1. NAME OF Conditional Stretch (n full)       USE FEC MALLING LABEL over the lines       Exampledit typing, type over the lines         Stanislaus County Democratic Central Committee - Federal	FEC FORM 3X	AN	PORT O D DISBL Other Than Ar	JRSEM	ENTS	ee		Office Use Only	
ADDRESS (number and strout) <ul> <li>S429 Madison Avenue</li> <li>Check if different than previously reported. (ACC)</li> <li>Segmento</li> <li>Saramento</li> <li>Sarament</li></ul>						, type			
ADDRESS (number and street)									
than previously reported. (ACC)       Sacramento       CITY A       STATE A       ZIPCODE A         2. FEC IDENTIFICATION NUMBER       CITY A       STATE A       ZIPCODE A         C00427280       3. IS THIS       NEW OR       AMENDED (A)         4. TYPE OF REPORT (Choose One)       (P) Monthly Reports:       April 15 COULDENTIFICATION NUMBER       Very Counterly Reports:       New OR       Aug 20 (M5)       Aug 20 (M6)       Nov 20 (M1)         (a) Quarterly Report(C1)       July 15 COULTED (C2)       Mar 20 (M3)       Jul 20 (M7)       Oct 20 (M10)       Jan 31 (YE)         (b) Quarterly Report(C2)       Quarterly Report(C2)       Mar 20 (M4)       Jul 20 (M7)       Oct 20 (M10)       Jan 31 (YE)         (c) Uarterly Report(C2)       Quarterly Report(C2)       Mar 20 (M4)       Jul 20 (M7)       Oct 20 (M10)       Jan 31 (YE)         (c) Uarterly Report(C2)       Quarterly Report(C2)       Primary (12P)       X General (12G)       Runoff (12R)         (c) Uarterly Report(C1)       July 31 Midy Year       Report for the:       Convention (12C)       Special (30S)         (d) 30-Day       Report for the:       Convention (12C)       Special (30S)       Runoff (30R)       Special (30S)         1 certify that I have examined this Report and to the best of my knowledge and belif it is true, correct and complete.       Type	¥	street)	29 Madison Aveni	Je					<u> </u>
C00427260       3. IS THIS REPORT       X       NEW (N)       OR       AMENDED (A)         4.       TYPE OF REPORT (Choose One)       (b)       Monthly Report       Feb 20 (M2)       May 20 (M5)       Aug 20 (M8)       Nov 20 (M11) (Nov Eduction Vear Eduction         (a)       Quarterly Reports:       (b)       Mar 20 (M3)       Jun 20 (M6)       Sep 20 (M9)       Doc 20 (M10)         July 15       Quarterly Report(Q2)       (c)       12-Day       Primary (12P)       X       General (12G)       Runoff (12R)         Quarterly Report(Q2)       October 15       Quarterly Report(Q2)       Pirimary (12P)       X       General (12G)       Runoff (12R)         January 31       General (12G)       Runoff (12R)       Report Non-Report (12C)       Special (12S)       Special (12S)         July 31 Mid-Year       Report Non-Report (12C)       Special (13G)       Runoff (30R)       Special (30S)         Termination Report (TER)       10       01       2010       through       10       13       2010         Icertify 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       Rita Copeland       Date       10       21       2010         NOTE : Submission of false, erroneous, or incomplete information may s	than previous	y i Sa	cramento					95841 	
A. TYPE OF REPORT       (N)       OR       (A)         4. TYPE OF REPORT (Choose One)       (b)       Monthly Report       Feb 20 (M2)       May 20 (M5)       Aug 20 (M6)       Nov 20 (M11) (Mar 20 (M3)         (a)       Quarterly Reports:       Mar 20 (M3)       Jun 20 (M6)       Sep 20 (M9)       Dec 20 (M12) (Mar 20 (M4)       Jul 20 (M7)       Oct 20 (M10)       Jan 31 (YE)         (a)       July 15 Quarterly Report(Q2)       October 15 Quarterly Report(Q3)       PRE-Election Report for the:       Convention (12C)       Special (12G)       Runoff (12R)         (d)       July 31 Mid-Year Report (Nor hecicion Year Only) (MY)       Election on       11       0.4       2 0 0.8       in the State of       CA         5.       Covering Period       10       0.1       2 0 10       through 10       13       2 0 10         Icertify 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       Rita Copeland       Date       10       21       2 0 10         NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 4379.       FEC FORM 3X	2. FEC IDENTIFICAT	ION NUMBER	▼	CITY 🛋		S	STATE	ZIPCOE	)e 🔺
(Choose One)       Report       Feb 20 (M2)       May 20 (M5)       Aug 20 (M8)       (Non-Election Feer Only)         (a)       Quarterly Reports:       April 15 Quarterly Report(Q1)       Jul 20 (M7)       Oct 20 (M10)       Jan 31 (YE)         (b)       Guarterly Report(Q2)       Oct 20 (M10)       Jan 31 (YE)       General (12G)       Runoff (12R)         (c)       12-Day       Primary (12P)       X       General (12G)       Runoff (12R)         (c)       12-Day       Primary (12P)       X       General (12G)       Runoff (12R)         (d)       30-Day       Presort for the:       Convention (12C)       Special (12S)       Special (30S)         (d)       30-Day       Post -Election       General (30G)       Runoff (30R)       Special (30S)         Report (Non-election       General (30G)       Runoff (30R)       Special (30S)         Termination Report       10       01       2010       through       10       13       2010         Icertify 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       Rita Copeland         Signature of Treasurer       Electronically Filed by       Rita Copeland       Date       10       21       2010         <	C00427260		]					ENDED	
J. Covering Fend       Lineage         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       Rita Copeland         Signature of Treasurer       Electronically Filed by       Rita Copeland         NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.       FEC FORM 3X         Office       Use       Image: Description of the penalties of 2 U.S.C 437g.	(Choose One) (a) Quarterly Rep April 15 Quarterly July 15 Quarterly October Quarterly January 3 Quarterly July 31 M Report(N Year Onl	orts: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) lid-Year on-election y) (MY)	(c) 12-Day PRE-Elect Report for (d) 30-Day Post -Elect	Mar 20 (M3 Apr 20 (M4) ion the:	Primary (12F Convention (	Jun 20 (M6) Jul 20 (M7) ) X 12C) 0 4 2	General (1 Special (1 2 0 0 8	20 (M9) 20 (M10) 2G) 2G) 2G) in the State of OR) In the state of the s	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R) f CA Special (30S)
Signature of Treasurer       Electronically Filed by       Rita Copeland       Date       10       21       2010         NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.       FEC FORM 3X         Office       Use       10       21       2010	I certify that I have exam	ined this Report	and to the best of			<u> </u>	<u> </u>	2010	
Office Use FEC FORM 3X	Signature of Treasurer	Electronically	Filed by Rita Co	•	bioot the second				
	Office Use	aise, erroneous,	or incomplete info	rmation may si	ubject the pers	on signing this	s Report to the	FEC FOR	M 3X

