

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 Democratic Headquarters of the Desert

ADDRESS (number and street) 67-555 E. Palm Canyon Drive Suite C-104 Cathedral City CA 92234 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00496679 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 (MY), Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on ... in the State of ... (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on ... in the State of ...

5. Covering Period 01 / 01 / 2019 through 06 / 30 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Copleston, Arthur, , , Type or Print Name of Treasurer

Signature of Treasurer Copleston, Arthur, , , [Electronically Filed] Date 07 / 11 / 2019

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Democratic Headquarters of the Desert**

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="2019"/>	<input type="text" value="10833.90"/>	<input type="text" value="10833.90"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10833.90"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10571.78"/>	<input type="text" value="10571.78"/>
(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="21405.68"/>	<input type="text" value="21405.68"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9819.07"/>	<input type="text" value="9819.07"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="11586.61"/>	<input type="text" value="11586.61"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="406.76"/>	

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

**Democratic Headquarters of the Desert**

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).....	7177.14	7177.14
(ii) Unitemized .....	3394.64	3394.64
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10571.78	10571.78
(b) Political Party Committees .....	0.00	0.00
(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) .....	10571.78	10571.78
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)).....▶	10571.78	10571.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10571.78	10571.78

**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 .....	9780.06	9780.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9780.06	9780.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
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).....	39.01	39.01
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)) ..	9819.07	9819.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9819.07	9819.07

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10571.78	10571.78
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10571.78	10571.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	9780.06	9780.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9780.06	9780.06

**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 6 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Democratic Headquarters of the Desert**

**A. Atwood, Jackie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2384 N. Murray Street  
 City Banning State CA Zip Code 92220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 01 / 2019  
**Transaction ID : SA11AI.C4692603**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 monthly cc contr

**B. Atwood, Jackie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2384 N. Murray Street  
 City Banning State CA Zip Code 92220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 02 / 2019  
**Transaction ID : SA11AI.C4694071**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 monthly cc contr

**C. Atwood, Jackie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2384 N. Murray Street  
 City Banning State CA Zip Code 92220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 01 / 2019  
**Transaction ID : SA11AI.C4694422**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 OF 45
	<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)  
**Democratic Headquarters of the Desert**

**A. Atwood, Jackie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2384 N. Murray Street  
 City Banning State CA Zip Code 92220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 01 / 2019**  
**Transaction ID : SA11AI.C4695105**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

**B. Atwood, Jackie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2384 N. Murray Street  
 City Banning State CA Zip Code 92220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 02 / 2019**  
**Transaction ID : SA11AI.C4696029**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

**C. Atwood, Jackie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2384 N. Murray Street  
 City Banning State CA Zip Code 92220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 01 / 2019**  
**Transaction ID : SA11AI.C4696922**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 8 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Ball, Hal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2078 S. Chico Drive  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 01 / 01 / 2019  
**Transaction ID : SA11AI.C4692609**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 monthly cc contr

**B. Ball, Hal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2078 S. Chico Drive  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 02 / 2019  
**Transaction ID : SA11AI.C4694076**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 monthly cc contr

**C. Ball, Hal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2078 S. Chico Drive  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 01 / 2019  
**Transaction ID : SA11AI.C4694428**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 9 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Ball, Hal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2078 S. Chico Drive  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2019  
**Transaction ID : SA11AI.C4695110**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item  
 monthly cc contr

**B. Ball, Hal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2078 S. Chico Drive  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2019  
**Transaction ID : SA11AI.C4696035**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item  
 monthly cc contr

**C. Ball, Hal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2078 S. Chico Drive  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2019  
**Transaction ID : SA11AI.C4696928**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 10 OF 45
	<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	

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Ball, Hal, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2078 S. Chico Drive

City Palm Springs	State CA	Zip Code 92264
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	09	/	2019

**Transaction ID : SA11AI.C4697162**

Amount of Each Receipt this Period  
100.00

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
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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 ▼  
237.14

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2019

**Transaction ID : SA11AI.C4695008**

Amount of Each Receipt this Period  
237.14

Memo Item  
F-bounty program - Batch amount paid to DHQ for distribution to clubs

