

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
North County Democratic Unity Political Action Coalition

ADDRESS (number and street) 1531 Grand Avenue
Suite D
 Check if different than previously reported. (ACC)
San Marcos CA 92078-2463

2. **FEC IDENTIFICATION NUMBER** C00382861
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 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2009 through 12 31 2009

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 Xavier Martinez

Signature of Treasurer Electronically Filed by Xavier Martinez Date 01 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.

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
North County Democratic Unity Political Action Coalition

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		24508.64
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	23252.73									
(c) Total Receipts (from Line 19)	4408.84	11946.82								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27661.57	36455.46								
7. Total Disbursements (from Line 31)	4196.89	12990.78								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	23464.68	23464.68								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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

Write or Type Committee Name

North County Democratic Unity Political Action Coalition

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	773.88	1653.88
(ii) Unitemized	3634.96	9874.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4408.84	11528.84
(b) Political Party Committees	0.00	125.00
(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)	4408.84	11653.84
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	292.98
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 Transfer (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))	4408.84	11946.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4408.84	11946.82

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4136.89	12930.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	4136.89	12930.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	60.00	60.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) 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))..	4196.89	12990.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4196.89	12990.78

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 17

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)	4408.84	11653.84
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4408.84	11653.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4136.89	12930.78
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	292.98
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4136.89	12637.80

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

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)
 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)
North County Democratic Unity Political Action Coalition

A. Full Name (Last, First, Middle Initial)
John Carr
 Mailing Address PO Box 676175
 City State Zip Code
 Rcho Santa Fe CA 92067-6175
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 7 / 2 0 0 9
Transaction ID: SA11AI-408-1344-c
 Amount of Each Receipt this Period
 200.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Provident Partners Occupation Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

B. Full Name (Last, First, Middle Initial)
James Dooley
 Mailing Address 1270 Olive Avenue
 City State Zip Code
 Fallbrook CA 92028-1569
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 0 2 / 2 0 0 9
Transaction ID: SA11AI-54-1328-c
 Amount of Each Receipt this Period
 20.00
 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 ▼ 698.88

C. Full Name (Last, First, Middle Initial)
James Dooley
 Mailing Address 1270 Olive Avenue
 City State Zip Code
 Fallbrook CA 92028-1569
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 3 / 2 0 0 9
Transaction ID: SA11AI-54-1332-c
 Amount of Each Receipt this Period
 10.00
 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 ▼ 698.88

SUBTOTAL of Receipts This Page (optional) ► 230.00
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 7 / 17

(check only one)

<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

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NAME OF COMMITTEE (In Full)
North County Democratic Unity Political Action Coalition

A.

Full Name (Last, First, Middle Initial)
James Dooley

Mailing Address 1270 Olive Avenue

City State Zip Code
Fallbrook CA 92028-1569

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

Name of Employer Occupation
None Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 698.88

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2009

Transaction ID: SA11AI-54-1351-c

Amount of Each Receipt this Period

23.88

B.

Full Name (Last, First, Middle Initial)
James Dooley

Mailing Address 1270 Olive Avenue

City State Zip Code
Fallbrook CA 92028-1569

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

Name of Employer Occupation
None Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 698.88

Date of Receipt

M M / D D / Y Y Y Y
09 / 12 / 2009

Transaction ID: SA11AI-54-1355-c

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)
James Dooley

Mailing Address 1270 Olive Avenue

City State Zip Code
Fallbrook CA 92028-1569

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

Name of Employer Occupation
None Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 698.88

Date of Receipt

M M / D D / Y Y Y Y
11 / 04 / 2009

Transaction ID: SA11AI-54-1369-c

Amount of Each Receipt this Period

50.00

Contribution: Holiday Dinner

SUBTOTAL of Receipts This Page (optional)

183.88

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 8 / 17
	<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	

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NAME OF COMMITTEE (In Full)
North County Democratic Unity Political Action Coalition

A.	Full Name (Last, First, Middle Initial) James Dooley		Date of Receipt
	Mailing Address 1270 Olive Avenue		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Fallbrook	CA	92028-1569
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI-54-1375-c
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="698.88"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) James Dooley		Date of Receipt
	Mailing Address 1270 Olive Avenue		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Fallbrook	CA	92028-1569
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI-54-1406-c
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="698.88"/>	<input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) James Dooley		Date of Receipt
	Mailing Address 1270 Olive Avenue		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Fallbrook	CA	92028-1569
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI-54-1416-c
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="698.88"/>	<input type="text" value="320.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="360.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="773.88"/>

