

**FEC  
FORM 3X**

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

RECEIVED  
FEDERAL CENTER  
2008 DEC -5 PM 1:37  
Office Use Only

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

ADDRESS (number and street) Post Office Box 15  
Crescent City CA 95531  
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY ▲ STATE ▲ ZIP CODE ▲  
C00442616

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

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
April 15 Quarterly Report (Q1)  
July 15 Quarterly Report (Q2)  
October 15 Quarterly Report (Q3)  
January 31 Year-End Report (YE)  
July 31 Mid-Year Report (Non-election Year Only) (MY)  
Termination Report (TER)  
(b) Monthly Report Due On:  
Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)  
Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)  
Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
Primary (12P) 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 CA

5. Covering Period 10 01 2008 through 11 24 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 Rita Copeland

Signature of Treasurer *Rita Copeland* Date 12 03 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.

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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X

Page 2

Write or Type Committee Name

Del Norte County Democratic Central Committee

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 10 01 2008 To: <sup>M M / D D / Y Y Y Y</sup> 11 24 2008

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand	<sup>Y Y Y Y</sup>		
January 1, 2008			, 4,438.00
(b) Cash on Hand at Beginning of Reporting Period .....		, 5,262.14	
(c) Total Receipts (from Line 19) .....		, 875.00	, 12,145.78
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....		, 6,137.14	, 16,583.78
<hr/>			
7. Total Disbursements (from Line 31) .....		, 1,332.11	, 11,753.75
<hr/>			
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....		, 4,805.03	, 4,805.03
<hr/>			
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....		, 0.00	
<hr/>			
10. Debts and Obligations Owed <b>BY</b> 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

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**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X

Page 3

Write or Type Committee Name

Del Norte County Democratic Central Committee

Report Covering the Period: From: <sup>M</sup>10 <sup>M</sup>01 <sup>D</sup>2008 To: <sup>M</sup>11 <sup>M</sup>24 <sup>D</sup>2008

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).....	560.00	6,105.80
(ii) Unitemized .....	99.00	1,626.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	659.00	7,731.80
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	216.00	3,250.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	875.00	10,981.80
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	1,163.98
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	1,163.98
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	875.00	12,145.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	875.00	10,981.80

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**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X

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 .....	, 321 .70	, 2,679 .74
(ii) Non-Federal Share .....	, 827 .21	, 6,890 .81
(b) Other Federal Operating Expenditures .....	, 0 .00	, 0 .00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	, 1,148 .91	, 9,570 .55
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) .....	, 183 .20	, 183 .20
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	, 1,000 .00
(b) Political Party Committees .....	, 0 .00	, 0 .00
(c) Other Political Committees (such as PACs) .....	, 0 .00	, 1,000 .00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	, 0 .00	, 2,000 .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 .....	, 0 .00	, 0 .00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(a)(b))..	, 0 .00	, 0 .00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 30(c)) .....	, 1,332 .11	, 11,753 .75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) From Line 31) .....	, 504 .90	, 4,862 .94

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X

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).....	875.00	10,981.80
34. Total Contribution Refunds (from Line 28(d)).....	0.00	2,000.00
35. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	875.00	8,981.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	321.70	2,679.74
37. Offset to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36).....	321.70	2,679.74

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 1	
	<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	

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)  
Del Norte County Democratic Central Committee

Full Name (Last, First, Middle Initial) <b>A. Cindy Fox</b>		Date of Receipt
Mailing Address 353 4th Street		M M / D D / Y Y Y Y 10 / 10 / 2008
City	State	Zip Code
Crescent City, CA		95531
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		, , 30.00
Name of Employer State of California	Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date ▼	
	, , 260.00	

Full Name (Last, First, Middle Initial) <b>B. Cindy Fox</b>		Date of Receipt
Mailing Address 353 4th Street		M M / D D / Y Y Y Y 11 / 05 / 2008
City	State	Zip Code
Crescent City, CA		95531
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		, , 30.00
Name of Employer State of California	Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date ▼	
	, , 260.00	

Full Name (Last, First, Middle Initial) <b>C. Diane R Tomar</b>		Date of Receipt
Mailing Address Post Office Box 279		M M / D D / Y Y Y Y 11 / 05 / 2008
City	State	Zip Code
Crescent City, CA		95531
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		, , 500.00
Name of Employer State of California	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date ▼	
	, , 1,200.00	

