

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

Auburn Area Democratic Club

ADDRESS (number and street)

P.O. Box 6851

Check if different than previously reported. (ACC)

Auburn

CA

95604

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C C00422022

3. IS THIS REPORT NEW (N) OR AMENDED (A)



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on MM/DD/YYYY in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period

01 / 01 / 2020 through 03 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Clancy, Stuart, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Clancy, Stuart, , ,

[Electronically Filed]

Date

04 / 07 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Auburn Area Democratic Club

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="15228.00"/>	<input type="text" value="15228.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15228.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1995.00"/>	<input type="text" value="1995.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="17223.00"/>	<input type="text" value="17223.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4443.00"/>	<input type="text" value="4443.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12780.00"/>	<input type="text" value="12780.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Auburn Area Democratic Club

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	500.00	500.00
(ii) Unitemized	1345.00	1345.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1845.00	1845.00
(b) Political Party Committees	150.00	150.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1995.00	1995.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1995.00	1995.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1995.00	1995.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	4343.00	4343.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4343.00	4343.00
22. Transfers to Affiliated/Other Party Committees.....	100.00	100.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4443.00	4443.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4443.00	4443.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1995.00	1995.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1995.00	1995.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4343.00	4343.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4343.00	4343.00

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

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

FOR LINE NUMBER: PAGE 6 OF 12
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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)
Auburn Area Democratic Club

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grant, Cynthia, , ,

Mailing Address 339 Landis Circle

City Auburn	State CA	Zip Code 95603
----------------	-------------	-------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	16	/	2020

Transaction ID : SA11AI.4460

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

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

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

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NAME OF COMMITTEE (In Full)
Auburn Area Democratic Club

A. CALIFORNIA DEMOCRATIC PARTY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1830 9TH STREET

City SACRAMENTO	State CA	Zip Code 95811
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FEC ID number of contributing federal political committee. **C** C00105668

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
108.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		21		2020

Transaction ID : SA11B.4463

Amount of Each Receipt this Period
108.00

Memo Item

B. CALIFORNIA DEMOCRATIC PARTY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1830 9TH STREET

City SACRAMENTO	State CA	Zip Code 95811
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00105668

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		21		2020

Transaction ID : SA11B.4464

Amount of Each Receipt this Period
42.00

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	150.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Auburn Area Democratic Club

Full Name (Last, First, Middle Initial) A. Dancing Dog Productions		Date of Disbursement MM / DD / YYYY 01 / 10 / 2020	
Mailing Address 897 Lincoln Way		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4467 Amount of Each Disbursement this Period [REDACTED] 886.00	
City Auburn	State CA	Zip Code 95603	Category/ Type 001
Purpose of Disbursement		Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [REDACTED] 886.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Dancing Dog Productions		Date of Disbursement MM / DD / YYYY 02 / 07 / 2020	
Mailing Address 897 Lincoln Way		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4476 Amount of Each Disbursement this Period [REDACTED] 511.00	
City Auburn	State CA	Zip Code 95603	Category/ Type 001
Purpose of Disbursement		Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [REDACTED] 511.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. General Gomez Arts & Events Center		Date of Disbursement MM / DD / YYYY 01 / 24 / 2020	
Mailing Address 808 Lincoln Way		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4465 Amount of Each Disbursement this Period [REDACTED] 240.00	
City Auburn	State CA	Zip Code 95603	Category/ Type 001
Purpose of Disbursement		Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [REDACTED] 240.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1437.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)
Auburn Area Democratic Club

Full Name (Last, First, Middle Initial)

A. General Gomez Arts & Events Center

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		24		2020

Mailing Address 808 Lincoln Way

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4495
Amount of Each Disbursement this Period

[REDACTED] 150.00

Memo Item

City Auburn State CA Zip Code 95603

Purpose of Disbursement
Candidate Name
Category/Type: 001

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. General Gomez Arts & Events Center

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2020

Mailing Address 808 Lincoln Way

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4466
Amount of Each Disbursement this Period

[REDACTED] 720.00

Memo Item

City Auburn State CA Zip Code 95603

Purpose of Disbursement
Candidate Name
Category/Type: 001

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Go Daddy

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		22		2020

Mailing Address 14455 N Hayden Road

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4468
Amount of Each Disbursement this Period

[REDACTED] 222.00

Memo Item

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement
Candidate Name
Category/Type: 001

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

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

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

[REDACTED] 1092.00

[REDACTED]

**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"/> 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)
Auburn Area Democratic Club

A. Janusz, Leslye, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 836 Holly Hills Drive

City Auburn State CA Zip Code 95603

Purpose of Disbursement 012 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 03 / 2020

FEC Identification Number: C
Transaction ID : SB21B.4475
Amount of Each Disbursement this Period: 350.00

Memo Item

B. Janusz, Leslye, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 836 Holly Hills Drive

City Auburn State CA Zip Code 95603

Purpose of Disbursement 001 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2020

FEC Identification Number: C
Transaction ID : SB21B.4479
Amount of Each Disbursement this Period: 152.00

Memo Item

C. Ross, Jamie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9355 Michelle Drive

City Auburn State CA Zip Code 95603

Purpose of Disbursement 012 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2020

FEC Identification Number: C
Transaction ID : SB21B.4477
Amount of Each Disbursement this Period: 350.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 852.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Auburn Area Democratic Club

Full Name (Last, First, Middle Initial) A. Rupinder Kaur		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020	
Mailing Address 11990 Heritage Oak Place		FEC Identification Number C []	
City Auburn	State CA	Zip Code 95603	Transaction ID : SB21B.4472
Purpose of Disbursement		Category/Type 012	Amount of Each Disbursement this Period 500.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	3881.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Auburn Area Democratic Club

A. PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 5429 MADISON AVENUE

City SACRAMENTO State CA Zip Code 95841

Purpose of Disbursement 008 Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 03 / 2020

FEC Identification Number: C C00433318
Transaction ID : SB22.4474

Amount of Each Disbursement this Period: 100.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	100.00