

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2008 JUL 18 AM 9:02  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Peninsula Democratic Coalition

ADDRESS (number and street)

1360 Emerson Street

Check if different than previously reported. (ACC)

Palo Alto

CA

94301

3530

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00427203

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- X 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) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on M M / D D / Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

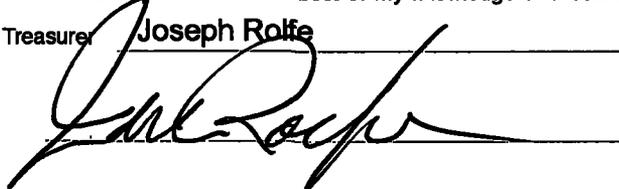
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 04 01 2008 through 06 30 2008

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 Joseph Rolfe

Signature of Treasurer



Date

07 14 2008

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

28039784574

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Peninsula Democratic Coalition**

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 04 01 2008 To: <sup>M M / D D / Y Y Y Y</sup> 06 30 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <sup>Y Y Y Y</sup> 2008		6,246.66
(b) Cash on Hand at Beginning of Reporting Period.....	4,916.09	
(c) Total Receipts (from Line 19).....	2,451.36	9,501.36
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7,367.45	15,748.02
7. Total Disbursements (from Line 31).....	2,576.21	10,956.76
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4,791.24	4,791.24
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

28039784575

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Peninsula Democratic Coalition**

Report Covering the Period: From: <sup>M</sup>04<sup>D</sup> / <sup>D</sup>01 / <sup>Y</sup>2008<sup>Y</sup> To: <sup>M</sup>06<sup>D</sup> / <sup>D</sup>30 / <sup>Y</sup>2008<sup>Y</sup>

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).....	200.00	200.00
(ii) Unitemized .....	2,251.36	9,301.36
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2,451.36	9,510.36
(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) .....	2,451.36	9,501.36
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.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5).....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2,451.36	9501.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2,451.36	

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**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 .....	454.51	722.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	454.51	722.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	2,121.70	10,234.71
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).....	2,121.70	10,234.71
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2,576.21	10,956.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2,576.21	10,956.78

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**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) .....	2,451.36	9,501.36
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2,451.36	9,501.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	454.51	722.07
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	454.51	722.07

28039784578

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 12	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)  
**Peninsula Democratic Coalition**

Full Name (Last, First, Middle Initial) <b>A. MacDougall, Inna and Jon</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 12 2008</b>
Mailing Address <b>1605 Sylvaner Ave.</b>		Amount of Each Receipt this Period  <b>, , 200.00</b>
City <b>St. Helena</b>	State <b>CA</b>	
Zip Code <b>94574</b>		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  , , .	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period  , , .
City	State	
Zip Code		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  , , .	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period  , , .
City	State	
Zip Code		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  , , .	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	, , <b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	, , <b>200.00</b>

28039784579

**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)

**Peninsula Democratic Coalition**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Date of Disbursement

M M / D D / Y Y Y Y  
04 10 2008

Mailing Address

**AT&T Payment Center**

City

**Sacramento, CA**

State

**CA**

Zip Code

**95887-0001**

Purpose of Disbursement

**Telephone Service**

**001**

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

, , 54.77

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

**B. AT&T**

Date of Disbursement

M M / D D / Y Y Y Y  
05 05 2008

Mailing Address

**AT&T Payment Center**

City

**Sacramento, CA**

State

**CA**

Zip Code

**95887-0001**

Purpose of Disbursement

**Telephone Service**

**001**

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

, , 29.60

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

**C. AT&T**

Date of Disbursement

M M / D D / Y Y Y Y  
05 21 2008

Mailing Address

**AT&T Payment Center**

City

**Sacramento, CA**

State

**CA**

Zip Code

**95887-0001**

Purpose of Disbursement

**Telephone Service**

**001**

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

, , 84.62

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

, , 168.99

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

, , .

