

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Take Back Red California

ADDRESS (number and street) 21 Convent Court San Rafael CA 94901 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00421388 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Report for the: Post-Election, General, Runoff, Special

5. Covering Period 04 01 2009 through 06 30 2009

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 Mary W. Hubert

Signature of Treasurer Electronically Filed by Mary W. Hubert Date 10 17 2009

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

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Take Back Red California

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		1800.59
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	21706.11									
(c) Total Receipts (from Line 19)	7189.30	29493.38								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	28895.41	31293.97								
7. Total Disbursements (from Line 31)	25648.00	28046.56								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3247.41	3247.41								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Take Back Red California

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	1112.00	4206.00
(ii) Unitemized	3167.90	22027.98
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4279.90	26233.98
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	482.00	832.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	4761.90	27065.98
12. Transfers From Affiliated/Other Party Committees	2427.40	2427.40
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	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	7189.30	29493.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7189.30	29493.38

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.21	0.21
(ii) Non-Federal Share.....	2714.33	2714.33
(b) Other Federal Operating Expenditures.....	3703.79	5764.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6418.33	8478.89
22. Transfers to Affiliated/Other Party Committees.....	450.00	450.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	116.00	116.00
(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))	116.00	116.00
29. Other Disbursements.....	18663.67	19001.67
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	25648.00	28046.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22933.67	25332.23

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	4761.90	27065.98
34. Total Contribution Refunds (from Line 28(d))	116.00	116.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4645.90	26949.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3704.00	5764.56
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3704.00	5764.56

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)

<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)
Take Back Red California

A.

Full Name (Last, First, Middle Initial)
Jo Anderson

Mailing Address 859 Jones Rd.
Apt 17

City State Zip Code
Yuba City CA 95991-6170

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt
MM / DD / YYYY
05 / 13 / 2009

Transaction ID: SA11AI.5981

Amount of Each Receipt this Period
110.00

B.

Full Name (Last, First, Middle Initial)
Jo Anderson

Mailing Address 859 Jones Rd.
Apt 17

City State Zip Code
Yuba City CA 95991-6170

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt
MM / DD / YYYY
05 / 13 / 2009

Transaction ID: SA11AI.5983

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Daniel Cucchi

Mailing Address 3932 Halsey Ave.

City State Zip Code
Yuba City CA 95993

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

Name of Employer Occupation
Yuba County County Planner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt
MM / DD / YYYY
05 / 13 / 2009

Transaction ID: SA11AI.5999

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **170.00**

TOTAL 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 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Take Back Red California

A.	Full Name (Last, First, Middle Initial) Carolyn Curtis		Date of Receipt
	Mailing Address 531 Alger Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 01 / 2009
	City	State	Zip Code
	Palo Alto	CA	94306-3530
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6006
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.00	<input type="text"/> 100.00

B.	Full Name (Last, First, Middle Initial) Pamela Honsberger		Date of Receipt
	Mailing Address 18626 Vanderlip Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 29 / 2009
	City	State	Zip Code
	Santa Ana	CA	92705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5934
Name of Employer Kaiser Medical Center		Occupation Physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	<input type="text"/> 400.00

C.	Full Name (Last, First, Middle Initial) Mary W. Hubert		Date of Receipt
	Mailing Address 21 Convent Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 01 / 2009
	City	State	Zip Code
	San Rafael	CA	94901
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5945
Name of Employer N/A		Occupation Volunteer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 422.00	<input type="text"/> 180.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 680.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 8 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Take Back Red California

A.	Full Name (Last, First, Middle Initial) Mary W. Hubert	Date of Receipt MM / DD / YYYY 05 / 01 / 2009
	Mailing Address 21 Convent Court	Transaction ID: SA11AI.5946
	City State Zip Code San Rafael CA 94901	Amount of Each Receipt this Period 116.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 538.00	

B.	Full Name (Last, First, Middle Initial) Susan Rowe	Date of Receipt MM / DD / YYYY 05 / 13 / 2009
	Mailing Address 28481 Copper Creek Dr.	Transaction ID: SA11AI.5907
	City State Zip Code Coarsegold CA 93614	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer None Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.00	

C.	Full Name (Last, First, Middle Initial) Jo Ann Souvignier	Date of Receipt MM / DD / YYYY 04 / 17 / 2009
	Mailing Address 4714 Salem Way	Transaction ID: SA11AI.5980
	City State Zip Code Carmichael CA 95608-2235	Amount of Each Receipt this Period 116.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

SUBTOTAL of Receipts This Page (optional)	252.00
TOTAL 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: PAGE 9 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Take Back Red California

A. Full Name (Last, First, Middle Initial)
Jo Ann Souvignier

Mailing Address 4714 Salem Way

City State Zip Code
Carmichael CA 95608-2235

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.5982

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)	▶	10.00
TOTAL This Period (last page this line number only)	▶	1112.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 17
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Take Back Red California