Image# 10991767563

FEC Form 3X (Rev. 02/2003)

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name Stanislaus County Democratic Central Committee - Federal мм DD YYYY ММ D Y D Υ 10 2010 10 01 2010 13 From: Report Covering the Period: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 6. 20<sup>1</sup>0<sup>1</sup> 11975.41 January 1 (b) Cash on Hand at 6200.55 Begining of Reporting Period ..... 0.00 13999.97 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6200.55 25975.38 6(a) and 6(c) for Column B) ..... 1269.46 21044.29 Total Disbursements (from Line 31) ..... 7. Cash on Hand at Close of 8. **Reporting Period** 4931.09 4931.09 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed то the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed ΒY the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

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

FE6AN026

## Image# 10991767564

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Stanislaus County Democratic Central Committee - Federal

F	eport Covering the Period: From:	01 2010	Fo: M M D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	(a) Intended SP ersons Office Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	630.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii) <b>&gt;</b>	0.00	630.00
	(b) Political Party Committees	0.00	0.00
	<ul> <li>(c) Other Political Committees         <ul> <li>(such as PACs)</li></ul></li></ul>	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	630.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received	0.00	0.00
	Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
6.	Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
З.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	13369.97
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	13369.97
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	13999.97
).	Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	630.00

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#### Image# 10991767565

## **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)	of Disbursements	4 / 9		
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4)	123.43	4066.15		
(i) Federal Share		15006.45		
<ul><li>(ii) Non-Federal Share</li><li>(b) Other Federal Operating</li></ul>	464.34	15296.45		
Expenditures	681.69	681.69		
<ul><li>(c) Total Operating Expenditures</li><li>(add 21(a)(i), (a)(ii) and (b))</li></ul>	1269.46	20044.29		
22. Transfers to Affiliated/Other Party Committees	0.00	0.00		
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	1000.00		
24. Independent Expenditure	0.00	0.00		
(use Schedule E) 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	0.00		
(use Schedule F)				
26. Loan Repayments Made	0.00	0.00		
27. Loans Made 28. Refunds of Contributions To:	0.00	0.00		
(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)) <b>&gt;</b>	0.00	0.00		
29. Other Disbursements	0.00	0.00		
30. Federal Election Activity (2 U.S.C 431(20))				
(a) Shared 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))	1269.46	21044.29		
32. Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	805.12	5747.84		