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

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	01	/	2019

**Transaction ID : SA11AI.C4692610**

Amount of Each Receipt this Period  
75.00

Memo Item  
monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	412.14
<b>TOTAL</b> 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 11 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Edgerly, Bob, , ,**

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

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 02 / 2019

**Transaction ID : SA11AI.C4694077**

Amount of Each Receipt this Period  
75.00

Memo Item  
monthly cc contr

**B. Edgerly, Bob, , ,**

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

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2019

**Transaction ID : SA11AI.C4694429**

Amount of Each Receipt this Period  
75.00

Memo Item  
monthly cc contr

**C. Edgerly, Bob, , ,**

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

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2019

**Transaction ID : SA11AI.C4695111**

Amount of Each Receipt this Period  
75.00

Memo Item  
monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> 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 12 OF 45
	<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	

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Ederly, Bob, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		02		2019

**Transaction ID : SA11AI.C4696036**

Amount of Each Receipt this Period  
75.00

Memo Item  
monthly cc contr

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

Mailing Address 1110 Via Verde

City Cathedral City	State CA	Zip Code 92234
------------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		01		2019

**Transaction ID : SA11AI.C4696929**

Amount of Each Receipt this Period  
75.00

Memo Item  
monthly cc contr

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

Mailing Address 338 Gates Circle

City Buffalo	State NY	Zip Code 14209
-----------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		01		2019

**Transaction ID : SA11AI.C4692615**

Amount of Each Receipt this Period  
200.00

Memo Item  
monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> 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 13 OF 45
	<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)  
**Democratic Headquarters of the Desert**

**A. Fisher, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 Gates Circle  
 City Buffalo State NY Zip Code 14209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **02 / 02 / 2019**  
**Transaction ID : SA11AI.C4694082**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 monthly cc contr

**B. Fisher, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 Gates Circle  
 City Buffalo State NY Zip Code 14209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **03 / 01 / 2019**  
**Transaction ID : SA11AI.C4694435**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 monthly cc contr

**C. Fisher, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 Gates Circle  
 City Buffalo State NY Zip Code 14209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **04 / 01 / 2019**  
**Transaction ID : SA11AI.C4695116**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> 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 14 OF 45
	<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)  
**Democratic Headquarters of the Desert**

**A. Fisher, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 Gates Circle  
 City Buffalo State NY Zip Code 14209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **05 / 02 / 2019**  
**Transaction ID : SA11AI.C4696041**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 monthly cc contr

**B. Fisher, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 Gates Circle  
 City Buffalo State NY Zip Code 14209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **06 / 01 / 2019**  
**Transaction ID : SA11AI.C4696934**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 monthly cc contr

**C. Flemon, Phil, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **01 / 01 / 2019**  
**Transaction ID : SA11AI.C4692589**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 15 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Flemion, Phil, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 02 / 2019**  
**Transaction ID : SA11AI.C4694057**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthy cc contr

**B. Flemion, Phil, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 01 / 2019**  
**Transaction ID : SA11AI.C4694409**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

**C. Flemion, Phil, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 01 / 2019**  
**Transaction ID : SA11AI.C4695091**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 16 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Flemion, Phil, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 02 / 2019  
**Transaction ID : SA11AI.C4696017**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

**B. Flemion, Phil, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2019  
**Transaction ID : SA11AI.C4696909**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

**C. Joosten, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1988 S. Mesa Drive  
 City Palm Springs State CA Zip Code 92264-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 01 / 2019  
**Transaction ID : SA11AI.C4692618**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 17 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Joosten, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1988 S. Mesa Drive  
 City Palm Springs State CA Zip Code 92264-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 04 / 2019**  
**Transaction ID : SA11AI.C4694089**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Monthly cc contr

**B. Joosten, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1988 S. Mesa Drive  
 City Palm Springs State CA Zip Code 92264-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 08 / 2019**  
**Transaction ID : SA11AI.C4694533**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Monthly cc contr

**C. Joosten, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1988 S. Mesa Drive  
 City Palm Springs State CA Zip Code 92264-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 01 / 2019**  
**Transaction ID : SA11AI.C4695120**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 18 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Joosten, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1988 S. Mesa Drive  
 City Palm Springs State CA Zip Code 92264-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 02 / 2019**  
**Transaction ID : SA11AI.C4696044**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