28039784580

**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)  
**Peninsula Democratic Coalition**

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y  
**05 17 2008**

**A. Unitarian Universalists**

Mailing Address  
**505 E. Charleston Road**

City State Zip Code  
**Palo Alto CA 94306**

Purpose of Disbursement  
**Meeting room rent**

**001**

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

**210.00**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y  
**06 11 2008**

**B. AT&T**

Mailing Address  
**AT&T Payment Center**

City State Zip Code  
**Sacramento CA 95887-0001**

Purpose of Disbursement  
**Telephone service**

**001**

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

**75.52**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ , , **285.52**

**TOTAL** This Period (last page this line number only)..... ▶ , , **454.51**

28039784581

**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 9 OF 12

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Peninsula Democratic Coalition**

Full Name (Last, First, Middle Initial)

**A. Postal Service**

Date of Disbursement

M M / D D / Y Y Y Y  
04 08 2008

Mailing Address

101 First Street

City

Los Altos

State

CA

Zip Code

94022

Purpose of Disbursement

Newsletter Postage

006

Amount of Each Disbursement this Period

41.00

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Great Printing and Copies**

Date of Disbursement

M M / D D / Y Y Y Y  
04 10 2008

Mailing Address

4600 El Camino Real

City

Los Altos

State

CA

Zip Code

94022

Purpose of Disbursement

Newsletter printing

006

Amount of Each Disbursement this Period

569.19

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Great Printing and Copies**

Date of Disbursement

M M / D D / Y Y Y Y  
05 17 2008

Mailing Address

4600 El Camino Real

City

Los Altos

State

CA

Zip Code

94022

Purpose of Disbursement

Newsletter printing

006

Amount of Each Disbursement this Period

626.83

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

1237.02

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

28039784582

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 10 OF 12	
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input checked="" type="checkbox"/> 26 <input type="checkbox"/> 30b		

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NAME OF COMMITTEE (In Full)  
**Peninsula Democratic Coalition**

Full Name (Last, First, Middle Initial) <b>A. Maverick Printing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 27 2008</b>
Mailing Address <b>250 Wilton Avenue</b>		Amount of Each Disbursement this Period  <b>670.07</b>
City <b>Palo Alto</b>	State <b>CA</b>	
Zip Code <b>94306</b>		Amount of Each Disbursement this Period  <b>670.07</b>
Purpose of Disbursement	<b>006</b>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>670.07</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>1,907.09</b>

28039784583

**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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Peninsula Democratic Coalition**

Full Name (Last, First, Middle Initial)

**A. La Boulanger**

Date of Disbursement

M M / D D / Y Y Y Y

04 08 2008

Mailing Address  
301 Main Street

City State Zip Code  
Los Altos CA 94022

Purpose of Disbursement  
Preparaton for Street Fairs - Meeting Food

007

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

7.25

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Posh Bagel**

Date of Disbursement

M M / D D / Y Y Y Y

04 08 2008

Mailing Address  
310 Main Street

City State Zip Code  
Los Altos CA 94022

Purpose of Disbursement

007

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

17.30

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Palo Alto Chamber of Commerce**

Date of Disbursement

M M / D D / Y Y Y Y

06 10 2008

Mailing Address  
122 Hamilton Avenue

City State Zip Code  
Palo Alto CA 94301

Purpose of Disbursement  
Space at Art and Wine Festival

007

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

150.00

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

, , 174.61

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

, , .

28039784584

**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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Peninsula Democratic Coalition**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Los Altos Village Association</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 11 2008</b>	
Mailing Address <b>216A Main Street</b>			
City <b>Los Altos</b>	State <b>CA</b>	Zip Code <b>94022</b>	
Purpose of Disbursement <b>Space at Art and Wine Festival</b>		Category/ Type <b>007</b>	Amount of Each Disbursement this Period  , , <b>40.00</b>
Candidate Name _____			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	, , <b>40.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	, , <b>214.61</b>

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Federal Election Commission  
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Postmark Illegible

No Postmark

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Other (Specify): Date of Receipt or Postmarked

*Jms*  
 PREPARER  
 (3/2005)

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