

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.   
**DEMOCRATS OF HEMET - SAN JACINTO**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** ▼  **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲  
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  /  /  in the State of   
(d) 30-Day **POST-Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Gregory E. Sanborn

Signature of Treasurer Gregory E. Sanborn [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**DEMOCRATS OF HEMET - SAN JACINTO**

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="2015"/>	<input type="text" value="1142.39"/>	<input type="text" value="1142.39"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1142.39"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5083.06"/>	<input type="text" value="5083.06"/>
(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="6225.45"/>	<input type="text" value="6225.45"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4977.65"/>	<input type="text" value="4977.65"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1247.80"/>	<input type="text" value="1247.80"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**DEMOCRATS OF HEMET - SAN JACINTO**

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).....	0.00	0.00
(ii) Unitemized .....	4950.47	4950.47
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4950.47	4950.47
(b) Political Party Committees .....	132.00	132.00
(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) .....	5082.47	5082.47
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.).....	0.59	0.59
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))..... ▶	5083.06	5083.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5083.06	5083.06

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4977.65	4977.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4977.65	4977.65
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 .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4977.65	4977.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4977.65	4977.65

**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) .....	5082.47	5082.47
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5082.47	5082.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	4977.65	4977.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	4977.65	4977.65

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<input type="checkbox"/> 11a	<input checked="" 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)  
**DEMOCRATS OF HEMET - SAN JACINTO**

**A. RIVERSIDE COUNTY DEMOCRATIC CENTRAL COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35125 CALLE NOPAL

City TEMECULA	State CA	Zip Code 92592
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00396994

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 \_\_\_\_\_ 15.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 12 / 2015  
**Transaction ID : SA11B.4594**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 15.00

Contribution

**B. RIVERSIDE COUNTY DEMOCRATIC CENTRAL COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35125 CALLE NOPAL

City TEMECULA	State CA	Zip Code 92592
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00396994

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 \_\_\_\_\_ 51.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 22 / 2015  
**Transaction ID : SA11B.4595**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 36.00

Contribution

**C. RIVERSIDE COUNTY DEMOCRATIC CENTRAL COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35125 CALLE NOPAL

City TEMECULA	State CA	Zip Code 92592
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00396994

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 \_\_\_\_\_ 87.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2015  
**Transaction ID : SA11B.4596**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 36.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 87.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATS OF HEMET - SAN JACINTO**

Full Name (Last, First, Middle Initial) <b>A. RIVERSIDE COUNTY DEMOCRATIC CENTRAL COMMITTEE</b>		Date of Receipt MM / DD / YYYY 04 / 21 / 2015 <b>Transaction ID : SA11B.4597</b>
Mailing Address 35125 CALLE NOPAL		Amount of Each Receipt this Period 15.00
City TEMECULA	State CA	Zip Code 92592
FEC ID number of contributing federal political committee. C C00396994	Contribution	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 102.00	

Full Name (Last, First, Middle Initial) <b>B. RIVERSIDE COUNTY DEMOCRATIC CENTRAL COMMITTEE</b>		Date of Receipt MM / DD / YYYY 05 / 25 / 2015 <b>Transaction ID : SA11B.4598</b>
Mailing Address 35125 CALLE NOPAL		Amount of Each Receipt this Period 15.00
City TEMECULA	State CA	Zip Code 92592
FEC ID number of contributing federal political committee. C C00396994	Contribution	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 117.00	

Full Name (Last, First, Middle Initial) <b>C. RIVERSIDE COUNTY DEMOCRATIC CENTRAL COMMITTEE</b>		Date of Receipt MM / DD / YYYY 06 / 25 / 2015 <b>Transaction ID : SA11B.4599</b>
Mailing Address 35125 CALLE NOPAL		Amount of Each Receipt this Period 15.00
City TEMECULA	State CA	Zip Code 92592
FEC ID number of contributing federal political committee. C C00396994	Contribution	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 132.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> This Period (last page this line number only).....▶	132.00

**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)  
**DEMOCRATS OF HEMET - SAN JACINTO**

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC STATE CENTRAL COMMITTEE OF CA - FEDERAL**

Mailing Address 1830 9TH STREET

City State Zip Code  
SACRAMENTO CA 95811

Purpose of Disbursement  
Liability Insurance Premium

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2015

Transaction ID : SB21B.4560

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**B. Magic Jack, Inc.**

Mailing Address 5700 Georgia Avenue

City State Zip Code  
West Palm Beach FL 33405

Purpose of Disbursement  
Domain Name Fee - Reimbursed Joe Pirtle

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 01 / 2015

Transaction ID : SB21B.4563

Amount of Each Disbursement this Period

37.73

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Joe Pirtle**

Mailing Address 255 Mosport Street

City State Zip Code  
Hemet CA 92544

Purpose of Disbursement  
Internet Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2015

