

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER

2018 MAY 29 AM 10:29
Office Use Only

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

TUOLUMNE COUNTY DEMOCRATIC CENTRAL COMMITTEE

ADDRESS (number and street) 19985 DAMBACHER DR

Check if different than previously reported. (ACC) SONORA CA 95370 -

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:
- 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 06 / 05 / 2018 in the State of CA

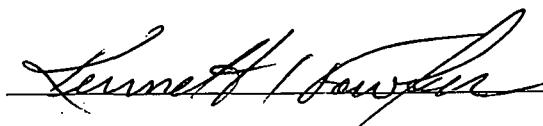
- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 04 / 01 / 2018 through 05 / 15 / 2018

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  Date 05 / 20 / 2018

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

Office Use Only									
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**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: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0 1032.40"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="50.00"/>	<input type="text" value="2920.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1082.40"/>	<input type="text" value="2920.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2 4 8 7"/>	<input type="text" value="1 1 1 2 6 0"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1057.53"/>	<input type="text" value="1057.53"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value=""/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	

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

DUPLICATE COPY FOR THE COMMISSION

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: 04 / 01 / 2018 To: 05 / 15 / 2018

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).....	0	600.00
(ii) Unitemized.....	50.00	2320.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	50.00	2920.00
(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).....▶	50.00	2920.00
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)).....▶	50.00	2920.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	50.00	2920.00

2025 RELEASE UNDER E.O. 14176

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	(701.13)	34.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	(701.13)	34.87
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)	725.00	1827.60
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))..	24.87	1862.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24.87	1862.47

2018 RELEASE UNDER E.O. 14176

DETAILED SUMMARY PAGE

of Disbursements

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)	50.00	2920.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50.00	2920.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	24.87	34.87
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	24.87	34.87

2025 RELEASE UNDER E.O. 14176

**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) <table style="width: 100%; text-align: center;"> <tr> <td><input checked="" type="checkbox"/> 21b</td> <td><input type="checkbox"/> 22</td> <td><input type="checkbox"/> 23</td> <td><input type="checkbox"/> 26</td> <td><input type="checkbox"/> 27</td> </tr> <tr> <td><input type="checkbox"/> 28a</td> <td><input type="checkbox"/> 28b</td> <td><input type="checkbox"/> 28c</td> <td><input type="checkbox"/> 29</td> <td><input type="checkbox"/> 30b</td> </tr> </table>	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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	PAGE 1 OF 2
<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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								

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

Full Name (Last, First, Middle Initial) A. THE UNION DEMOCRAT	Date of Disbursement <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; padding: 2px;">MM</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">DD</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">YYYY</td> </tr> <tr> <td>04</td> <td></td> <td>19</td> <td></td> <td>2018</td> </tr> </table>	MM	/	DD	/	YYYY	04		19		2018
MM	/	DD	/	YYYY							
04		19		2018							
Mailing Address 84 S. WASHINGTON ST. City: SONORA State: CA Zip Code: 95370	FEC Identification Number <table style="width: 100%; border: 1px solid black; height: 20px;"> <tr> <td style="font-size: 2em; font-weight: bold;">C</td> </tr> </table>	C									
C											
Purpose of Disbursement REVERSE CHARGE TO SCHEDULE E EXPENDITURES	Amount of Each Disbursement this Period <table style="width: 100%; border: 1px solid black; text-align: center;"> <tr> <td style="font-size: 1.5em; font-weight: bold;">(145.00)</td> </tr> </table>	(145.00)									
(145.00)											
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: CA District:	Category/Type <table style="width: 100%; border: 1px solid black; height: 20px;"> <tr> <td style="font-size: 2em; font-weight: bold;">C</td> </tr> </table> Memo Item <input type="checkbox"/>	C									
C											

Full Name (Last, First, Middle Initial) B. THE UNION DEMOCRAT	Date of Disbursement <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; padding: 2px;">MM</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">DD</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">YYYY</td> </tr> <tr> <td>04</td> <td></td> <td>24</td> <td></td> <td>2018</td> </tr> </table>	MM	/	DD	/	YYYY	04		24		2018
MM	/	DD	/	YYYY							
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MM	/	DD	/	YYYY							
04		26		2018							
Mailing Address 84 S. WASHINGTON ST. City: SONORA State: CA Zip Code: 95370	FEC Identification Number <table style="width: 100%; border: 1px solid black; height: 20px;"> <tr> <td style="font-size: 2em; font-weight: bold;">C</td> </tr> </table>	C									
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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:	Category/Type <table style="width: 100%; border: 1px solid black; height: 20px;"> <tr> <td style="font-size: 2em; font-weight: bold;">C</td> </tr> </table> Memo Item <input type="checkbox"/>	C									
C											

SUBTOTAL of Disbursements This Page (optional).....	<table style="width: 100%; border: 1px solid black; text-align: center;"> <tr> <td style="font-size: 1.5em; font-weight: bold;">(435.00)</td> </tr> </table>	(435.00)
(435.00)		
TOTAL This Period (last page this line number only).....	<table style="width: 100%; border: 1px solid black; height: 20px;"> <tr> <td style="font-size: 2em; font-weight: bold;">C</td> </tr> </table>	C
C		

20180110 10:00:00 AM

**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 28a	<input type="checkbox"/> 22 28b	<input type="checkbox"/> 23 28c	<input type="checkbox"/> 26 29	<input checked="" type="checkbox"/> 27 30b
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NAME OF COMMITTEE (In Full)
TUOLUMNE COUNTY DEMOCRATIC CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. THE UNION DEMOCRAT

Mailing Address
84 S. WASHINGTON ST.