**B. Joosten, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1988 S. Mesa Drive  
 City Palm Springs State CA Zip Code 92264-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Realtor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 01 / 2019**  
**Transaction ID : SA11AI.C4696936**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

**C. Kors, Geoff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1455 N. Vine Ave.  
 City Palm Springs State CA Zip Code 92262  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **01 / 01 / 2019**  
**Transaction ID : SA11AI.C4692602**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> 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 19 OF 45
	<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	

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Kors, Geoff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1455 N. Vine Ave.  
 City Palm Springs State CA Zip Code 92262  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 02 / 2019  
**Transaction ID : SA11AI.C4694070**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 monthly cc contr

**B. Kors, Geoff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1455 N. Vine Ave.  
 City Palm Springs State CA Zip Code 92262  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 01 / 2019  
**Transaction ID : SA11AI.C4694421**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 monthly cc contr

**C. Kors, Geoff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1455 N. Vine Ave.  
 City Palm Springs State CA Zip Code 92262  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 01 / 2019  
**Transaction ID : SA11AI.C4695104**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 20 OF 45
	<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)  
**Democratic Headquarters of the Desert**

**A. Kors, Geoff, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1455 N. Vine Ave.

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2019

**Transaction ID : SA11AI.C4696028**

Amount of Each Receipt this Period  
100.00

Memo Item  
monthly cc contr

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

Mailing Address 1455 N. Vine Ave.

City Palm Springs	State CA	Zip Code 92262
----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2019

**Transaction ID : SA11AI.C4696921**

Amount of Each Receipt this Period  
100.00

Memo Item  
monthly cc contr

**C. Mueller, Robert, E., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Scenic Crest Trail

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		01		2019

**Transaction ID : SA11AI.C4692621**

Amount of Each Receipt this Period  
50.00

Memo Item  
monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> 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 21 OF 45
	<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	

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Mueller, Robert, E., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Scenic Crest Trail

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2019

**Transaction ID : SA11AI.C4694086**

Amount of Each Receipt this Period  
50.00

Memo Item  
monthly cc contr

**B. Mueller, Robert, E., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Scenic Crest Trail

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2019

**Transaction ID : SA11AI.C4694441**

Amount of Each Receipt this Period  
50.00

Memo Item  
monthly cc contr

**C. Mueller, Robert, E., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Scenic Crest Trail

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2019

**Transaction ID : SA11AI.C4695124**

Amount of Each Receipt this Period  
50.00

Memo Item  
monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 22 OF 45
	<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)  
**Democratic Headquarters of the Desert**

**A. Mueller, Robert, E., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Scenic Crest Trail

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2019

**Transaction ID : SA11AI.C4696047**

Amount of Each Receipt this Period  
50.00

Memo Item  
monthly cc contr

**B. Mueller, Robert, E., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Scenic Crest Trail

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2019

**Transaction ID : SA11AI.C4697042**

Amount of Each Receipt this Period  
50.00

Memo Item  
monthly cc contr

**C. Mueller, Robert, E., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Scenic Crest Trail

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2019

**Transaction ID : SA11AI.C4697227**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 23 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Democratic Headquarters of the Desert**

**A. O'Regan, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 61379 Topaz Drive  
 City La Quinta State CA Zip Code 92253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt **01 / 01 / 2019**  
**Transaction ID : SA11AI.C4692594**  
 Amount of Each Receipt this Period 110.00  
 Memo Item  
 monthly cc contr

**B. O'Regan, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 61379 Topaz Drive  
 City La Quinta State CA Zip Code 92253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt **02 / 02 / 2019**  
**Transaction ID : SA11AI.C4694062**  
 Amount of Each Receipt this Period 110.00  
 Memo Item  
 monthly cc contr

**C. O'Regan, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 61379 Topaz Drive  
 City La Quinta State CA Zip Code 92253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt **03 / 01 / 2019**  
**Transaction ID : SA11AI.C4694413**  
 Amount of Each Receipt this Period 110.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	330.00
<b>TOTAL</b> 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 24 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Democratic Headquarters of the Desert**

