PAGE 1 / 30

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An Au	thorized Committee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, over the lines.	type 12FE4M:	5
San Francisco Democr	ratic County Central	Committee		
ADDRESS (number and street)	PO Box 210119			
▼ Check if different				
than previously reported. (ACC)	San Francisco		L CA	94121
2. FEC IDENTIFICATION NU	IMBER ▼ CI	TY▲	STATE ▲	ZIP CODE ▲
C C00392928		S THIS NEV	OR AM	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:			20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:	H H			Year Only)
April 15 Quarterly Report (Q		7 20 (M4) Jul	20 (M7) Oct 2	20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q	(c) 12-Day	Primary (12P)	x General (12G) Runoff (12R)
October 15 Quarterly Report (Q	Report for the:	Convention (120	Special (1	128)
January 31 Year-End Report (Y			08 2022	in the State of CA
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Electi	on on	D / Y = Y = Y	in the State of
5. Covering Period 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through	M M / D D / 19	2022
I certify that I have examined the	s Report and to the best o	f my knowledge and beli	ef it is true, correct and	complete.
Type or Print Name of Treasurer	Owens, Stacy, , ,			
Signature of Treasurer Owen	s, Stacy, , ,	[Electronically Fi	ded] Date 12	08 / 2022
NOTE: Submission of false, errone	eous, or incomplete information	on may subject the person	signing this Report to th	e penalties of 52 U.S.C. § 30109
Office				FEC FORM 3X
Use Only				Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

San Francisco Democratic County Central Committee

Report Covering the Period: From: 10 01 2022 To: 10 19 2022

		COLUMN A This Period	COLUMN B Calendar Year-to-Date				
6.	(a) Cash on Hand January 1, 2022		25222.22				
	(b) Cash on Hand at Beginning of Reporting Period	21778.21					
	(c) Total Receipts (from Line 19)	30350.45	197543.63				
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	52128.66	222765.85				
7.	Total Disbursements (from Line 31)	1029.09	171666.28				
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	51099.57	51099.57				
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)	10121.35					

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. 05/2016) Page 3

Write or Type Committee Name

San Francisco Democratic County Central Committee

10 01 2022 10 19 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 12560.00 52515.00 (i) Itemized (use Schedule A)..... 15.00 4207.01 (ii) Unitemized (iii) TOTAL (add 56722.01 12575.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 17000.00 37700.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 94422.01 29575.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 478.51 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... 775.45 102643.11 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 775.45 102643.11 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))......▶ 30350.45 197543.63 20. Total Federal Receipts 29575.00 94900.52 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	Total This Period	COLUMN B Calendar Year-to-Date			
Operating Expenditures: (a) Allocated Federal/Non-Federal	iotal fillo i criou	Galefidai Tedi-to-Date			
Activity (from Schedule H4) (i) Federal Share	206.13	62358.76			
(ii) Non-Federal Share	775.45	102643.11			
(b) Other Federal Operating Expenditures	47.51	6474.4			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1029.09	171476.28			
Transfers to Affiliated/Other Party	75 75 75	7 7 7 7 7			
CommitteesContributions to	0.00	0.00			
Federal Candidates/Committees and Other Political Committees	0.00	190.00			
Independent Expenditures (use Schedule E)	0.00	0.00			
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00			
Loan Repayments Made	0.00	0.00			
Loans Made Refunds of Contributions To:	0.00	0.00			
(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	0.00	0.00			
(add Lines 28(a), (b), and (c))	0.00	0.00			
Other Disbursements (Including		0.00			
Non-Federal Donations)	0.00	0.00			
Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share	0.00	0.00			
<u> </u>	0.00	0.00			
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00			
Entirely With Federal Funds	0.00	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1029.09	171666.28			
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	253.64	69023.17			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 29575.00 94422.01 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 94422.01 29575.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 253.64 68833.17 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 478.51 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 253.64 68354.66 (subtract Line 37 from Line 36)

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: F3XA Transaction ID :

Updated descriptions on Schedule D.

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c

30

Detailed Summary Page 13 14 15 16 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) San Francisco Democratic County Central Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name J Fine, Mitch, , , Date of Receipt Mailing Address 4575 San Pablo Avenue 2022 City Zip Code State Transaction ID: IA16635 CA Emeryville 94608 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NewohLLC Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ActBlue Date of Receipt Mailing Address P.O. Box 382110 10 2022 City State Zip Code Transaction ID : DA3316 MA Cambridge 02238 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 15622.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Karkar, Andrei Mikhail, Date of Receipt Mailing Address 323 Marina Blvd 10 18 2022 City State Zip Code Transaction ID: IA16663 CA San Francisco 94123 Amount of Each Receipt this Period FEC ID number of contributing C 4000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) ERAS Holdings, LLC Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 4000.00 Other (specify) 4500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SA11AI Transaction ID: IA16635

Earmarked through Actblue.