A. Full Name (Last, First, Middle Initial)
BERA FOR CONGRESS

Mailing Address Post Office Box 582496

City State Zip Code
Elk Grove CA 95758

FEC ID number of contributing federal political committee. **C** C00461061

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 24 / 2009

Transaction ID: SA11C.6022

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Paradise Ridge Dem Club

Mailing Address P.O. Box 1311

City State Zip Code
Paradise CA 95967

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
174.00

Date of Receipt
MM / DD / YYYY
04 / 13 / 2009

Transaction ID: SA11C.5932

Amount of Each Receipt this Period
174.00

C. Full Name (Last, First, Middle Initial)
PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Mailing Address PO Box 150064

City State Zip Code
Grand Rapids MI 49515

FEC ID number of contributing federal political committee. **C** C00402800

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY
04 / 13 / 2009

Transaction ID: SA11C.5925

Amount of Each Receipt this Period
58.00

SUBTOTAL of Receipts This Page (optional) ▶ **482.00**

TOTAL This Period (last page this line number only) ▶ **482.00**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

A.	Full Name (Last, First, Middle Initial) Take Back Red California		Date of Receipt	
	Mailing Address 21 Convent Court		M M / D D / Y Y Y Y 05 / 01 / 2009	
	City	State	Zip Code	Transaction ID: SA12.6054
	San Rafael	CA	94901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C C00421388	2427.40
	Name of Employer	Occupation		State PAC share of dinner expenses
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2427.40		

SUBTOTAL of Receipts This Page (optional)	▶	2427.40
TOTAL This Period (last page this line number only)	▶	2427.40

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)
Take Back Red California

<p>A. Full Name (Last, First, Middle Initial) ACTBLUE</p> <p>Mailing Address P.O. Box 382110</p> <p>City Cambridge State MA Zip Code 02238</p> <p>Purpose of Disbursement service charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6048 Date of Disbursement 06 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3.78</p> <p>003 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Advantage Presentations</p> <p>Mailing Address 1030 15th St. Suite 110</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement sound system for Red to Blue dinner Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6039 Date of Disbursement 04 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 360.55</p> <p>003 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) City of Sacramento</p> <p>Mailing Address 915 I Street</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement insurance Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6035 Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 155.00</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

519.33

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)

PAGE 13 / 17

<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)
Take Back Red California

A.	Full Name (Last, First, Middle Initial) four waters media	Transaction ID: SB21B.6033 Date of Disbursement 04 / 03 / 2009
	Mailing Address 624 Todhunter Rd.	Amount of Each Disbursement this Period 249.75
	City West Sacramento State CA Zip Code 95605	
	Purpose of Disbursement design Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mary W. Hubert	Transaction ID: SB21B.6044 Date of Disbursement 04 / 21 / 2009
	Mailing Address 21 Convent Court	Amount of Each Disbursement this Period 55.40
	City San Rafael State CA Zip Code 94901	
	Purpose of Disbursement flowers for dinner Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Perfect Image Printing	Transaction ID: SB21B.6031 Date of Disbursement 04 / 03 / 2009
	Mailing Address 3223 Monier Circle	Amount of Each Disbursement this Period 2474.06
	City Rancho Cordova State CA Zip Code 95742	
	Purpose of Disbursement invites, programs for Red to Blue Dinner Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2779.21
TOTAL This Period (last page this line number only)	3298.54

**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 14 / 17

<input type="checkbox"/> 21b	<input checked="" 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)
Take Back Red California

A.

Full Name (Last, First, Middle Initial)
Take Back Red California

Mailing Address 21 Convent Court

City San Rafael State CA Zip Code 94901

Purpose of Disbursement
Transfer state contributions to state ac

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.6046
Date of Disbursement

04 / 17 / 2009

Amount of Each Disbursement this Period

450.00

SUBTOTAL of Disbursements This Page (optional) ▶

450.00

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

450.00

**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)

PAGE 15 / 17

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Take Back Red California

<p>A.</p> <p>Full Name (Last, First, Middle Initial) ASUC Cal Dems</p> <p>Mailing Address Univeristy of CA 400 Eshleman Hall, MC 4500</p> <p>City Berkeley State CA Zip Code 94720</p> <p>Purpose of Disbursement Table fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6028</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>012 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Centerplate</p> <p>Mailing Address 2187 Atlantic Street</p> <p>City Stamford State CT Zip Code 06902</p> <p>Purpose of Disbursement catering for Red to Blue dinner</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6042</p> <p>Date of Disbursement 04 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 18413.67</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

18663.67

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

18663.67

METHOD OF ALLOCATION FOR:

- SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 Take Back Red California

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Take Back Red California

A. Full Name (Last, First, Middle Initial)
Martha Gamez

Mailing Address
2020 Seville Dr.

City	State	Zip Code
Tracy	CA	95377

001

Purpose of Disbursement:
food for training in Redding

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2714.54

Activity or Event Identifier:
Administrative

Date 06 / 27 / 2009

Transaction ID: H4.6051

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.21		2714.33		2714.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.21		2714.33		2714.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.21		2714.33		2714.54