**A. O'Regan, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 61379 Topaz Drive  
 City La Quinta State CA Zip Code 92253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt **04 / 01 / 2019**  
**Transaction ID : SA11AI.C4695096**  
 Amount of Each Receipt this Period 110.00  
 Memo Item  
 monthly cc contr

**B. O'Regan, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 61379 Topaz Drive  
 City La Quinta State CA Zip Code 92253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt **05 / 02 / 2019**  
**Transaction ID : SA11AI.C4696048**  
 Amount of Each Receipt this Period 110.00  
 Memo Item  
 monthly cc contr

**C. O'Regan, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 61379 Topaz Drive  
 City La Quinta State CA Zip Code 92253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt **06 / 01 / 2019**  
**Transaction ID : SA11AI.C4696914**  
 Amount of Each Receipt this Period 110.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	330.00
<b>TOTAL</b> 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 25 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Sexton, Geno, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2350 Miramonte Circle East  
 Unit B  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 01 / 2019  
**Transaction ID : SA11AI.C4692616**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item  
 monthly cc contr

**B. Sexton, Geno, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2350 Miramonte Circle East  
 Unit B  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 02 / 2019  
**Transaction ID : SA11AI.C4694083**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item  
 monthly cc contr

**C. Sexton, Geno, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2350 Miramonte Circle East  
 Unit B  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 01 / 2019  
**Transaction ID : SA11AI.C4694437**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> 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 26 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Democratic Headquarters of the Desert**

**A. Sexton, Geno, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2350 Miramonte Circle East  
 Unit B  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2019  
**Transaction ID : SA11AI.C4695117**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item  
 monthly cc contr

**B. Sexton, Geno, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2350 Miramonte Circle East  
 Unit B  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2019  
**Transaction ID : SA11AI.C4696042**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item  
 monthly cc contr

**C. Sexton, Geno, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2350 Miramonte Circle East  
 Unit B  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2019  
**Transaction ID : SA11AI.C4696935**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> 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 27 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Silver, Joy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2346 Paseo del Rey  
 City Palm Springs State CA Zip Code 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 09 / 2019  
**Transaction ID : SA11AI.C4697160**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Stoddart, Jess, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 01 / 2019  
**Transaction ID : SA11AI.C4692619**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

**C. Stoddart, Jess, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 02 / 2019  
**Transaction ID : SA11AI.C4694087**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> 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 28 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A. Stoddart, Jess, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 01 / 2019  
**Transaction ID : SA11AI.C4694439**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 monthly cc contr

**B. Stoddart, Jess, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2019  
**Transaction ID : SA11AI.C4695121**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 monthly cc contr

**C. Stoddart, Jess, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2019  
**Transaction ID : SA11AI.C4696045**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 29 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Democratic Headquarters of the Desert**

**A. Stoddart, Jess, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 78893 Golden Reed Drive  
 City Palm Desert State CA Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2019  
**Transaction ID : SA11AI.C4696937**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 monthly cc contr

**B. Westwood, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 Chandra Lane  
 City Rancho Mirage State CA Zip Code 92270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 01 / 01 / 2019  
**Transaction ID : SA11AI.C4692596**  
 Amount of Each Receipt this Period 175.00  
 Memo Item  
 monthly cc contr

**C. Westwood, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 Chandra Lane  
 City Rancho Mirage State CA Zip Code 92270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 02 / 02 / 2019  
**Transaction ID : SA11AI.C4694064**  
 Amount of Each Receipt this Period 175.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> 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 30 OF 45
	<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)  
**Democratic Headquarters of the Desert**

**A. Westwood, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 Chandra Lane  
 City Rancho Mirage State CA Zip Code 92270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt **03 / 01 / 2019**  
**Transaction ID : SA11AI.C4694415**  
 Amount of Each Receipt this Period 175.00  
 Memo Item  
 monthly cc contr

**B. Westwood, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 Chandra Lane  
 City Rancho Mirage State CA Zip Code 92270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt **04 / 01 / 2019**  
**Transaction ID : SA11AI.C4695098**  
 Amount of Each Receipt this Period 175.00  
 Memo Item  
 monthly cc contr

