Desert

Mailing Address S Palm Canyon

City State Zip Code
 Cathedral City CA 92234

Purpose of Disbursement

012

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 07 02 2012

Transaction ID : SB22.4681

Amount of Each Disbursement this Period

28.00

Full Name (Last, First, Middle Initial)

B. Democratic Headquarters of the Desert

Mailing Address S Palm Canyon

City State Zip Code
 Cathedral City CA 92234

Purpose of Disbursement

012

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 08 06 2012

Transaction ID : SB22.4682

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Democratic Headquarters of the Desert

Mailing Address S Palm Canyon

City State Zip Code
 Cathedral City CA 92234

Purpose of Disbursement

012

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 08 06 2012

Transaction ID : SB22.4683

Amount of Each Disbursement this Period

28.00

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

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

1556.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 12

| | | | | | |
|------------------------------|--|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" 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. Democratic Headquarters of the Desert

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 04 | | 2012 |

Mailing Address S Palm Canyon

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Cathedral City | CA | 92234 |

Transaction ID : SB22.4684

Purpose of Disbursement

012

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

28.00

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2012

| | |
|--|---|
| <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | | | | |

Mailing Address

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

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

| | |
|----------------|------------------------------------|
| 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:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | | | | |

Mailing Address

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

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

| | |
|----------------|------------------------------------|
| 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).....▶

28.00

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

1584.00

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)

PAGE 12 OF 12

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of the Desert

Full Name (Last, First, Middle Initial)

A. OBAMA FOR AMERICA

Mailing Address PO BOX 8102

City
CHICAGO

State
IL

Zip Code
60680

Purpose of Disbursement

011

Candidate Name

OBAMA FOR AMERICA

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 06 / 2012

Transaction ID : SB23.4691

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

250.00

250.00