Form/Schedule: SA11AI Transaction ID: DA3316

Total earmarked through conduit; PAC limit not affected

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)

FOR LINE NUMBER:					PAGE		9	OF		30	
(0	(check only one)										
X 11a 11b 11c 12											
		13		14		15		16	;		17

for each category of the Detailed Summary Page 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) San Francisco Democratic County Central Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Raju, Manohar, , , Date of Receipt Mailing Address 291 Capistrano Avenue 2022 City State Zip Code Transaction ID: IA16673 CA San Francisco 94112 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) San Francisco Public Defender Public Defender Receipt For: Aggregate Year-to-Date ▼ Primary General 200.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ActBlue Date of Receipt Mailing Address P.O. Box 382110 10 2022 City State Zip Code Transaction ID: DA3321 MA Cambridge 02238 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 15622.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Stern, Matthew, , , Date of Receipt Mailing Address 218 Ellsworth St 10 04 2022 City State Zip Code Transaction ID: IA16615 CA San Francisco 94110 Amount of Each Receipt this Period FEC ID number of contributing C 8000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) DECA Companies, LLC Partner Receipt For: Aggregate Year-to-Date ▼ Primary General 8000.00 Other (specify) 8020.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SA11AI Transaction ID: IA16673

Earmarked through Actblue.

Form/Schedule: SA11AI Transaction ID: DA3321

Total earmarked through conduit; PAC limit not affected

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:				PAGE	•	11	OF		30		
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X 11a 11b 11c 12											
		13		14		15		16	;		17

Detailed Summary Page 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) San Francisco Democratic County Central Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Thomas, Amar, , , Date of Receipt Mailing Address 1036 Divisadero Street 18 2022 City State Zip Code Transaction ID: IA16670 CA San Francisco 94115 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) City & County Of San Francisco, CA Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General 200.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ActBlue Date of Receipt Mailing Address P.O. Box 382110 10 2022 City State Zip Code Transaction ID : DA3318 MA Cambridge 02238 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 15622.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Walker, Alex, , , Date of Receipt Mailing Address 209 Otsego Avenue 10 13 2022 City State Zip Code Transaction ID: IA16672 CA San Francisco 94112 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) California State Assembly Field Representative Receipt For: Aggregate Year-to-Date ▼ Primary General 200.00 Other (specify) 40.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SA11AI Transaction ID: IA16670

Earmarked through Actblue.

Form/Schedule: SA11AI Transaction ID: DA3318

Total earmarked through conduit; PAC limit not affected

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SA11AI Transaction ID: IA16672

Earmarked through Actblue.

Form/Schedule: Transaction ID:

federal political committee.

Receipt For:

C

Primary

Name of Employer (for Individual)

General

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 NO (check only or x) 11a

FOR LINE NUMBER:					PAGE	•	14	OF	30	
	(check only one)									
	X 11a 11b 11c 12									
		13		14		15		16		17

Memo Item

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) San Francisco Democratic County Central Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ActBlue Date of Receipt Mailing Address P.O. Box 382110 2022 13 City State Zip Code Transaction ID: DA3320 MA Cambridge 02238 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 15622.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing

Other (specify) ▼		
Full Name of Individual (Last, First, Middle Ir Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	C Occupation (for Individual)	Amount of Each Receipt this Period Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		0.00

Occupation (for Individual)

Aggregate Year-to-Date ▼

12560.00

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: SA11AI Transaction ID: DA3320

Total earmarked through conduit; PAC limit not affected

Form/Schedule: Transaction ID:

S 17

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 16 OF 30					
ITI	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)					
			Detailed Summary Page	11a 11b X 11c 12					
An	v information copied from such Benorts and St	atements m	l av not he sold or used by any no	erson for the purpose of soliciting contributions					
	for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full)								
	San Francisco Democratic Cour	ity Centr	al Committee						
Α.	Full Name of Individual (Last, First, Middle Initi Kevin Mullin for Congress	al) or Full C	organization Name	Date of Receipt					
	Mailing Address PO Box 5486			10 07 2022					
	City	State	Zip Code	Transaction ID : IA16623					
	South San Francisc	CA	94083-5486	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0795005	2000.00					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
	Receipt For:	Aggragata	Year-to-Date ▼						
	Primary General	Aggregate	Tear-to-Date v	1					
	Other (specify) ▼		8000.00						
	Full Name of Individual (Last, First, Middle Initi Nancy Pelosi for Congress	al) or Full C	rganization Name	Date of Receipt					
	Mailing Address 700 13th Street NW, Suite 600			10 05 2022					
	City	State	Zip Code	Transaction ID : IA16616					
	Washington	CA	20005	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0213512	15000.00					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		25000.00						
	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Organization Name						
C.	Mailing Address			Date of Receipt					
	City	State	Zip Code						
				Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		, ,					
Name of Employer (for Individual)		Occ	upation (for Individual)	Memo Item					
	Receipt For:	Angregate	Year-to-Date ▼						
	Primary General	Aggregate	Teal to Bate 1	1					
	Other (specify)		4-14-14-1						
s	UBTOTAL of Receipts This Page (optional)			17000.00					
<u> </u>	1		•						