SUBTOTAL of Receipts This Page (optional) .....	560.00
TOTAL This Period (last page this line number only) .....	560.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1	OF 1
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)  
Del Norte County Democratic Central Committee

Full Name (Last, First, Middle Initial) <b>A. Democratic State Central Committee Of California - FVR</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2008
Mailing Address 1401 21st Street, Suite 100		Amount of Each Receipt this Period 216.00
City Sacramento, CA	State CA	
FEC ID number of contributing federal political committee. C C00105668		Amount of Each Receipt this Period 216.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date ▼ 750.00	

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. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	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. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional) .....	216.00
TOTAL This Period (last page this line number only) .....	216.00

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**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

<b>NAME OF COMMITTEE (In Full)</b> Del Norte County Democratic Central Committee	<b>FEC IDENTIFICATION NUMBER</b> C C00442616
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

<b>Full Name (Last, First, Middle Initial) of Payee</b> The Daily Triplicate	<b>Date</b> MM / DD / YYYY 11 / 11 / 2008
<b>Mailing Address</b> Post Office Box 277	<b>Amount</b>  , , 183.20
<b>City State Zip Code</b> Crescent City , CA 95531	
<b>Purpose of Expenditure</b> Newspaper Ad	<b>Category/Type</b> 24E
<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
<b>Name of Federal Candidate Supported or Opposed by Expenditure:</b> Barack Obama	
<b>Check One:</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
<b>Calendar Year-To-Date Per Election for Office Sought</b> , , 183.20	
<b>Disbursement For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____	

<b>Full Name (Last, First, Middle Initial) of Payee</b>	<b>Date</b> MM / DD / YYYY
<b>Mailing Address</b>	<b>Amount</b>  , ,
<b>City State Zip Code</b>	
<b>Purpose of Expenditure</b>	<b>Category/Type</b>
<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
<b>Name of Federal Candidate Supported or Opposed by Expenditure:</b>	
<b>Check One:</b> <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
<b>Calendar Year-To-Date Per Election for Office Sought</b> , ,	
<b>Disbursement For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

<b>(a) SUBTOTAL of Itemized Independent Expenditures</b> .....	, , 183.20
<b>(b) SUBTOTAL of Unitemized Independent Expenditures</b> .....	, , 0.00
<b>(c) TOTAL Independent Expenditures</b> .....	, , 183.20

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature \_\_\_\_\_ Date : 12 / 03 / 2008

28039942605



**SCHEDULE H4 (FEC Form 3X)**

DISBURSEMENT FOR SHARED FEDERAL/NON-FEDERAL

ACTIVITY SCHEDULE

NAME OF COMMITTEE (In Full)  
Del Norte County Democratic Central Committee

A. Full Name (Last, First, Middle Initial) Del Norte Office Supply		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Mailing Address 240 'I' Street		Allocated Activity or Event Year-To-Date 9,570.55	
City Crescent City	State CA	Zip Code 95531	
Purpose of Disbursement: Office Supplies	001	Date 10 20 2008	
Activity or Event Identifier: Administrative	Category/ Type		
FEDERAL SHARE	+	NON-FEDERAL SHARE	TOTAL AMOUNT
31.10		79.98	111.08

A. Full Name (Last, First, Middle Initial) Del Norte Office Supply		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Mailing Address 240 'I' Street		Allocated Activity or Event Year-To-Date 9,570.55	
City Crescent City	State CA	Zip Code 95531	
Purpose of Disbursement: Office Supplies	001	Date 11 11 2008	
Activity or Event Identifier: Administrative	Category/ Type		
FEDERAL SHARE	+	NON-FEDERAL SHARE	TOTAL AMOUNT
11.51		29.61	41.12

A. Full Name (Last, First, Middle Initial) Pacific Power		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Mailing Address 1033 NE 6th Avenue		Allocated Activity or Event Year-To-Date 9,570.55	
City Portland	State OR	Zip Code 97256	
Purpose of Disbursement: Utilities	001	Date 11 11 2008	
Activity or Event Identifier: Administrative	Category/ Type		
FEDERAL SHARE	+	NON-FEDERAL SHARE	TOTAL AMOUNT
17.52		45.05	62.57