**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)
North County Democratic Unity Political Action Coalition

A. Complete Campaigns	Full Name (Last, First, Middle Initial) Complete Campaigns	Transaction ID: SB21B-64-1441-e Date of Disbursement
	Mailing Address 3635 Ruffin Road Floor 3	<input type="text" value="07"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City San Diego State CA Zip Code 92123-1880	Amount of Each Disbursement this Period
	Purpose of Disbursement Computer Software Candidate Name	<input type="text" value="86.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Complete Campaigns	Full Name (Last, First, Middle Initial) Complete Campaigns	Transaction ID: SB21B-64-1423-e Date of Disbursement
	Mailing Address 3635 Ruffin Road Floor 3	<input type="text" value="12"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City San Diego State CA Zip Code 92123-1880	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees Candidate Name	<input type="text" value="10.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Complete Campaigns	Full Name (Last, First, Middle Initial) Complete Campaigns	Transaction ID: SB21B-64-1422-e Date of Disbursement
	Mailing Address 3635 Ruffin Road Floor 3	<input type="text" value="12"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City San Diego State CA Zip Code 92123-1880	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees Candidate Name	<input type="text" value="0.25"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="96.25"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
North County Democratic Unity Political Action Coalition

A. Complete Campaigns Full Name (Last, First, Middle Initial) Mailing Address 3635 Ruffin Road Floor 3 City San Diego State CA Zip Code 92123-1880 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-64-1431-e Date of Disbursement 12 / 17 / 2009
	Amount of Each Disbursement this Period 20.00 Category/Type: 001

B. Complete Campaigns Full Name (Last, First, Middle Initial) Mailing Address 3635 Ruffin Road Floor 3 City San Diego State CA Zip Code 92123-1880 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-64-1432-e Date of Disbursement 12 / 17 / 2009
	Amount of Each Disbursement this Period 5.00 Category/Type: 001

C. Complete Campaigns Full Name (Last, First, Middle Initial) Mailing Address 3635 Ruffin Road Floor 3 City San Diego State CA Zip Code 92123-1880 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-64-1440-e Date of Disbursement 12 / 17 / 2009
	Amount of Each Disbursement this Period 5.00 Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) ▶	30.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
North County Democratic Unity Political Action Coalition

<p>A. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 3635 Ruffin Road Floor 3</p> <p>City San Diego State CA Zip Code 92123-1880</p> <p>Purpose of Disbursement Computer Software Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-64-1439-e Date of Disbursement 12 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 430.00</p> <p>001 Category/Type</p>
<p>B. Fallbrook Golf Club</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 2757 Gird Road</p> <p>City Fallbrook State CA Zip Code 92028-8897</p> <p>Purpose of Disbursement Dinner Meeting with Members Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1902-1359-e Date of Disbursement 10 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>001 Category/Type</p>
<p>C. OCI Retail Computer Sciences</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 1651 S Juniper Street</p> <p>City Escondido State CA Zip Code 92025-6127</p> <p>Purpose of Disbursement Computer Software Services Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -</p>	<p>Transaction ID: SB21B-283-1325-e Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 110.82</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

790.82

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)

PAGE 12 / 17

<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)
North County Democratic Unity Political Action Coalition

A.	Full Name (Last, First, Middle Initial) John Carr	Transaction ID: SB21B-408-1339-e Date of Disbursement																			
	Mailing Address PO Box 676175	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	2		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	2		2	0	9													
	City Rcho Santa Fe State CA Zip Code 92067-6175	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Web Hosting Candidate Name	<table border="1"><tr><td>169.75</td></tr></table>	169.75																		
169.75																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>001</td></tr><tr><td>Category/ Type</td></tr></table>	001	Category/ Type																	
001																					
Category/ Type																					

B.	Full Name (Last, First, Middle Initial) John Carr	Transaction ID: SB21B-408-1429-e Date of Disbursement																			
	Mailing Address PO Box 676175	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	9													
	City Rcho Santa Fe State CA Zip Code 92067-6175	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Internet Hosting Candidate Name	<table border="1"><tr><td>104.85</td></tr></table>	104.85																		
104.85																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>001</td></tr><tr><td>Category/ Type</td></tr></table>	001	Category/ Type																	
001																					
Category/ Type																					

C.	Full Name (Last, First, Middle Initial) James Dooley	Transaction ID: SB21B-54-1372-e Date of Disbursement																			
	Mailing Address 1270 Olive Avenue	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	2		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	2		2	0	9													
	City Fallbrook State CA Zip Code 92028-1569	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PO Box Rental Candidate Name	<table border="1"><tr><td>44.00</td></tr></table>	44.00																		
44.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>001</td></tr><tr><td>Category/ Type</td></tr></table>	001	Category/ Type																	
001																					
Category/ Type																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>318.60</td></tr></table>	318.60
318.60		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)
North County Democratic Unity Political Action Coalition