FE6AN026

# DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
tal Contributions (other than loans) m Line 11(d), page 3)	0.00	630.00
 tal Contribution Refunds om Line 28(d))	0.00	0.00
t Contributions (other than loans) Ibtract Line 34 from Line 33)	0.00	630.00
tal Federal Operating Expenditures ld Line 21(a)(i) and Line 21(b))	805.12	4747.84
isets to Operating Expenditures om Line 15, page 3)	0.00	0.00
Operating Expenditures	805.12	4747.84

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5/9

	CHEDULE B (FEC Form 3X)	Use separate schedule(s)					INE NUMBER: PAGE 6/9								
_	EMIZED DISBURSEMENTS	Detailed S	category of the Summary Page		X	21b 27		22 28a		23 28b	F	24 28c		25 29	23
	y Information copied from such Reports and Statem for commercial purposes, other than using the name														3
Ŕ	NAME OF COMMITTEE (In Full)		, p					•							
	Stanislaus County Democratic Central Cor	mmittee - F	Federal												
<u> </u>	Full Name (Last, First, Middle Initial) Michael Burtch							Date o	of Di	isburs	en		869		
	Mailing Address 461 Hedstrom							1 <sup>M</sup> 0	M	/ D.	13	3 / 1	Ž	0 Ì (	)
	City Turlock	State CA	Zip Code 95382					Amou	nt o	f Each	ו D	)isburse	-	-	
	Purpose of Disbursement Buttons and Bumper Stickers Candidate Name				006			L.					3	65.00	)
				С	ateg Type										
	Senate President	ement For: Primary Other (spe	General cify) ▼												
	State: District: Full Name (Last, First, Middle Initial)														
	Democratic Party of San Fernando Valley							Date o		isburs	en				
	Mailing Address 1212 S Victory Blvd							10			13	Š ′ L	Ź	0 Ì (	)
	City Burbank	State CA	Zip Code 91502					Amou	nt o	f Each	۱D	isburse		-	
	Purpose of Disbursement Buttons and Bumper Stickers				006			L.					3	65.00	)
	Candidate Name Democratic Party of Fernan			С	ateg Type			мем	٥ı	TEM	1				
	Senate President	ement For: Primary Other (spe	General cify) <b>V</b>						01		1				
	State:         District:           Full Name (Last, First, Middle Initial)						+ -	Trans	acti	on ID	:	EXPB	870		
	Michael Burtch							Date o	of Di	isburs	en	nent			14
	Mailing Address 461 Hedstrom							1 <sup>M</sup> 0	M	/ D	13	8 /	2	0 Ì (	) *
	City Turlock	State CA	Zip Code 95382					Amou	nt o	f Each	ו D	isburse		-	
	Purpose of Disbursement Phones, Maps and Postage				006			L.					3	16.69	
	Candidate Name			С	ateg Type	,									
	Senate President	ement For: Primary Other (spe	General												
_	State: District:														
s	UBTOTAL of Disbursements This Page (optional)					•				•			68	81.69	
т	OTAL This Period (last page this line number only)					►									

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FEC Schedule B ( Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)				E NUMBER: PAGE 7/9							
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	<u> </u>	<u>`</u>	b	nly one) 22 23 28a 28b			24 28c		25 29	$\square$	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			ny pei	son fo	or the pu	rpose	e of so	Diciting of	ontrik	outions		
NAME OF COMMITTEE (In Full) Stanislaus County Democratic Central Co	nmittee - Federal											
Full Name (Last, First, Middle Initial) MetroPCS Store					Trans Date o			EDTE ement	3103	EXPE	3870	
Mailing Address 2225 Plaza Parkway, Ste	e. I-1B				1 <sup>M</sup> 0	M /	<sup>D</sup> 1	<sup>D</sup> 3	Ý Ž	0 Ì (	) <sup>×</sup>	
City Modesto	State Zip Code CA 95350				Amou	nt of	Each	Disburs	-	-		
Purpose of Disbursement Phones Candidate Name			006 tegory		L.				2	46.00	)	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼	Т	<sup>r</sup> ype		[MEM	דו ס	EM]					
Full Name (Last, First, Middle Initial) Stockton Blue Repographics					Date o		sburse	EDTE ement		EXPE		
Mailing Address 1801 H Street, Ste. D 4					10							
City Modesto	State Zip Code CA 95354				Amou	nt of	Each	Disburs		t this I 30.62		
Purpose of Disbursement Maps Candidate Name			006 tegory	/	L					00.02	<u>,</u> ,,	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼	<u> </u>	Гуре		[MEM	דו ס	EM]					
Full Name (Last, First, Middle Initial) US Postmaster					Date o	of Dis	sburse		3104	EXPE	3870	
Mailing Address Main Post Office					1 <sup>M</sup> 0	M /	<sup>D</sup> 1	<sup>D</sup> 3	Ý Ž	0 Ì (	) <sup>×</sup>	
City Modesto	State Zip Code CA 95355				Amou	nt of	Each	Disburs	emen	t this I	Perio	
Purpose of Disbursement Postage			006		L.					40.07	7	
Candidate Name Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼		tegory Type	/	(MEM	דו ס	EM]					
SUBTOTAL of Disbursements This Page (optional)				•						0.00	)	
				_		0				81.69		