Transaction ID : SB21B.4567

Amount of Each Disbursement this Period

64.99

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

764.99

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEMOCRATS OF HEMET - SAN JACINTO**

Full Name (Last, First, Middle Initial)

**A. Joe Pirtle**

Mailing Address 255 Mosport Street

City Hemet State CA Zip Code 92544

Purpose of Disbursement  
Office Supplies Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2015

**Transaction ID : SB21B.4568**

Amount of Each Disbursement this Period

25.64
-------

Full Name (Last, First, Middle Initial)

**B. Joe Pirtle**

Mailing Address 255 Mosport Street

City Hemet State CA Zip Code 92544

Purpose of Disbursement  
Internet Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		09		2015

**Transaction ID : SB21B.4574**

Amount of Each Disbursement this Period

64.99
-------

Full Name (Last, First, Middle Initial)

**C. Joe Pirtle**

Mailing Address 255 Mosport Street

City Hemet State CA Zip Code 92544

Purpose of Disbursement  
Internet Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2015

**Transaction ID : SB21B.4578**

Amount of Each Disbursement this Period

64.99
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

155.62
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**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)  
**DEMOCRATS OF HEMET - SAN JACINTO**

Full Name (Last, First, Middle Initial)

**A. Joe Pirtle**

Mailing Address 255 Mosport Street

City Hemet State CA Zip Code 92544

Purpose of Disbursement  
Internet Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2015

Transaction ID : SB21B.4582

Amount of Each Disbursement this Period

64.99

Full Name (Last, First, Middle Initial)

**B. RFLP 528-532**

Mailing Address 1600 East Florida Avenue  
Ste. 110

City Hemet State CA Zip Code 92544

Purpose of Disbursement  
Rent

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 27 / 2015

Transaction ID : SB21B.4552

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. RFLP 528-532**

Mailing Address 1600 East Florida Avenue  
Ste. 110

City Hemet State CA Zip Code 92544

Purpose of Disbursement  
Rent

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 03 / 2015

Transaction ID : SB21B.4558

Amount of Each Disbursement this Period

500.00

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

1064.99

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEMOCRATS OF HEMET - SAN JACINTO**

Full Name (Last, First, Middle Initial)

**A. RFLP 528-532**

Mailing Address 1600 East Florida Avenue  
Ste. 110

City Hemet State CA Zip Code 92544

Purpose of Disbursement  
Rent

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4571**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. RFLP 528-532**

Mailing Address 1600 East Florida Avenue  
Ste. 110

City Hemet State CA Zip Code 92544

Purpose of Disbursement  
Rent

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4575**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. RFLP 528-532**

Mailing Address 1600 East Florida Avenue  
Ste. 110

City Hemet State CA Zip Code 92544

Purpose of Disbursement  
Rent

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4584**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEMOCRATS OF HEMET - SAN JACINTO**

Full Name (Last, First, Middle Initial)

**A. RFLP 528-532**

Mailing Address 1600 East Florida Avenue  
Ste. 110

City Hemet State CA Zip Code 92544

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4589**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Southern California Edison**

Mailing Address P.O. Box 300

City Rosemead State CA Zip Code 91772

Purpose of Disbursement  
Utility Charges

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4573**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Southern California Edison**

Mailing Address P.O. Box 300

City Rosemead State CA Zip Code 91772

Purpose of Disbursement  
Utility Charges

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4579**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**DEMOCRATS OF HEMET - SAN JACINTO**

Full Name (Last, First, Middle Initial)

**A. Southern California Edison**

Mailing Address P.O. Box 300

City Rosemead State CA Zip Code 91772

Purpose of Disbursement  
Utility Charges

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4586**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 3381 W. Florida Avenue

City Hemet State CA Zip Code 92545

Purpose of Disbursement  
Office Supplies - Reimbursed Joe Pirtle

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4570**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 3381 W. Florida Avenue

City Hemet State CA Zip Code 92545

Purpose of Disbursement  
Office Supplies - Reimbursed Gene Hikel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4581**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DEMOCRATS OF HEMET - SAN JACINTO**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address Yale Station

City Hemet State CA Zip Code 92544-4750

Purpose of Disbursement  
Postage - Reimbursed Gene Hikel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4546**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.**

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

/  /

Amount of Each Disbursement this Period

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

/  /

Amount of Each Disbursement this Period

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

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