Image# 14960862800 PAGE 1 / 7

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For Other Than	An Authorized	d Committe	ee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT 1		mple: If typing the lines.	ng, type	12FE4M5	
SAN BENITO CO	DUNTY DEMOCRA	TIC CENTRA	L COMM	IITTEE		
ADDRESS (number and s	treet) P.O. BOX 241					
Check if differe than previously reported. (ACC	⊥ HOLLISTER				CA	95024
2. FEC IDENTIFICAT	ION NUMBER ▼	CITY 🛦		S	STATE 🛦	ZIP CODE ▲
C C00496521		3. IS THIS REPORT		NEW (N) OR	AN (A)	MENDED)
4. TYPE OF REPO (Choose One)	RT (b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)		20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
(a) Quarterly Repor	ts:	Mar 20 (M3) Apr 20 (M4)		Jun 20 (M6) Jul 20 (M7)		20 (M9) Dec 20 (M12) (Non-Election Year Only) 20 (M10) Jan 31 (YE)
X April 15 Quarterly F	Report (Q1) (c) 12-Day		Primary (12F		General	
July 15 Quarterly F	Report (Q2)		Convention (Special	
October 15 Quarterly F					·	
January 31 Year-End F	Report (YE)	Election on	M M /	D D /	Y Y Y Y	in the State of
July 31 Mi Report (No Year Only)	n-election (MY) POST-	Election for the:	General (300	3)	Runoff (Special (30S)
Termination (TER)		Election on	M M /	D = D /	Y	in the State of
5. Covering Period	01 01 /	2014	through	03	/ 31_ /	2014
•	nined this Report and to th	•	· ·	belief it is true	e, correct an	d complete.
Type or Print Name of	reasurer Mr. CHARLES H	ENRY WALIERS/I	KEASUKEK			
Signature of Treasurer	Mr. CHARLES HENRY WALTERS/TREASURER		[Electronically	y Filed] Da	ate 04	23 2014
	e, erroneous, or incomplete	information may su	ubject the pers	son signing thi	s Report to t	he 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

Re	report Covering the Period: From: 01	01 2014 To	o: 03 31 2014
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		645.81
	(b) Cash on Hand at Beginning of Reporting Period	645.81	
	(c) Total Receipts (from Line 19)	63.52	63.52
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	709.33	709.33
7.	Total Disbursements (from Line 31)	493.52	493.52
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	215.81	215.81
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	

