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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.

12FE4M5

LIVINGSTONE COUNTY DEMOCRATIC WOMEN'S CAUCUS

ADDRESS (number and street)

PO BOX 91

Check if different than previously reported. (ACC)

DREMARK

OKA 43055-0091

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00436775

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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

MM / DD / YYYY

in the State of

XX

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

XX

5. Covering Period

07 / 01 / 2016

through

09 / 30 / 2016

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

Pamela G Wilson

Signature of Treasurer

Pamela G Wilson

Date

10 / 11 / 2016

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Licking County Democratic Women's Caucus

Report Covering the Period:

From:

09 ' *01* ' *2014*

To:

09 ' *30* ' *2016*

**COLUMN A
This Period**

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

6. (a) Cash on Hand January 1, <i>2016</i>	<i>3578</i>	<i>3578</i>
(b) Cash on Hand at Beginning of Reporting Period.....	<i>2928</i>	
(c) Total Receipts (from Line 19).....	<i>1746.00</i>	<i>1801</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<i>1775.78</i>	<i>1858.78</i>
7. Total Disbursements (from Line 31).....	<i>1376.75</i>	<i>1459.05</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<i>399.53</i>	<i>399.53</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<i>-0-</i>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<i>-0-</i>	



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)

Page 3

Write or Type Committee Name

Ulching County Democratic Women's Caucus

Report Covering the Period: From:

07 / *01* / *2014*

To:

09 / *30* / *2016*

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).....

1000

1000

(ii) Unitemized.....

744

819

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1746

1821

(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).....▶

1746

1821

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)).....▶

1746

1821

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

NON-FEDERAL AND LEVIN FUNDS

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.....	13,767.25	14,597.25
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13,767.25	14,597.25
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(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		
30. Federal Election Activity (2 U.S.C. §431(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))..	13,767.25	14,597.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

NON-FEDERAL SHARE

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)	1746	1520
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13762.5	1459.25

NON-PROFIT ORGANIZATION

1

**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 OF	
<input 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)
Licking County Democratic Women's Caucus

A. Full Name (Last, First, Middle Initial)
Vicky Christensen

Mailing Address
172 Hudson

City **Newark OH** State **OH** Zip Code **43055**

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

Name of Employer **self** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200-

Date of Receipt
08' 31' 2016

Amount of Each Receipt this Period
200-

B. Full Name (Last, First, Middle Initial)
Christensen, Vicky

Mailing Address
172 Hudson

City **Newark OH** State **OH** Zip Code **43055**

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

Name of Employer **self** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200-

Date of Receipt
09' 30' 2016

Amount of Each Receipt this Period
60-
INKING stamps

C. Full Name (Last, First, Middle Initial)
Wilson, Pam

Mailing Address
137 Pembroke

City **Granville OH** State **OH** Zip Code **43023**

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

Name of Employer **self** Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200-

Date of Receipt
08' 31' 2016

Amount of Each Receipt this Period
200-

SUBTOTAL of Receipts This Page (optional)..... **460-**

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

NOT TO BE RECORDED

**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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)
Licking County Democratic Women's Caucus

A. Full Name (Last, First, Middle Initial)
Clausen, Arthur

Mailing Address
405 Louder rd

City
Parkersburg State
OH Zip Code
43062

FEC ID number of contributing federal political committee.
C

Name of Employer
Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400-

Date of Receipt
09 / *02* / *2014*

Amount of Each Receipt this Period
400-

B. Full Name (Last, First, Middle Initial)
Richardson, Susan

Mailing Address
211 W Elm St

City
Granville State
OH Zip Code
43023

FEC ID number of contributing federal political committee.
C

Name of Employer
Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100-

Date of Receipt
09 / *20* / *2016*

Amount of Each Receipt this Period
100-

C. Full Name (Last, First, Middle Initial)
Richardson, Susan

Mailing Address
211 W Granville Elm

City
Granville State
OH Zip Code
43023

FEC ID number of contributing federal political committee.
C

Name of Employer
Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
134-

Date of Receipt
09 / *20* / *2014*

Amount of Each Receipt this Period
34-

IN HAND STAMPS

SUBTOTAL of Receipts This Page (optional).....	<i>534-</i>
TOTAL This Period (last page this line number only).....	<i>1002-</i>

20160110141001001001001001

3

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

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

FOR LINE NUMBER: (check only one)

PAGE OF

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

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NAME OF COMMITTEE (In Full)

Licking County Democratic Women's Caucus

Full Name (Last, First, Middle Initial)

A.

USPS

Mailing Address

703 W Broadway

City

NEWARK

State

OH

Zip Code

43023

Purpose of Disbursement

Postage Stamps

Candidate Name

006

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

09 / 08 / 2016

Amount of Each Disbursement this Period

680

B.

A Printed Impression

Mailing Address

11 W Main St

City

NEWARK

State

OH

Zip Code

43055

Purpose of Disbursement

Print material

Candidate Name

006

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

09 / 08 / 2016

Amount of Each Disbursement this Period

536.25

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

006

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

000

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

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

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2016-10-14 10:00:00 AM

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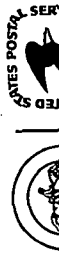


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PHONE ()
150 W. C. NEWARK OH 43055
26463

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<input type="checkbox"/> Military	<input type="checkbox"/> DPO	Delivery Attempt (MM/DD/YYYY)	Time
Postage	Scheduled Delivery Date (MM/DD/YYYY)	Employee Signature	
\$	10/14/16		
Insurance Fee	Scheduled Delivery Time	Employee Signature	
\$	<input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM		
Return Receipt Fee	<input checked="" type="checkbox"/> 12 NOON	Employee Signature	
\$	10:30 AM Delivery Fee		
Live Animal Transportation Fee	Weight	Employee Signature	
\$	lbs. ozs.		
Total Postage & Fees	Flat Rate	Employee Signature	
\$	\$		
	Sunday/Holiday Premium Fee	Employee Signature	
	Acceptance/Employee Initials		

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<input type="checkbox"/> No Postmark	
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<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

10/14/16
 DATE PREPARED

20161013 10:00:00 AM