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

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SCHEDULE B (FEC Form 3X)	He -	and a stand of the	FOR LINE NUMBER: PAGE 1				17 C	F 30			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	I `	(check only one)			, -		_	٦ ٥٦	
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Any information copied from such Reports and Statem	L nonte mou	not he sold or									ione
or for commercial purposes, other than using the name											
NAME OF COMMITTEE (In Full)											
San Francisco Democratic County	Committee										
Full Name (Last, First, Middle Initial)					5	·					
A. ActBlue Technical Services					Date of	Disbu	ırsem	ent 			
Mailing Address 14 Arrow Street, Suite 11					10] ′	09	′		2022	Y
City	State	Zip Code			FEC Ide	antifica	ation	Numh	Ωr		
Gameriage	MA	02138				SHILIHOO	ation	INUITID	CI.	-	
Purpose of Disbursement Credit Card Fees			003	7	C						
Candidate Name						nsact				-	No od o od
			Category Type	"	Amount	or Ea	icn D	isburs	emen	it this F	'erioa
Office Sought: House Disbursen	nent For:		71							19.7	5
	Primary	General				7					
	Other (spe	cify) ▼			Me	mo Ite	m				
State: District:											
Full Name (Last, First, Middle Initial) B. ActBlue Technical Services					Date of	Dish	ırsem	ent			
2. Actibide reclinical Services					M M		D D	_	V	Y	V
Mailing Address 14 Arrow Street, Suite 11					10 16 2022						
,	State MA	Zip Code 02138			FEC Ide	entifica	ation	Numb	er		
Cambridge Purpose of Disbursement	IVIA	02136		С							
Credit Card Fees			003				an IF	\ . ED	4007		
Candidate Name	Category/			//	Amount	nsact i ∶of Ea					eriod
		Туре				_	-	-	_	4.5	
Office Sought: House Disbursen Senate		Conoral			1.58					8	
	Primary General Other (specify)										
State: District:	Other (ope	ony)			Me	mo Ite	m				
Full Name (Last, First, Middle Initial)											
C. ActBlue Technical Services					Date of	Disbu	ırsem	ent			
					M = M	/	D D	/		Y	Υ
Mailing Address 14 Arrow Street, Suite 11					10		19	Ш	_ 2	2022	
City	State	Zip Code			FF0 !:	- m t ! f !	A! '	NI 1			
Cambridge	MA	02138			FEC Ide	entifica	tion	Numb	er	_	
Purpose of Disbursement Credit Card Fees					C						
Candidate Name		003			nsact						
Candidate Name			Category Type	//	Amount	of Ea	ich D	isburs	emen	t this F	eriod
Office Sought: House Disbursen	nent For:		1900							1.3	9
	Primary	General				7		7		1 46	
President	cify) ▼			Memo Item							
State: District:											
SUBTOTAL of Disbursements This Page (optional)				•				1.0		22.7	2
<u> </u>				_	_	,			_	1	
TOTAL This Period (last page this line number only).				•	1 .					22.7	2

Excluding Loans

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

FOR LINE NUMBER: (check only one)

PAGE 18 OF

	9
X	10

30

NAME OF COMMITTEE (In Full)
San Francisco Democratic County Central Committee

A. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose):		
S.E. Owens & Company	Accounting & Compliance Services		
Mailing Address 312 Clay Street, Suite 300			
City	State	Zip Code	
Oakland	CA	94607	
Outstanding Balance Beginning This Period			Transaction ID : PD16102
586.49			
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
0.00		0.00	586.49
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		Nature of Debt (Purpose):
S.E. Owens & Company			Accounting & Compliance Services
Mailing Address 312 Clay Street, Suite 300			
City	State	Zip Code	
Oakland	CA	94607	
Outstanding Balance Beginning This Period			Transaction ID : PD16146
636.00			
Amount Incurred This Period	Pay	yment This Period	Outstanding Balance at Close of This Period
0.00	<u> </u>	0.00	636.00
C. Full Name (Last, First, Middle Initial) of Debtor S.E. Owens & Company	or Creditor		Nature of Debt (Purpose): Accounting & Compliance Services
Mailing Address 312 Clay Street, Suite 300			
City	State	Zip Code	
Oakland	CA	94607	
Outstanding Balance Beginning This Period 2300.00			Transaction ID : PD16192
Amount Incurred This Period	Pav	ment This Period	Outstanding Balance at Close of This Period
0.00	2300.00		
			2522.40
SUBTOTALS This Period This Page (optional)		<u> </u>	3522.49
TOTALS This Period (last page this line number of			
TOTAL OUTSTANDING LOANS from Schedule C			
ADD 2) and 3) and carry forward to appropriate li	ne of Summa	ary Page (last page only) ▶	