<b>SUBTOTAL of Allocated Federal and Non-Federal Activity This Page</b>			
FEDERAL SHARE	+	NON-FEDERAL SHARE	TOTAL AMOUNT
60.13		154.64	214.77
<b>TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and Non-Federal share to 21(a)(ii))</b>			
FEDERAL SHARE			TOTAL AMOUNT
	NON-FEDERAL SHARE		
<b>TOTAL This Period for the Non-Federal Share</b>			

28039942606

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENT FOR SHARED FEDERAL/NON-FEDERAL**

**ACTIVITY SCHEDULE**

**NAME OF COMMITTEE (In Full)**  
Del Norte County Democratic Central Committee

A. Full Name (Last, First, Middle Initial) River City Business Services		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 5429 Madison Avenue		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	Allocated Activity or Event Year-To-Date
Sacramento	CA	95841	9,570.55
Purpose of Disbursement: Bookkeeping Services, Postage and Copies		001	Date 11 / 03 / 2008
Activity or Event Identifier: Administrative		Category/ Type	

FEDERAL SHARE	+	NON-FEDERAL SHARE	TOTAL AMOUNT
175.50		451.27	626.77

A. Full Name (Last, First, Middle Initial) Rural Human Services, Inc		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 286 M Street		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	Allocated Activity or Event Year-To-Date
Crescent City	CA	95531	9,570.55
Purpose of Disbursement: County Fair Booth		001	Date 11 / 11 / 2008
Activity or Event Identifier: Administrative		Category/ Type	

FEDERAL SHARE	+	NON-FEDERAL SHARE	TOTAL AMOUNT
33.32		85.68	119.00

A. Full Name (Last, First, Middle Initial) Verizon		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address Post Office Box 9688		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	Allocated Activity or Event Year-To-Date
Mission Hills	CA	91346	9,570.55
Purpose of Disbursement: Telephone		001	Date 10 / 20 / 2008
Activity or Event Identifier: Administrative		Category/ Type	

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
26.21		67.38		93.59

<b>SUBTOTAL of Allocated Federal and Non-Federal Activity This Page</b>				
FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
235.03		604.33		839.36
<b>TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and Non-Federal share to 21(a)(ii))</b>				
FEDERAL SHARE				TOTAL AMOUNT
		NON-FEDERAL SHARE		
<b>TOTAL This Period for the Non-Federal Share</b>				

28039942607

**SCHEDULE H4 (FEC Form 3X)**

DISBURSEMENT FOR SHARED FEDERAL/NON-FEDERAL

ACTIVITY SCHEDULE

NAME OF COMMITTEE (In Full)  
Del Norte County Democratic Central Committee

A. Full Name (Last, First, Middle Initial) Verizon		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address Post Office Box 9688		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	Allocated Activity or Event Year-To-Date
Mission Hills	CA	91346	9,570.55
Purpose of Disbursement: Telephone		001	
Activity or Event Identifier: Administrative		Category/ Type	Date
			MM / DD / YYYY 11 / 11 / 2008
FEDERAL SHARE	+	NON-FEDERAL SHARE	TOTAL AMOUNT
26.54		68.24	94.78

A. Full Name (Last, First, Middle Initial)		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	Allocated Activity or Event Year-To-Date
Purpose of Disbursement:			
Activity or Event Identifier:		Category/ Type	Date
			MM / DD / YYYY
FEDERAL SHARE	+	NON-FEDERAL SHARE	TOTAL AMOUNT

A. Full Name (Last, First, Middle Initial)		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	Allocated Activity or Event Year-To-Date
Purpose of Disbursement:			
Activity or Event Identifier:		Category/ Type	Date
			MM / DD / YYYY
FEDERAL SHARE	+	NON-FEDERAL SHARE	TOTAL AMOUNT

<b>SUBTOTAL of Allocated Federal and Non-Federal Activity This Page</b>			
FEDERAL SHARE	+	NON-FEDERAL SHARE	TOTAL AMOUNT
26.54		68.24	94.78
<b>TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and Non-Federal share to 21(a)(ii))</b>			
FEDERAL SHARE		NON-FEDERAL SHARE	TOTAL AMOUNT
321.70		0.00	
<b>TOTAL This Period for the Non-Federal Share</b>			
		827.21	

28039942608

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FEDEX* Shipping Date  
*12/4/08*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*JAD*  
 PREPARER  
 (3/2005)

*12/5/08*  
 DATE PREPARED

28039942609