City
SONORA

State
CA

Zip Code
95370

Purpose of Disbursement
REVERSE CHARGE TO SCHEDULE E EXPENDITURES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: CA District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2018

FEC Identification Number

C

Amount of Each Disbursement this Period

(145.00)

Memo Item

Full Name (Last, First, Middle Initial)

B. THE UNION DEMOCRAT

Mailing Address
84 S. WASHINGTON ST.

City
SONORA

State
CA

Zip Code
95370

Purpose of Disbursement
REVERSE CHARGE TO SCHEDULE E EXPENDITURES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C

Amount of Each Disbursement this Period

(145.00)

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

(290.00)

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

(725.00)

**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
---------------------------------------------------------------------------------	--------------------------------------------------

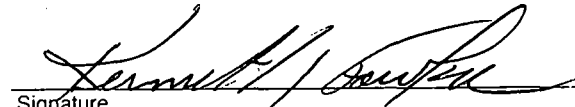
Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee THE UNION DEMOCRAT		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 19 / 2018	
Mailing Address 84 S. WASHINGTON ST.				
City SONORA	State CA	Zip Code 95370	Amount 145.00	
Purpose of Expenditure CAMPAIGN AD		Category/Type 004	Date of Disbursement or Obligation 03 / 30 / 2018	
Name of Federal Candidate: TOM MCCLINTOK		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate	District: CD04 State: CA
Calendar Year-To-Date Per Election for Office Sought		1247.60	Disbursement For: <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee THE UNION DEMOCRAT		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 24 / 2018	
Mailing Address 84 S. WASHINGTON ST.				
City SONORA	State CA	Zip Code 95370	Amount 145.00	
Purpose of Expenditure CAMPAIGN AD		Category/Type 004	Date of Disbursement or Obligation 03 / 30 / 2018	
Name of Federal Candidate: TOM MCCLINTOK		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate	District: CD04 State: CA
Calendar Year-To-Date Per Election for Office Sought		1392.60	Disbursement For: <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶ <input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	▶ <input type="text"/>
(a) TOTAL Independent Expenditures	▶ <input type="text"/>

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: 05 / 20 / 2018

NON-PROFIT ORGANIZATION

**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
---------------------------------------------------------------------------------	--------------------------------------------------

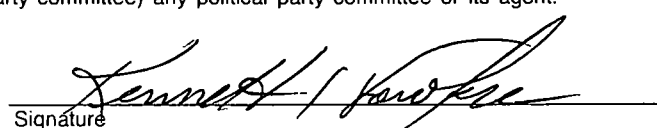
Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee THE UNION DEMOCRAT	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 26 / 2018
Mailing Address 84 S. WASHINGTON ST.		Amount 145.00
City SONORA	State CA	
Purpose of Expenditure CAMPAIGN AD		Date of Disbursement or Obligation 03 / 30 / 2018
Name of Federal Candidate: TOM MCCLINTOK		Office Sought: <input checked="" type="checkbox"/> House District: CD04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 1537.60		Disbursement For: <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee THE UNION DEMOCRAT	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 05 / 03 / 2018
Mailing Address 84 S. WASHINGTON ST.		Amount 145.00
City SONORA	State CA	
Purpose of Expenditure CAMPAIGN AD		Date of Disbursement or Obligation 03 / 30 / 2018
Name of Federal Candidate: TOM MCCLINTOK		Office Sought: <input checked="" type="checkbox"/> House District: CD04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 1682.60		Disbursement For: <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	▶ <input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	▶ <input type="text"/>
(a) TOTAL Independent Expenditures	▶ <input type="text"/>

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: 05 / 20 / 2018

2018-05-20 10:00:00 AM

**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 THE UNION DEMOCRAT	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 05 / 10 / 2018
Mailing Address 84 S. WASHINGTON ST.		Amount 145.00
City SONORA	State CA	Zip Code 95370
Purpose of Expenditure CAMPAIGN AD	Category/Type 004	Date of Disbursement or Obligation 03 / 30 / 2018
Name of Federal Candidate: TOM MCCLINTOK	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: CD04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	1827.60	Disbursement For: <input checked="" type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/Type	Date of Disbursement or Obligation
Name of Federal Candidate:	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	▶	[]
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	[]
(a) TOTAL Independent Expenditures	▶	725.00

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: *Kenneth A. Parker* Date: 05 / 20 / 2018

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 %
SOLICITATION OF FUNDS ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	100.00 %	0 %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported		
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Dambach Dr.
A-CA 95370

FEDERAL ELECTION COMMISSION
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WASHINGTON, DC 20463

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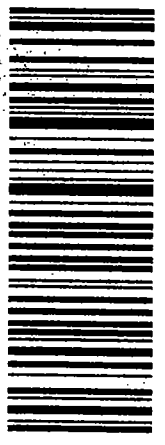
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