

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER
2018 APR 18 AM 9:17
Office Use Only

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

TUO LUMNE COUNTY DEMOCRATIC CENTRAL COMMITTEE

ADDRESS (number and street) 19985 DAMBACHER DR
 Check if different than previously reported. (ACC)
S O N O R A C A 9 5 3 7 0 -

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

C 0 0 6 7 1 3 1 3

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

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

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

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

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y

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 KENNETH L. FOWKES

Signature of Treasurer *Kenneth L. Fowkes* Date M M M / D D D / Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

TUOLUMNE COUNTY DEMOCRATIC CENTRAL COMMITTEE

Report Covering the Period: From:

M	M	M
0	1	

 /

D	D	D
0	1	

 /

Y	Y	Y	Y	Y	Y
2	0	1	8		

 To:

M	M	M
0	3	

 /

D	D	D
3	1	

 /

Y	Y	Y	Y	Y	Y
2	0	1	8		

**COLUMN A
This Period**

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

6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>2</td><td>0</td><td>1</td><td>8</td></tr></table>	2	0	1	8	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>0</td></tr></table>	0	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>0</td></tr></table>	0						
2	0	1	8											
0														
0														
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>0</td></tr></table>	0	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>0</td></tr></table>	0										
0														
0														
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>2</td><td>8</td><td>7</td><td>0</td><td>0</td><td>0</td></tr></table>	2	8	7	0	0	0	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>2</td><td>8</td><td>7</td><td>0</td><td>0</td><td>0</td></tr></table>	2	8	7	0	0	0
2	8	7	0	0	0									
2	8	7	0	0	0									
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>							<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						
7. Total Disbursements (from Line 31).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>1</td><td>1</td><td>1</td><td>2</td><td>6</td><td>0</td></tr></table>	1	1	1	2	6	0	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>1</td><td>1</td><td>1</td><td>2</td><td>6</td><td>0</td></tr></table>	1	1	1	2	6	0
1	1	1	2	6	0									
1	1	1	2	6	0									
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>1</td><td>7</td><td>5</td><td>7</td><td>4</td><td>0</td></tr></table>	1	7	5	7	4	0	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>1</td><td>7</td><td>5</td><td>7</td><td>4</td><td>0</td></tr></table>	1	7	5	7	4	0
1	7	5	7	4	0									
1	7	5	7	4	0									
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>7</td><td>2</td><td>5</td><td>0</td><td>0</td><td> </td></tr></table>	7	2	5	0	0		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>7</td><td>2</td><td>5</td><td>0</td><td>0</td><td> </td></tr></table>	7	2	5	0	0	
7	2	5	0	0										
7	2	5	0	0										
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>							<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
 1050 First Street, N.E.
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

20180310 10:00:00 AM

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

TUOLUMNE COUNTY DEMOCRATIC CENTRAL COMMITTEE

Report Covering the Period: From: / / To: / /

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).....	6 0 0 0 0	6 0 0 0 0
(ii) Unitemized.....	2 2 7 0 0 0	2 2 7 0 0 0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2 8 7 0 0 0	2 8 7 0 0 0
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	2 8 7 0 0 0	2 8 7 0 0 0
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2 8 7 0 0 0	2 8 7 0 0 0
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2 8 7 0 0 0	2 8 7 0 0 0

NON-FEDERAL RECEIPTS

DETAILED SUMMARY PAGE of Disbursements

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	1 0 0 0	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1 0 0 0	
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)	1 1 0 2 6 0 0	1 1 0 2 6 0 0
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations)		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1 1 1 2 6 0	1 1 1 2 6 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1 1 1 2 6 0	1 1 1 2 6 0

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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 8 7 0 0 0	2 8 7 0 0 0
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2 8 7 0 0 0	2 8 7 0 0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1 0 0 0	1 0 0 0
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1 0 0 0	1 0 0 0

20181018 1401000000

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 9
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 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)
TUOLUMNE COUNTY DEMOCRATIC CENTRAL COMMITTEE

A. CANTLEY, ROBERT, A.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
PO Box 1307

City: Twain Harte State: CA Zip Code: 95383

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

Name of Employer (for Individual): **RETIRED** Occupation (for Individual):