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9 **X** 10

PAGE 19 OF 30

NAME OF COMMITTEE (In Full) San Francisco Democratic County Cer	ntral Com	mittee				
S.E. Owens & Company	·					
City Oakland	City State Zip Code					
Outstanding Balance Beginning This Period 1136.00	Transaction ID : PD16313					
Amount Incurred This Period 0.00	Paym	nent This Period	Outstanding Balance at Close of This Period			
B. Full Name (Last, First, Middle Initial) of Debtor or S.E. Owens & Company	Creditor		Nature of Debt (Purpose): Accounting & Compliance Services			
Mailing Address 312 Clay Street, Suite 300 City Oakland	City State Zip Code					
Outstanding Balance Beginning This Period 1086.00	<u> </u>		Transaction ID : PD16382			
Amount Incurred This Period 0.00	Paym	nent This Period	Outstanding Balance at Close of This Period			
C. Full Name (Last, First, Middle Initial) of Debtor of S.E. Owens & Company	or Creditor		Nature of Debt (Purpose): Accounting & Compliance Services			
Mailing Address 312 Clay Street, Suite 300 City Oakland	State CA	Zip Code 94607				
Outstanding Balance Beginning This Period 1086.00			Transaction ID : PD16485			
Amount Incurred This Period 0.00	Paym	nent This Period 0.00	Outstanding Balance at Close of This Period 1086.00			
1) SUBTOTALS This Period This Page (optional)		>	3308.00			
2) TOTALS This Period (last page this line number on3) TOTAL OUTSTANDING LOANS from Schedule C (
4) ADD 2) and 3) and carry forward to appropriate line						

Excluding Loans

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

FOR LINE NUMBER: (check only one)

PAGE 20 OF

	9
X	10

30

NAME OF COMMITTEE (In Full)
San Francisco Democratic County Central Committee

A. Full Name (Last, First, Middle Initial) of Debtor	or Craditar		Neture of Dobt (Durance)	
, , , , , , , , , , , , , , , , , , , ,	or Creditor		Nature of Debt (Purpose): Accounting & Compliance Services	
S.E. Owens & Company				
Mailing Address 312 Clay Street, Suite 300				
City	State	Zip Code		
Oakland	CA	94607		
Outstanding Balance Beginning This Period			Transaction ID : PD16596	
1371.05				
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period	
0.00	· · ·	0.00	1371.05	
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		Nature of Debt (Purpose):	
S.E. Owens & Company			Office Cost	
Mailing Address 312 Clay Street, Suite 300				
City	State	Zip Code	_	
Oakland	CA	94607		
Outstanding Balance Beginning This Period			Transaction ID : PD16844	
50.00				
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	50.00	
C. Full Name (Last, First, Middle Initial) of Debtor S.E. Owens & Company	or Creditor		Nature of Debt (Purpose): Office Cost	
Mailing Address 312 Clay Street, Suite 300			_	
City	State	Zip Code		
Oakland	CA	94607		
Outstanding Balance Beginning This Period			Transaction ID : PD16847	
543.76				
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period	
0.00	· · · ·	0.00	543.76	
			1964.81	
SUBTOTALS This Period This Page (optional)			1304.01	
TOTALS This Period (last page this line number of	only)	······		
TOTAL OUTSTANDING LOANS from Schedule C	(last page o	nly) ▶		
ADD 2) and 3) and carry forward to appropriate li	ne of Summa	ary Page (last page only) ▶		

Excluding Loans

(Use separate schedule(s) for each

PAGE FOR LINE NUMBER: (check only one)

	9
X	10

30

21 OF

numbered line) NAME OF COMMITTEE (In Full) San Francisco Democratic County Central Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Accounting & Compliance Services S.E. Owens & Company Mailing Address 312 Clay Street, Suite 300 State Zip Code Oakland CA 94607 Transaction ID: PD16664 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1050.00 1050.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Office Cost S.E. Owens & Company Mailing Address 312 Clay Street, Suite 300 City State Zip Code Oakland 94607 CA Outstanding Balance Beginning This Period Transaction ID: PD16850 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 276.05 276.05 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 1326.05 1) SUBTOTALS This Period This Page (optional).....

