

**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

Pacific Palisades Democratic Club Campaign Account

ADDRESS (number and street) ▼

1427 Lincoln Blvd., Ste E

☐ Check if different than previously reported. (ACC)

Santa Monica

CA

90401

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00404301

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☒ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ 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  
04 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
06 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 Richard Wulliger

Signature of Treasurer

Richard Wulliger

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
11 08 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

Pacific Palisades Democratic Club Campaign Account

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		<span style="border: 1px solid black; padding: 2px;">42908.94</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">41877.66</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">12451.86</span>	<span style="border: 1px solid black; padding: 2px;">17769.74</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">54329.52</span>	<span style="border: 1px solid black; padding: 2px;">60678.68</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">9822.98</span>	<span style="border: 1px solid black; padding: 2px;">16172.14</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">44506.54</span>	<span style="border: 1px solid black; padding: 2px;">44506.54</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">250.00</span>	



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

Pacific Palisades Democratic Club Campaign Account

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	2

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).....	2159.00	3509.00
(ii) Unitemized .....	10272.36	14240.24
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12431.36	17749.24
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	12431.36	17749.24
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.).....	20.50	20.50
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)) .....	12451.86	17769.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12451.86	17769.74

**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 .....	9822.98	15522.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9822.98	15522.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	75.00
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	575.00
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)) ..	9822.98	16172.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9822.98	16172.14

**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) .....	12431.36	17749.24
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12431.36	17749.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	9822.98	15522.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	9822.98	15522.14

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB  
.

Form/Schedule: F3XA  
Transaction ID :

Updates to Schedule A and B

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:  
(check only one)

PAGE 7 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Pacific Palisades Democratic Club Campaign Account**

Full Name (Last, First, Middle Initial)

**A. Gary Bettman**

Mailing Address 1690 Palisades Dr

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Same Name

Occupation

Self-Employed Advertising Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

05 / 03 / 2012

**Transaction ID : INCA376**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Gary Bettman**

Mailing Address 1690 Palisades Dr

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Same Name

Occupation

Self-Employed Advertising Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

06 / 03 / 2012

**Transaction ID : INCA440**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. Ralph Erickson**

Mailing Address 18434 Clifftop Way

City

Malibu

State

CA

Zip Code

90265

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

05 / 03 / 2012

**Transaction ID : INCA385**

Amount of Each Receipt this Period

50.00

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

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

185.00

# **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 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Pacific Palisades Democratic Club Campaign Account**

Full Name (Last, First, Middle Initial)

**A. Ralph Erickson**

Mailing Address 18434 Clifftop Way

City State Zip Code  
 Malibu CA 90265

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2012

**Transaction ID : INCA306**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Julie Fasteau**

Mailing Address 17171 Palisades Circle

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not-Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : INCA329**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Julie Fasteau**

Mailing Address 17171 Palisades Circle

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not-Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2012

**Transaction ID : INCA422**

Amount of Each Receipt this Period

120.00

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

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

265.00



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

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

FOR LINE NUMBER: PAGE 9 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Pacific Palisades Democratic Club Campaign Account**

Full Name (Last, First, Middle Initial)

**A. Julie Fasteau**

Mailing Address 17171 Palisades Circle

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not-Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2012

**Transaction ID : INCA518**

Amount of Each Receipt this Period

71.00

Full Name (Last, First, Middle Initial)

**B. Laura Guthman**

Mailing Address 515 Ocean Ave Unit NPHB

City State Zip Code  
 Santa Monica CA 90402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : INCA449**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Joseph Halper**

Mailing Address 17243 Avenida De La Herradura

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2012

**Transaction ID : INCA389**

Amount of Each Receipt this Period

50.00

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

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

221.00

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

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

FOR LINE NUMBER: PAGE 10 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Pacific Palisades Democratic Club Campaign Account**

Full Name (Last, First, Middle Initial)

**A. Joseph Halper**

Mailing Address 17243 Avenida De La Herradura

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2012

**Transaction ID : INCA458**

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

**B. Susan Haskell**

Mailing Address 2008 Palisades Dr

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not-Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2012

**Transaction ID : INCA354**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Susan Haskell**

Mailing Address 2008 Palisades Dr

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not-Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2012

**Transaction ID : INCA455**

Amount of Each Receipt this Period

120.00

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

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

385.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Pacific Palisades Democratic Club Campaign Account**

Full Name (Last, First, Middle Initial)

**A. Susan Haskell**

Mailing Address 2008 Palisades Dr

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not-Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2012

**Transaction ID : INCA465**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Susan Holliday**

Mailing Address 65 Palmera Ave

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 19 / 2012

**Transaction ID : INCA333**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Harriett Leva**

Mailing Address 871 Chattanooga Ave

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Jones Day

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2012

**Transaction ID : INCA481**

Amount of Each Receipt this Period

360.00

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

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

445.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Pacific Palisades Democratic Club Campaign Account**

Full Name (Last, First, Middle Initial)

**A. Robyn Sidoti**

Mailing Address 1007 Kagawa St

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

R.F.F. Family Partnership

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2012

**Transaction ID : INCA408**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Robyn Sidoti**

Mailing Address 1007 Kagawa St

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

R.F.F. Family Partnership

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2012

**Transaction ID : INCA495**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. Robyn Sidoti**

Mailing Address 1007 Kagawa St

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

R.F.F. Family Partnership

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2012

**Transaction ID : INCA494**

Amount of Each Receipt this Period

120.00

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

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

205.00

# **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 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Pacific Palisades Democratic Club Campaign Account**

Full Name (Last, First, Middle Initial)

A. Robyn Sidoti

Mailing Address 1007 Kagawa St

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing federal political committee.