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2 0 0 0 0

Date of Receipt
0 2 / 1 6 / 2 0 1 8

Amount of Each Receipt this Period
2 0 0 0 0

Memo Item

B. FOWKES, KENNETH, L.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
19985 DAMBACHER DR

City: SONORA State: CA Zip Code: 95370

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

Name of Employer (for Individual): **RETIRED** Occupation (for Individual):

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2 0 0 0 0

Date of Receipt
0 2 / 2 1 / 2 0 1 8

Amount of Each Receipt this Period
2 0 0 0 0

Memo Item

C. PALMA KUYENDALL-PAXTON
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
395 ALPINE LANE

City: SONORA State: CA Zip Code: 95370

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

Name of Employer (for Individual): **RETIRED** Occupation (for Individual):

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2 0 0 0 0

Date of Receipt
0 2 / 1 9 / 2 0 1 8

Amount of Each Receipt this Period
2 0 0 0 0

Memo Item

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

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

6 0 0 0 0

6 0 0 0 0

20160501 13:01:00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

TUOLUMNE COUNTY DEMOCRATIC CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THE UNION DEMOCRAT

Nature of Debt (Purpose):

MULTIPLE NEWSPAPER ADVERTISEMENTS

Mailing Address

84 SOUTH WASHINGTON STREET

City

SONORA

State

CA

Zip Code

95370

Outstanding Balance Beginning This Period

0

Amount Incurred This Period

7 2 5 0 0

Payment This Period

0

Outstanding Balance at Close of This Period

7 2 5 0 0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional).....▶

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

7 2 5 0 0

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....▶

0

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)▶

7 2 5 0 0

NOT FOR FILING

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

NAME OF COMMITTEE (In Full) TUOLUMNE COUNTY DEMOCRATIC CENTRAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C 0 0 6 7 1 3 1 3
---	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee SIERRA INSTANT PRINTING			<input type="checkbox"/> Memo Item
Mailing Address 1157 MONO WAY			
City SONORA	State CA	Zip Code 95370	
Purpose of Expenditure DIRECT MAIL SOLICITATION FOR FUNDS			Category/Type 0 0 3

Date of Public Distribution/Dissemination
 / /

Amount

Date of Disbursement or Obligation
 / /

Name of Federal Candidate:
TOM MCCLINTOK

Support Oppose

Calendar Year-To-Date Per Election for Office Sought

Office Sought: House President Senate

District: CD04 State: CA

Disbursement For: Primary General Other (specify) ▶

Full Name of Payee			<input type="checkbox"/> Memo Item
Mailing Address			
City	State	Zip Code	
Purpose of Expenditure			Category/Type

Date of Public Distribution/Dissemination
 / /

Amount

Date of Disbursement or Obligation
 / /

Name of Federal Candidate:

Support Oppose

Calendar Year-To-Date Per Election for Office Sought

Office Sought: House President Senate

District: State:

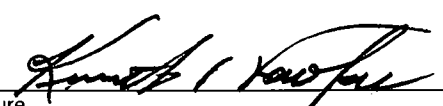
Disbursement For: Primary General Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶

(a) SUBTOTAL of Unitemized Independent Expenditures ▶

(a) TOTAL Independent Expenditures ▶

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 / /

20180411 10:01:00 AM

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

NAME OF COMMITTEE (In Full)

TUOLUMNE COUNTY DEMOCRATIC CENTRAL COMMITTEE

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
<p>SOLICITATION OF FUNDS</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>1 0 0 0 0 %</p>	<p>0 %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>

20160518 10:00:00 AM

RECOMMENDED BY THE POST OFFICE

NE DEMOCRATIC CENTRAL COMMITTEE
- DAM BAKER DR.
A CA, 95370




FEDERAL ELECTION COMMISSION
1050 FIRST STREET, NE
WASHINGTON, DC 20463

RECEIVED
FEC MAIL CENTER
2018 APR 18 AM 9:17

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 4/12/2018
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER
 (3/2015)

4/18/2018
 DATE PREPARED

NOTICE OF THE COMMISSION