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

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

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

10121.35

10121.35

0.00

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 22 OF 30 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)		I OH LINE TOO OF TOTAIN OA
San Francisco Democratic County Central Committee		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
San Francisco Democratic County Central Committee	10 19 / 2022	775.45
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		775.45
		Transaction ID : IH3AD16690
ii) Generic Voter Drive		
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event Id	entifier)	
a)		1
a)		
b)		
c) Total Amount Transferred For Direct Fund	raising	7 7 7
v) Direct Candidate Support (List Activity or E	Event Identifier)	
		1
a)		_
b)		7
/		
c) Total Amount Transferred For Direct Cand	idate Support	
vi) Public Communications Referring Only to	Party (Made by PAC)	
TOTALS F	OR BREAKDOWN OF TRANSFER RECEIVE	ED
TOTAL This Period (Administrative)		775.45
TOTAL This Period (Generic Voter Drive)		0.00
(
TOTAL This Period (Exempt Activities)		0.00
TOTAL This Period (Direct Fundraising)		0.00
		0.00
TOTAL This Period (Direct Candidate Support)		3.00
TOTAL This Period (Public Communications Referring	g Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)		775.45

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	23	OF	30	
FOR L	INE 2	1a OF	FORM	3X

NAME OF COMMITTEE (In Full)