C

Name of Employer

R.F.F. Family Partnership

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

Transaction ID : INCA507

Amount of Each Receipt this Period

33.00

Full Name (Last, First, Middle Initial)

B. Gail Wirth

Mailing Address 160 Charm Acres Pl

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing federal political committee.

C

Name of Employer

Smoyo Resner Productions

Occupation

Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

Transaction ID : INCA373

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Gail Wirth

Mailing Address 160 Charm Acres Pl

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing federal political committee.

C

Name of Employer

Smoyo Resner Productions

Occupation

Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2012

Transaction ID : INCA414

Amount of Each Receipt this Period

250.00

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

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

333.00

# **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 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Pacific Palisades Democratic Club Campaign Account**

Full Name (Last, First, Middle Initial)

**A. Gail Wirth**

Mailing Address 160 Charm Acres Pl

City State Zip Code  
 Pacific Palisades CA 90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Smoyo Resner Productions

Occupation  
 Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 12 2012

**Transaction ID : INCA472**

Amount of Each Receipt this Period

120.00

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)..... ►

120.00

2159.00

**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 15 OF 20

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

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NAME OF COMMITTEE (In Full)

**Pacific Palisades Democratic Club Campaign Account**

Full Name (Last, First, Middle Initial)

**A. Fresh Corn Grill**

Mailing Address 1510 Westwood Blvd

City Los Angeles      State CA      Zip Code 90024

Purpose of Disbursement  
Food for event

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  
06      19      2012
**Transaction ID : EXPB248**

Amount of Each Disbursement this Period

1765.00

Full Name (Last, First, Middle Initial)

**B. Susan Holliday**

Mailing Address 65 Palmera Ave

City Pacific Palisades      State CA      Zip Code 90272

Purpose of Disbursement  
Reimbursed expenses

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  
05      08      2012
**Transaction ID : EXPB238**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Susan Holliday**

Mailing Address 65 Palmera Ave

City Pacific Palisades      State CA      Zip Code 90272

Purpose of Disbursement  
Reimbursed expenses

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  
06      30      2012
**Transaction ID : EXPB253**

Amount of Each Disbursement this Period

43.69

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

2058.69

<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

## Pacific Palisades Democratic Club Campaign Account

### A. Max Hobbs Political Memorabilia

Date of Disbursement

Transaction ID : EXPB242

006

Category/  
Type

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

Amount of Each Disbursement this Period

680.35

### B. Premiere Party Rents

Date of Disbursement

Transaction ID : EXPB247

007

Category/  
Type

Disbursement For:

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

Amount of Each Disbursement this Period

370.74

**C. Sed Quaere, LP**

Date of Disbursement

Transaction ID : EXPB251

001

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

908.00

1959.09



<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

## Pacific Palisades Democratic Club Campaign Account

MM / DD / YYYY

576.38

06 / 30 / 2012

2699.72

3326.10

FEC Schedule B (Form 3X) Rev. 02/2003

**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 18 OF 20

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

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NAME OF COMMITTEE (In Full)

**Pacific Palisades Democratic Club Campaign Account**

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 800 Nicollet Mall

City Minneapolis State MN Zip Code 55402

Purpose of Disbursement  
Merchant account fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 30 2012**Transaction ID : EXPB235**

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

**B. US Bank**

Mailing Address 800 Nicollet Mall

City Minneapolis State MN Zip Code 55402

Purpose of Disbursement  
Merchant account fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 31 2012**Transaction ID : EXPB244**

Amount of Each Disbursement this Period

47.23

Full Name (Last, First, Middle Initial)

**C. US Bank**

Mailing Address 800 Nicollet Mall

City Minneapolis State MN Zip Code 55402

Purpose of Disbursement  
Merchant account fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 30 2012**Transaction ID : EXPB254**

Amount of Each Disbursement this Period

75.32

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

157.55

<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

## Pacific Palisades Democratic Club Campaign Account

Category/  
Type

475.50

Category/  
Type

527.40

Category/  
Type

924.00

1926.90

9428.33

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 20 OF 20

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Pacific Palisades Democratic Club Campaign Account

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sed Quaere, LP

Nature of Debt (Purpose):  
Accounting services

Mailing Address 1427 Lincoln Blvd., Ste E

City State

Zip Code

Santa Monica

CA

90401

Outstanding Balance Beginning This Period

250.00

Transaction ID : PAYD234

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

250.00

2) **TOTALS** This Period (last page this line number only)..... ►

250.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

250.00