FEC Schedule B ( Form 3X) (Revised 02/2003)

SCHEDULE D (FEC Form 3X)		(Use separate	PAGE 8 / 9
		schedule(s)	
DEBTS AND OBLIGATIONS	for each numbered line)	(check only one) 9	
Excluding Loans           NAME OF COMMITTEE (In Full)			X 10
Stanislaus County Democratic Centra	al Committee - Federal		
<b>A.</b> Full Name (Last, First, Middle Initial) River City Business Services	of Debtor or Creditor	Bookkeep	ebt (Purpose): ng Services, Sof- e, Postage and Te-
Mailing Address 5429 Madison Ave	nue	lephone	
City State Sacramento CA	ZIP Code 95841		
Outstanding Balance Beginning This I	Period	Tra	nsaction ID: PAY:D:865
503.25			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	503.25		0.00
	503.23		0.00
1) SUBTOTALS This Period This Page (	optional)		0.00
2) TOTALS This Period (last page this line	number only)		0.00
3) TOTAL OUTSTANDING LOANS from	m Schedule C (last page only)		0.00
4) ADD 2) and 3) and carry forward to app	propriate line of Summary Page (last page only	<sub>/)</sub> ►	0.00

FE6AN026

FEC Schedule D ( Form 3X) (Revised 02/2003)

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE 9 / 9

	-	IY		FOR	LINE 21a OF FORM 3X
ME OF COMMITTEE (In Full)					
anislaus County Democ	ratic Central Cor	nmittee - Federal			
A. Full Name (Last, First, M	/liddle Initial)			Type of Allocated Activity:	
Michael Burtch				Administrative 🛄 Fundra	aising 🔄 Exempt
Mailing Address 461 Hedstrom				Voter Drive Direct	Candidate Support
City	State	Zip Code		Public Comm (ref to party	only) by PAC
Turlock	CA	95382	001	Allocated Activity or Event Ye	ar-To-Date
Purpose of Disbursement: Ink Cartridge			Category/ Type	15	9362.60
Activity or Event Identifier: Administrative			Type	Date 10 / 07 /	
FEDERAL S	HARE	+ NONFEDERAL	SHARE	Transaction ID: EXP:H4:86 = TOTAL AMOU	
	17.75		66.77		84.52
B. Full Name (Last, First, N	/iddle Initial)			Type of Allocated Activity:	
OfficeMax	,			Administrative Eundra	aising 🗌 Exempt
Mailing Address					Candidate Support
3401 Dale Rd, Building	,	Zie Oede	1	Public Comm (ref to party	
City Modesto	State CA	Zip Code 95355	001	Allocated Activity or Event Ye	., .
Purpose of Disbursement: Ink Cartridge	0/1		Category/		9362.60
Activity or Event Identifier:			Туре	Date 1.0 07	Y Y Y Y
Administrative [MEMO ITEM]				Date 1.0 0.7 Transaction ID: EDT:H4:10	2010
FEDERAL S	HARE	+ NONFEDERAL	SHARE	= TOTAL AMOU	
	17.75		66.77		84.52
			00.77		
C. Full Name (Last, First, N	/liddle Initial)			Type of Allocated Activity:	
River City Business Se	ervices			Administrative 🗌 Fundra	aising 🗌 Exempt
Mailing Address 5429 Madison Avenue				Voter Drive Direct	Candidate Support
City	State	Zip Code		Public Comm (ref to party	only) by PAC
Sacramento	CA	95841	001	Allocated Activity or Event Ye	
Purpose of Disbursement: Bookkeeping Services,	Software Fee, F	Postage and Te-	Category/	19	9362.60
Activity or Event Identifier: Administrative			Туре	Date 10 02	<sup>Y</sup> 2010
				Transaction ID: PAY:H4:86	
FEDERAL S	HARE	+ NONFEDERAL	_ SHARE	= TOTAL AMOU	NT
	105.68		397.57		503.25
<b>IBTOTAL</b> of Allocated Feder	al and NonFederal	Activity This Page			
FEDERAL S		+ NONFEDERAL	SHARE	= TOTAL AMOU	NT
	123.43		464.34		87.77
TAL This Period (last page	for each line only)(F	-ederal share to 21(a)(i) and	d NonFederal shar	re to 21(a)(i))	
FEDERAL S		NONFEDER		TOTAL AMOU	NT
	123.43		464.34	5	87.77

FEC Schedule H4 (Form 3X) (Revised 12/2004)