Adobe Mailing Address 345 Park Avenue Voter Drive	<u> </u>	an Francisco Democratic County	,	Committee		
Mailing Address 345 Park Avenue City Charagory City Administrative FEDERAL SHARE FEDERAL SHARE Activity or Event Identifier: Administrative State City Charagory City Administrative FEDERAL SHARE	A.		tion ID : EH	416659	☐ Memo Item	Allocated Activity or Event:
City San Jose CA 95110-2704 Purpose of Disbursement: Software Bitue Cross Blue Shield Mailing Address 225 North Michigan Avenue Chicago Purpose of Disbursement: Blue Cross Blue Shield Mailing Address 225 North Michigan Avenue Chicago Purpose of Disbursement: Activity or Event Identifier: Administrative Category/ Type Date II Go601 Purpose of Disbursement: Health Insurance Activity or Event Identifier: Administrative Activity or Event Identifier: Administrative Category/ Type Date II Go623 Purpose of Disbursement: Delta Dential Maing Address 1515 West 22nd Street, #1200 City Oak Brook Activity or Event Identifier: Administrative FEDERAL SHARE FEDERAL SH						Administrative Fundraising Exem
San Jose Purpose of Disbursement: Software Activity or Event Identifier: Administrative FEDERAL SHARE		345 Park Avenue				Voter Drive Direct Candidate Supp
Purpose of Disbursement: Software Activity or Event Identifier: Administrative FEDERAL SHARE						Public Comm (ref to party only) by PAC
Activity or Event Identifier: Administrative FEDERAL SHARE			CA	95110-270	04 	Allocated Activity or Event Year-To-Date
Administrative Category Date 10 12 2022					001	69455.72
Type Date 10 12 2022					Catanamil	
B. Full Name (Last, First, Middle Initial) Transaction ID : EH416617 Blue Cross Blue Shield Malling Address 225 North Michigan Avenue City Chicago IL 60601 Purpose of Disbursement: Health Insurance Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 132,04 C. Full Name (Last, First, Middle Initial) Transaction ID : EH416665 Delta Dental Mailing Address 1515 West 22nd Street, #1200 City Category/ Type Delta Dental Mailing Address 1515 West 22nd Street, #1200 Colly Oak Brook Repose of Disbursement: Administrative Lead Activity or Event Identifier: Administrative Subtotal Activity or Event Identifier: Administrative Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT Activity or Event Identifier: Administrative Subtotal Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 11.72 14.83 SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 SUBTOTAL This Period (last page for each line only)(Federal share to 21(a)(i)) and NonFederal share to 21(a)(ii))		Administrative				40 40 0000
B. Full Name (Last, First, Middle Initial) Transaction ID : EH416617 Blue Cross Blue Shield Mailing Address 225 North Michigan Avenue City Chicago IL 60601 Purpose of Disbursement: Health Insurance Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT Category/ Oak Brook Purpose of Disbursement: I Allocated Activity or Event: Wadministrative Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date G9455.72 Activity or Event Identifier: Administrative Allocated Activity or Event: Administrative Allocated Activity or Event: Administrative Allocated Activity or Event: Administrative Fundraising Exemp Allocated Activity or Event: Administrative Fundraising Exemp Allocated Activity or Event: Administrative Fundraising Exemp Oot Oak Brook Purpose of Disbursement: Dental insurance Oot Activity or Event Identifier: Administrative Fundraising Exemp Oot Allocated Activity or Event: Administrative Fundraising Exemp Oot Oak Brook Purpose of Disbursement: Dental insurance Oot Activity or Event Identifier: Administrative Category/ Type Date Total AMOUNT 11.72 14.83 SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(i))		FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
Blue Cross Blue Shield Mailing Address 225 North Michigan Avenue City Chicago Purpose of Disbursement: Health Insurance Administrative FEDERAL SHARE TOTAL AMOUNT City Oak Brook Purpose of Disbursement: Ballocated Activity or Event Identifier: Administrative City Oak Brook Purpose of Disbursement: Ballocated Activity or Event Identifier: Administrative Allocated Activity or Event: Alloc		6.30		7	23.69	29.99
Mailing Address 225 North Michigan Avenue Voter Drive Direct Candidate Support	В.		tion ID : EH	416617	☐ Memo Item	Allocated Activity or Event:
City Chicago IIL Go601 Purpose of Disbursement: Health Insurance Activity or Event Identifier: Administrative Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 132.04 Allocated Activity or Event Year-To-Date G9455.72 FULL Name (Last, First, Middle Initial) Transaction ID: EH416665 Delta Dental Mailing Address 1515 West 22nd Street, #1200 City Oak Brook IIL 60523 Purpose of Disbursement: Bental insurance Activity or Event Identifier: Administrative Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT Category/ Type Date Allocated Activity or Event: Fundraising Exemp Public Comm (ref to party only) by PAC Allocated Activity or Event: Fundraising Exemp Public Comm (ref to party only) by PAC Allocated Activity or Event: Fundraising Sea.77 Activity or Event Identifier: Administrative Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 11.72 14.83 SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))						X Administrative Fundraising Exem
Chicage Purpose of Disbursement: Health Insurance Activity or Event Identifier: Administrative Category/ Type FEDERAL SHARE		Mailing Address 225 North Michigan Avenue				Voter Drive Direct Candidate Supp
Purpose of Disbursement: Health Insurance Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 132.04 496.73 C. Full Name (Last, First, Middle Initial) Transaction ID: EH416665 Delta Dental Mailing Address 1515 West 22nd Street, #1200 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative Category/ Type Allocated Activity or Event: X Administrative Fundraising Exemp Voter Drive Direct Candidate Suppor Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Hentifier: Administrative Category/ Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(ii) and NonFederal share to 21(a)(ii))				Zip Code		Public Comm (ref to party only) by PAC
Health Insurance Activity or Event Identifier: Administrative FEDERAL SHARE			IL	60601	<u> </u>	Allocated Activity or Event Year-To-Date
Administrative Category/ Type Date 10 01 2022					001	69455.72
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 132.04 496.73 628.77 C. Full Name (Last, First, Middle Initial) Transaction ID : EH416665 Delta Dental Mailing Address 1515 West 22nd Street, #1200 City Oak Brook Purpose of Disbursement: Dental insurance Dental insurance Activity or Event Identifier: Administrative Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 3.11 11.72 14.83 SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(i)) and NonFederal share to 21(a)(ii))					Category/	M M / D D / Y Y Y Y
C. Full Name (Last, First, Middle Initial) Transaction ID : EH416665 Delta Dental Mailing Address 1515 West 22nd Street, #1200 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative Federal Share HONFEDERAL SHARE HONFEDERAL SHARE FEDERAL SHARE FEDERA						10 01 2022
C. Full Name (Last, First, Middle Initial) Transaction ID : EH416665 Delta Dental Mailing Address 1515 West 22nd Street, #1200 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative FEDERAL SHARE NONFEDERAL SHARE FEDERAL SHARE HONFEDERAL SHARE FEDERAL SHARE FEDERA		FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
Delta Dental Mailing Address 1515 West 22nd Street, #1200 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative Federal Share Hondraising Exemptive Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Party only by PAC Allocated Activity or Event Year-To-Date Category/ Type Date TOTAL AMOUNT SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE FEDERAL SHARE NONFEDERAL SHARE FEDERAL SHARE TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(ii))		132.04		T T	496.73	628.77
Mailing Address 1515 West 22nd Street, #1200 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative FEDERAL SHARE H NONFEDERAL SHARE FEDERAL SHARE F	_	Full Name (Last First Middle Initial) -	tion ID : EH	416665	☐ Memo Item	
City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative FEDERAL SHARE NONFEDERAL SHARE FEDERAL SHARE FEDE	C.					
Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(ii) and NonFederal share to 21(a)(ii))	C.	Delta Dental				
Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))	C.	Delta Dental Mailing Address 1515 West 22nd Street, #120	00	7in Code		Voter Drive Direct Candidate Suppl
Activity or Event Identifier: Administrative FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 11.72 14.83 SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))	C.	Delta Dental Mailing Address 1515 West 22nd Street, #120 City	OO State	1 '		Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
Administrative Category/ Type	C.	Delta Dental Mailing Address 1515 West 22nd Street, #120 City Oak Brook Purpose of Disbursement:	OO State	1 '		Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 3.11 11.72 14.83 SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))	C.	Delta Dental Mailing Address 1515 West 22nd Street, #120 City Oak Brook Purpose of Disbursement: Dental insurance	OO State	1 '	001	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
3.11 SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))	C.	Delta Dental Mailing Address 1515 West 22nd Street, #120 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier:	O0 State	1 '	Category/	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 69455.72
SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))	C.	Delta Dental Mailing Address 1515 West 22nd Street, #120 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative	State IL	60523	Category/ Type	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 69455.72 Date 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 141.45 532.14 673.59 TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))	C.	Delta Dental Mailing Address 1515 West 22nd Street, #120 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative	State IL	60523	Category/ Type	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 69455.72 Date 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))	c.	Delta Dental Mailing Address 1515 West 22nd Street, #120 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative FEDERAL SHARE	State IL	60523	Category/ Type	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 69455.72 Date 10 15 2022 TOTAL AMOUNT
TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))		Delta Dental Mailing Address 1515 West 22nd Street, #120 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative FEDERAL SHARE 3.11	State IL	NONFEDERAL	Category/ Type	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 69455.72 Date 10 15 2022 TOTAL AMOUNT
		Delta Dental Mailing Address 1515 West 22nd Street, #120 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative FEDERAL SHARE 3.11 JBTOTAL of Allocated Federal and NonFederal	State IL +	NONFEDERAL s Page	Category/ Type SHARE	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 69455.72 Date 10 15 2022 TOTAL AMOUNT
		Delta Dental Mailing Address 1515 West 22nd Street, #120 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE	State IL +	NONFEDERAL s Page	Category/ Type SHARE 11.72 SHARE	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 69455.72 Date 10 15 2022 TOTAL AMOUNT 14.83
	SI	Delta Dental Mailing Address 1515 West 22nd Street, #120 City Oak Brook Purpose of Disbursement: Dental insurance Activity or Event Identifier: Administrative FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE 141.45 DTAL This Period (last page for each line only)	State IL +	NONFEDERAL s Page NONFEDERAL are to 21(a)(i) and	Category/ Type SHARE 11.72 SHARE 532.14 NonFederal sha	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 69455.72 Date 10 15 2022 TOTAL AMOUNT 14.83 TOTAL AMOUNT 673.59 are to 21(a)(ii))