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

SAN BENITO COUNTY DEMOCRATIC CENTRAL COMMITTEE

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
Contributions (other than loans) From:			
(a) Individuals/Persons Other			
Than Political Committees			
(i) Itemized (use Schedule A)	0.00	0.00	
(ii) Unitemized	0.00	0.00	
(iii) TOTAL (add			
Lines 11(a)(i) and (ii)▶	0.00	0.00	
(b) Political Party Committees	63.52	63.52	
(c) Other Political Committees			
(such as PACs)	0.00	0.00	
(d) Total Contributions (add Lines			
11(a)(iii), (b), and (c)) (Carry			
Totals to Line 33, page 5)▶	63.52	63.52	
Transfers From Affiliated/Other			
Party Committees	0.00	0.00	
All Lagra Dagging d	0.00	0.00	
All Loans Received	7	0.00	
Loan Repayments Received	0.00	0.00	
Offsets To Operating Expenditures	7	7	
(Refunds, Rebates, etc.)			
(Carry Totals to Line 37, page 5)	0.00	0.00	
Refunds of Contributions Made	7		
to Federal Candidates and Other			
Political Committees	0.00	0.00	
Other Federal Receipts	7	7 7	
(Dividends, Interest, etc.)	0.00	0.00	
Transfers from Non-Federal and Levin Funds	0.00	3.00	
(a) Non-Federal Account			
(from Schedule H3)	0.00	0.00	
(non deficación rio)	3.00	0.00	
(b) Levin Funds (from Schedule H5)	0.00	0.00	
(b) Leviii i unus (iioini oorieadie 115)			
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00	
(c) Iotal Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	63.52	63.	
Total Federal Receipts			
(subtract Line 18(c) from Line 19)▶	63.52	63.52	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
. Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tills I Gliou	Calcilual Teal-to-Date	
Activity (from Schedule H4)			
(i) Federal Share	0.00	0.00	
(ii) N 5 1 101	0.00	0.00	
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00	
(b) Other Federal Operating Expenditures	93.52	93.52	
(c) Total Operating Expenditures	7		
(add 21(a)(i), (a)(ii), and (b))▶	93.52	93.52	
Transfers to Affiliated/Other Party		400.00	
Committees Contributions to	400.00	400.00	
Federal Candidates/Committees and Other Political Committees	0.00	0.00	
Independent Expenditures	0.00	0.00	
(use Schedule E) Coordinated Party Expenditures	0.00	0.00	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
(doc corroddio 1)			
Loan Repayments Made	0.00	0.00	
Loans Made	0.00	0.00	
Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(Sucil as PAOS)	0.00		
(d) Total Contribution Refunds			
(add Lines 28(a), (b), and (c))▶	0.00	0.00	
		0.00	
Other Disbursements	0.00	0.00	
Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
(from Schedule H6)			
(i) Federal Share	0.00	0.00	
(1) 11	0.00	0.00	
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	7	
(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	
Total Disbursements (add Lines 21(c), 22,	400.50		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	493.52	493.52	
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	493.52	493.52	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
3. Total Contributions (other than loans) (from Line 11(d), page 3)	63.52	63.52	
I. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63.52	63.52	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	93.52	93.52	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
3. Net Operating Expenditures (subtract Line 37 from Line 36)	93.52	93.52	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) for each category of the 11a **X** 11b 12 11c **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 BENITO COUNTY DEMOCRATIC CENTRAL COMMITTEE Full Name (Last, First, Middle Initial) DEMOCRATIC STATE CENTRAL COMMITTEE OF CA - FEDERAL Date of Receipt Mailing Address 1401 21ST STREET SUITE 200 2014 02 25 City Zip Code State Transaction ID: SA11B.4132 CA **SACRAMENTO** 95811 Amount of Each Receipt this Period FEC ID number of contributing C00105668 63.52 federal political committee. In-kind - voter file from Political Data, Inc. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 63.52 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 63.52 SUBTOTAL of Receipts This Page (optional).....

63.52

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

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 7 OF 7		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	Check only	NOMBER.	
II EINIKEN NISDAUSEMIEN 19		21b	X 22 23 24 25 26	
	Detailed Summary Page	27	28a 28b 28c 29 30b	
Any information copied from such Reports and Staten	nents may not be sold or use	d by any perso	on for the purpose of soliciting contributions	
or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
$ \; angle$ SAN BENITO COUNTY DEMOCR.	ATIC CENTRAL CO	MMITTEE		
Full Name (Last, First, Middle Initial)			Date of Disbursement	
A. DEMOCRATIC STATE CENTRAL CO				
Mailing Address 1401 21ST STREET	03 29 2014			
SUITE 200				
,	State Zip Code		Transaction ID : SB22.4138	
SACRAMENTO	CA 95811		Transaction ib . GB22.4130	
Purpose of Disbursement Liability Insurance Premium		001	Amount of Each Disbursement this Period	
Candidate Name			Amount of Each Disbursement this Feriou	
		Category/ Type	400.00	
Office Sought: House Disburser	nent For:	71-	, , , , , , , , , , , , , , , , , , , ,	
Senate	Primary General			
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) B.			Data of Dishuman mant	
D.			Date of Disbursement	
Mailing Address			M - M / D - D / Y - Y - Y - Y	
maining / laci occ	Ividiling Address			
City	State Zip Code			
Durnoon of Diaburnoment	T			
Purpose of Disbursement			Amount of Each Disbursement this Period	
Candidate Name		Cotogogg	Table 5. 233.1 Biodardonioni tino i onou	
		Category/ Type		
Office Sought: House Disburser	nent For:			
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C.			Date of Disbursement	
~ .				
Mailing Address			M	
City				
Purpose of Disbursement	Purnose of Dishursement			
i dipose of Dispulsement			Amount of Each Dishurson and this Davied	
Candidate Name		Catagorii	Amount of Each Disbursement this Period	
		Category/ Type		
Office Sought: House Disburser	nent For:			
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
			400.00	
SUBTOTAL of Disbursements This Page (optional)		·····•	400.00	
TOTAL This Period (last nage this line number only)			400.00	