22037820562

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: Typing, type over the lines. — 12FEAM5

STEVE SCHNEIDER
ALAMEDA DEMOCRATIC CLUB

ADDRESS (number and street) ▼
1411 CURTIS AVENUE

Check if different than previously reported (ACO)

ALAMEDA CA 94501

CITY ▲ STATE ▲ ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼
C00302711

3. IS THIS REPORT NEW (N) OR AMENDED (A)
N

4. TYPE OF REPORT (Choose One)

(a) 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)

(b) 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)

(c) 12-Day PRE-Election Report for the: Primary (12P) — General (12G) — Runoff (12R) — Convention (12C) — Special (12S)
Election on 11 05 2002 in the State of CA

(d) 30-Day POST-Election Report for the: General (30G) — Runoff (30R) — Special (30S)
Election on ____ in the State of ____

5. Covering Period 10 16 2002 through 10 24 2002

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: Steve Schneider

Signature of Treasurer: [signature] Date 10 24 2002

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 (Revised 1/01)

22037820563

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

ALHAMBRA DEMOCRATIC CLUB

Report Covering the Period: From: 01 / 01 / 2002 To: 10 / 24 / 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2002		
(b) Cash on Hand at Beginning of Reporting Period	145,028	
(c) Total Receipts (from Line 19)	200,000	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	345,028	
7. Total Disbursements (from Line 30)	307,810	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37,198	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on 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

22037820564

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

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)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)	3,078.30	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) ▶	3,078.30	
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	3,078.30	

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	2,025.00	
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	2,025.00	
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶		
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶		

22037820565

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 7

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
ALHAMBRA DEMOCRATIC CLUB

A.
Full Name (Last, First, Middle Initial): LARRY D MILLER
Mailing Address: 500 N ATLANTIC BLVD #112
City: ALHAMBRA State: CA Zip Code: 91801
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED
Occupation: N/A
Receipt For: ☐ Primary ☐ General ☑ Other (specify) GENERAL OPERATING EXP
Aggregate Year-to-Date
Date of Receipt: 10 / 23 / 2023
Amount of Each Receipt this Period: 250.00

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
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
Amount of Each Receipt this Period

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

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22037820566

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 OF 6
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): ALHAMBRA DEMOCRATIC CLUB

FEC IDENTIFICATION NUMBER: C00302711

Full Name (Last, First, Middle Initial) of Payee: UNISON PRINTING
Mailing Address: P O BOX 3430
City: ALHAMBRA State: CA Zip Code: 91803
Date: 10 23 2002
Amount: 45860

Purpose of Expenditure: BROCHURE
Category/Type: 006
Name of Federal Candidate supported or opposed by expenditure: ADAM B. SCHIFF
Office Sought: [x] House [ ] Senate [ ] Presidential
State: CA District: 29
Check One: [x] Support [ ] Oppose

Full Name (Last, First, Middle Initial) of Payee: POSTMASTER
Mailing Address:
City: ALHAMBRA State: CA Zip Code:
Date: 10 23 2002
Amount: 241970

Purpose of Expenditure: MAILING BROCHURE
Category/Type: 006
Name of Federal Candidate supported or opposed by expenditure: ADAM B. SCHIFF
Office Sought: [x] House [ ] Senate [ ] Presidential
State: CA District: 29
Check One: [x] Support [ ] Oppose

Full Name (Last, First, Middle Initial) of Payee:
Mailing Address:
City: State: Zip Code:
Date:
Amount:

Purpose of Expenditure:
Category/Type:
Name of Federal Candidate supported or opposed by expenditure:
Office Sought: [ ] House [ ] Senate [ ] Presidential
State: District:
Check One: [ ] Support [ ] Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 3,078,30
(b) SUBTOTAL of Unitemized Independent Expenditures ▶
(c) TOTAL Independent Expenditures ▶ 3,078,30

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Signature:
Date: 10 24 2002

Subscribed and sworn to before me this ____ day of ____

My Commission expires:

NOTARY PUBLIC

FEC Schedule E (Form 3X) (Revised 1/01)
FE24/1042

22037820567

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR SHARED FEDERAL AND NON-FEDERAL ADMINISTRATIVE EXPENSES AND GENERIC VOTER DRIVE COSTS Oct 16 - Oct 24 - 2002

NAME OF COMMITTEE (In Full)

ALHAMBRA DEMOCRATIC CLUB

USE ONLY ONE SECTION

A. NATIONAL PARTY COMMITTEES

FIXED FEDERAL PERCENTAGE (Check the appropriate line and enter % in box to right) ..... %

☐ Presidential Year (65%)

☐ All Other Years (60%)

B. HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

☐ **MINIMUM FEDERAL PERCENTAGE** (65%) (If checked, enter 65% in box to right) ..... %

OR

☐ **FUNDS EXPENDED:**

- Estimated Direct Candidate Support -- Federal ..... %
- Estimated Direct Candidate Support -- Non-Federal ..... %

ADJUSTMENTS TO FUNDS EXPENDED:

Actual Direct Candidate Support -- Federal ..... %

Actual Direct Candidate Support -- Non-Federal .....

NOTE: Funds expended must be used if the Federal proportion is greater than 65% in any year.

C. SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:

- Estimated Direct Candidate Support -- Federal ..... %
- Estimated Direct Candidate Support -- Non-Federal ..... %

ADJUSTMENTS TO FUNDS EXPENDED:

Actual Direct Candidate Support -- Federal ..... %

Actual Direct Candidate Support -- Non-Federal .....

D. STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

Check all Offices appearing on the next General Election Ballot:

			NUMBER OF POINTS
1.	President	☐ (1 Point)	
2.	U.S. Senate	☐ (1 Point)	
3.	U.S. Congress	☑ (1 Point)	1
4.	SUBTOTAL -- Federal (ADD 1, 2, AND 3)		1
5.	Governor	☑ (1 Point)	1
6.	Other Statewide Office(s)	☑ (1 or 2 Points)	2
7.	State Senate	☑ (1 Point)	1
8.	State Representative	☑ (1 Point)	1
9.	Local Candidates	☑ (1 or 2 Points)	2
10.	Extra Non-Federal Point	☐ (1 Point)	
11.	SUBTOTAL -- Non-Federal (Add 5, 6, 7, 8, 9, and 10)		7
12.	TOTAL POINTS (Line 4 plus Line 11)		8

FEDERAL ALLOCATION = Line 4 divided by Line 12 ..... 12.50 %

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
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☐	Registered/Certified Mail	POSTMARKED (R/C)
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☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

PREPARER

10/26/02
DATE PREPARED

(6/2000)