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: H4

Transaction ID : EH416659

Paid on Divvy Prepaid Debit Card, payment to: Divvy Card 3300 N Ashton Boulevard #460, Lehi, UT 84043

Form/Schedule: H4

Transaction ID: EH416617

Paid on Divvy Prepaid Debit Card, payment to: Divvy Card 3300 N Ashton Boulevard #460, Lehi, UT 84043

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F 9 @ 5 H9 8 'HC' 5 'F 9 D C F H Z G7 < 98 I @ 'C F' + H9 A = N 5 H = C B

Form/Schedule: H4

Transaction ID : EH416665

Paid on Divvy Prepaid Debit Card, payment to: Divvy Card 3300 N Ashton Boulevard #460, Lehi, UT 84043

Form/Schedule: Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	26	OF	30	
FOR LI	NE 2	1a OF	FORM	ЗХ

NAME OF COMMITTEE (In Full)

A.	Full Name (Last, First, Middle Initial) Transact	ion ID : EH	416619	☐ Memo Item		ed Activity or Event:
	Google				X Ac	dministrative Fundraising Exemp
	Mailing Address 1600 Amphitheatre Parkway				Vo	oter Drive Direct Candidate Suppor
	City Mountain View	State	Zip Code		Pu	ublic Comm (ref to party only) by PAC
	Purpose of Disbursement:	CA	94043	Ι	Alloc	ated Activity or Event Year-To-Date
	GSuite			001		69455.72
	Activity or Event Identifier:			0-1		M = M / D = D / Y = Y = Y
	Administrative			Category/ Type	Date	10 01 2022
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TOTAL AMOUNT
	1.26		7 7	4.74		6.00
— В.	Full Name (Last, First, Middle Initial) Transact	ion ID : EH	416620	☐ Memo Item	Allocate	ed Activity or Event:
	Mailchimp by the Rocket Science Grou				X Ac	dministrative Fundraising Exemp
	Mailing Address 675 Ponce de Leon Avenue N Suite 5000	E			U Vo	oter Drive Direct Candidate Suppor
	City Atlanta	State	Zip Code 30308		Pu	ublic Comm (ref to party only) by PAC
	Purpose of Disbursement:		30308		Alloc	ated Activity or Event Year-To-Date
	Email			001		69455.72
	Activity or Event Identifier: Administrative			Category/ Type	Date	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TOTAL AMOUNT
	31.50		7	118.50		150.00
	Full Name (Last, First, Middle Initial) Transact	ion ID : EH	416658	☐ Memo Item	Allocate	ed Activity or Event:
	Squarespace				× Ac	Iministrative Fundraising Exemp
	Mailing Address 8 Clarkson Street				U Vo	nter Drive Direct Candidate Suppor
	City	State	Zip Code		Pu	ublic Comm (ref to party only) by PAC
	New York	NY	10014		Alloca	ated Activity or Event Year-To-Date
	Purpose of Disbursement: Website hosting			001		69455.72
	Activity or Event Identifier: Administrative			Category/		M M / D D / Y Y Y Y
				Туре	Date	10 08 2022
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TOTAL AMOUNT
	0.00		T T	22.91		29.00
	6.09					
SI		Activity Thi	s Page			
SI	IBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE	Activity Thi	s Page NONFEDERAL	SHARE	=	TOTAL AMOUNT
SI	IBTOTAL of Allocated Federal and NonFederal	•	•		_ 	TOTAL AMOUNT
	BTOTAL of Allocated Federal and NonFederal FEDERAL SHARE	+	NONFEDERAL	146.15		185.00