<p>A. Full Name (Last, First, Middle Initial) James Dooley</p> <p>Mailing Address 1270 Olive Avenue</p> <p>City Fallbrook State CA Zip Code 92028-1569</p> <p>Purpose of Disbursement Reimburse: Fundraising Event: Food/Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-54-1412-e Date of Disbursement 12 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 913.92</p> <p>003 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Hukilau at Fallbrook GC</p> <p>Mailing Address 2757 Gird Road</p> <p>City Fallbrook State CA Zip Code 92028-8897</p> <p>Purpose of Disbursement Fundraising Event: Food/Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1924-75-V Date of Disbursement 12 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 912.92</p> <p>003 Category/ Type</p> <p>[MEMO ITEM] Subitemization of James Dooley</p>
<p>C. Full Name (Last, First, Middle Initial) U-Haul Storage Facility</p> <p>Mailing Address Mission Road</p> <p>City Escondido State CA Zip Code 92025</p> <p>Purpose of Disbursement Off-Site Storage Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-1869-72-V Date of Disbursement 10 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 257.85</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Xavier Martinez</p>

SUBTOTAL of Disbursements This Page (optional) ▶

913.92

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)
North County Democratic Unity Political Action Coalition

A.	Full Name (Last, First, Middle Initial) Xavier Martinez	Transaction ID: SB21B-133-1360-e Date of Disbursement 10 / 15 / 2009
	Mailing Address 1531 Grand Avenue Suite D	Amount of Each Disbursement this Period 257.85
	City San Marcos State CA Zip Code 92078-2463	
	Purpose of Disbursement Reimburse: Off-Site Storage Rental (See Memo) Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Xavier Martinez	Transaction ID: SB21B-133-1373-e Date of Disbursement 11 / 13 / 2009
	Mailing Address 1531 Grand Avenue Suite D	Amount of Each Disbursement this Period 89.95
	City San Marcos State CA Zip Code 92078-2463	
	Purpose of Disbursement Reimburse: Off-Site Storage Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) U-Haul Storage Facility	Transaction ID: SB21B-1869-74-V Date of Disbursement 11 / 13 / 2009
	Mailing Address Mission Road	Amount of Each Disbursement this Period 89.95
	City Escondido State CA Zip Code 92025	
	Purpose of Disbursement Off-Site Storage Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Subitemization of Xavier Martinez

SUBTOTAL of Disbursements This Page (optional)	▶	347.80
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)

PAGE 15 / 17

<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)
North County Democratic Unity Political Action Coalition

A.	Full Name (Last, First, Middle Initial) Lynn Muto	Transaction ID: SB21B-1680-1338-e Date of Disbursement																			
	Mailing Address PO Box 9455	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	2		2	0	0	9												
	City Rcho Santa Fe State CA Zip Code 92067-4455	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Advertising Candidate Name	<table border="1"><tr><td>440.00</td></tr></table>	440.00																		
440.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		001 Category/ Type																			

B.	Full Name (Last, First, Middle Initial) Herschel Stern	Transaction ID: SB21B-156-1424-e Date of Disbursement																			
	Mailing Address 2107 Meadowgreen Court	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	9												
	City Encinitas State CA Zip Code 92024-1910	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Holiday Meeting Event: Food/Beverage - No specified Fed Candidate Candidate Name	<table border="1"><tr><td>256.03</td></tr></table>	256.03																		
256.03																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		Category/ Type																			

C.	Full Name (Last, First, Middle Initial) John Venekamp	Transaction ID: SB21B-1685-1430-e Date of Disbursement																			
	Mailing Address PO Box 265	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	9												
	City Rancho Santa Fe State CA Zip Code 92067-0265	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Meeting Venue Hosting Candidate Name	<table border="1"><tr><td>210.00</td></tr></table>	210.00																		
210.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		Category/ Type																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>906.03</td></tr></table>	906.03
906.03		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 16 / 17

<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)
North County Democratic Unity Political Action Coalition

A. Full Name (Last, First, Middle Initial) Camille Wilder-Stern <hr/> Mailing Address 2107 Meadowgreen Court <hr/> City Encinitas State CA Zip Code 92024-1910 <hr/> Purpose of Disbursement Holiday Event: Entertainment & Cleaning - No Specified Fed Candidate Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-1788-1425-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
B. Full Name (Last, First, Middle Initial) Rebeca Randle <hr/> Mailing Address 141 Camino De Las Flores <hr/> City Encinitas State CA Zip Code 92024-4117 <hr/> Purpose of Disbursement Holiday Event: Entertainment & Cleaning - No Specified Fed Candidate Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-342-78-V Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00 [MEMO ITEM] Subitemization of Camille Wilder-Stern

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	3903.42

**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 17 / 17

<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)

North County Democratic Unity Political Action Coalition

A.

Full Name (Last, First, Middle Initial)

San Diego County Democratic Party

Mailing Address 8304 Clrmt Msa Boulevard
Suite 108

City San Diego State CA Zip Code 92111-1315

Purpose of Disbursement
Annual Club Charter

Candidate Name
San Diego County Democratic Party

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23-81-1368-e

Date of Disbursement

^M 1	^M 1	/	^D 0	^D 2	/	^Y 2	^Y 0	^Y 0	^Y 9
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Amount of Each Disbursement this Period

60.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

60.00

TOTAL This Period (last page this line number only)

60.00