: 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: H4

Transaction ID : EH416619

Paid on Divvy Prepaid Debit Card, payment to: Divvy Card 3300 N Ashton Boulevard #460, Lehi, UT 84043

Form/Schedule: H4

Transaction ID: EH416620

Paid on Divvy Prepaid Debit Card, payment to: Divvy Card 3300 N Ashton Boulevard #460, Lehi, UT 84043

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: H4

Transaction ID : EH416658

Paid on Divvy Prepaid Debit Card, payment to: Divvy Card 3300 N Ashton Boulevard #460, Lehi, UT 84043

Form/Schedule: Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	29	OF	30	
FOR L	NE 2	1a OF	FORM	ЗХ

NAME OF COMMITTEE (In Full)

	an Francisco Democratic County			_	Allegated Astricts on Francis
A.	Full Name (Last, First, Middle Initial) Transac Typeform	tion ID : EH	416621	☐ Memo Item	Allocated Activity or Event: ** Administrative Fundraising Exempt
	Mailing Address Bes de Roda, #163				
	bes de Roda, #105				Voter Drive Direct Candidate Support
	City	State SP	Zip Code		Public Comm (ref to party only) by PAC
	Barcelona Purpose of Disbursement:	5P	08018		Allocated Activity or Event Year-To-Date
	Website subscription			001	69455.72
	Activity or Event Identifier:				
	Administrative			Category/ Type	Date 10 03 2022
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	6.09		7	22.91	29.00
В.	Full Name (Last, First, Middle Initial) Transac	tion ID : EH	416657	☐ Memo Item	Allocated Activity or Event:
	Zoom				X Administrative Fundraising Exempt
	Mailing Address 55 Almaden Boulevard, 6th F	loor			Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	San Jose	CA	95113		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: Webinar software			001	69455.72
	Activity or Event Identifier: Administrative			Category/ Type	Date 10 08 2022
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
		1 1		74.25	93.99
	19.74		7	74.20	30.00
<u>c</u> .	Full Name (Last, First, Middle Initial)		7	☐ Memo Item	Allocated Activity or Event:
<u>C</u> .	Full Name (Last, First, Middle Initial)		7		Allocated Activity or Event:
C.		<u> </u>	7		Allocated Activity or Event: Administrative Fundraising Exempt
C.	Full Name (Last, First, Middle Initial)	State	Zip Code		Allocated Activity or Event: Administrative Fundraising Exempt
c.	Full Name (Last, First, Middle Initial) Mailing Address City	State	Zip Code		Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support
C.	Full Name (Last, First, Middle Initial) Mailing Address	State	Zip Code		Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
c.	Full Name (Last, First, Middle Initial) Mailing Address City	State	Zip Code		Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
C.	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement:	State	Zip Code		Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
C.	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement:	State +	Zip Code NONFEDERAL	Category/	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
C.	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:			Category/	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
<u>с.</u>	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:			Category/	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	+	NONFEDERAL	Category/	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	+	NONFEDERAL	Category/ Type SHARE	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE JBTOTAL of Allocated Federal and NonFedera	+ I Activity Thi	NONFEDERAL s Page	Category/ Type SHARE	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date TOTAL AMOUNT
SI	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE 25.83 DTAL This Period (last page for each line only)	+ I Activity Thi +	NONFEDERAL s Page NONFEDERAL are to 21(a)(i) and	Category/ Type SHARE 97.16 NonFederal sha	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT 122.99 are to 21(a)(ii))
St	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE 25.83	+ I Activity Thi +	NONFEDERAL s Page NONFEDERAL	Category/ Type SHARE 97.16 NonFederal sha	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT 122.99

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: H4

Transaction ID : EH416621

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Form/Schedule: H4

Transaction ID: EH416657

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