**C. Westwood, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 Chandra Lane  
 City Rancho Mirage State CA Zip Code 92270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt **05 / 02 / 2019**  
**Transaction ID : SA11AI.C4696023**  
 Amount of Each Receipt this Period 175.00  
 Memo Item  
 monthly cc contr

<b>SUBTOTAL</b> of Receipts This Page (optional).....	525.00
<b>TOTAL</b> 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 31 OF 45  
(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

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NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Westwood, Robert, , ,

Mailing Address 24 Chandra Lane

City Rancho Mirage	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1050.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	01	/	2019

**Transaction ID : SA11AI.C4696916**

Amount of Each Receipt this Period  
175.00

Memo Item  
monthly cc contr

**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
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7177.14

**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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. Spectrum**

Mailing Address PO Box 60074

City  
City of Industry State CA Zip Code 91716

Purpose of Disbursement  
Monthly cable/phone bill

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 24 / 2019

FEC Identification Number

C

Transaction ID : SB21B.E1684

Amount of Each Disbursement this Period

203.31

Memo Item

Full Name (Last, First, Middle Initial)

**B. Spectrum**

Mailing Address PO Box 60074

City  
City of Industry State CA Zip Code 91716

Purpose of Disbursement  
Monthly cable/phone bill

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 23 / 2019

FEC Identification Number

C

Transaction ID : SB21B.E1685

Amount of Each Disbursement this Period

206.53

Memo Item

Full Name (Last, First, Middle Initial)

**C. Promotivators, Ltd.**

Mailing Address 888 El Cid Circle

City  
Palm Springs State CA Zip Code 92262

Purpose of Disbursement  
Misc political buttons and stickers

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2019

FEC Identification Number

C

Transaction ID : SB21B.E1688

Amount of Each Disbursement this Period

251.19

Memo Item

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

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

661.03



**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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2019

Mailing Address 1075 Camino del Rio South  
Attn: Development/PPPSW

City San Diego State CA Zip Code 92108

Purpose of Disbursement  
Supporter-Level sponsorship for Reel Women's Film Festival

001
Category/ Type

FEC Identification Number

C
Transaction ID : SB21B.E1687
Amount of Each Disbursement this Period
500.00

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		17		2019

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing fee

001
Category/ Type

FEC Identification Number

C
Transaction ID : SB21B.E1685
Amount of Each Disbursement this Period
3.42

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2019

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing charge

001
Category/ Type

FEC Identification Number

C
Transaction ID : SB21B.E1688
Amount of Each Disbursement this Period
21.03

Candidate Name

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

Memo Item

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

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

524.45
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**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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc trans fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1687**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc trans fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1687**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc trans fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1687**  
Amount of Each Disbursement this Period

Memo Item

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

**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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**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc trans fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1687**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc trans fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1687**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc trans fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1687**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc trans fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1687**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
monthly cc service chg

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1684**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing chg

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E168**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing chg

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1684**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing chg

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1684**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc 1330

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1684**  
Amount of Each Disbursement this Period

Memo Item

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

**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)

**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City  
Thousand Oaks

State  
CA

Zip Code  
91359-0000

Purpose of Disbursement  
monthly cc svc chg

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			01			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1684

Amount of Each Disbursement this Period

[REDACTED] 199.85

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City  
Thousand Oaks

State  
CA

Zip Code  
91359-0000

Purpose of Disbursement  
cc processing chg

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			03			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1684

Amount of Each Disbursement this Period

[REDACTED] 0.86

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City  
Thousand Oaks

State  
CA

Zip Code  
91359-0000

Purpose of Disbursement  
cc processing chg

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: CA District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			01			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.E1684

Amount of Each Disbursement this Period

[REDACTED] 22.91

Memo Item

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

[REDACTED] 223.62

**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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc monthly svc chg

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1686**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing chg

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1686**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing charge

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: CA District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1686**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
Monthly cc svc charge

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1682**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing monthly svc fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1685**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E168!**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1685**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing chg

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1684**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc transaction charge

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E168**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc monthly service chg

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1687**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ICS**

Mailing Address PO Box 3429

City Thousand Oaks State CA Zip Code 91359-0000

Purpose of Disbursement  
cc processing chg

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1687**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Canyon Plaza South**

Mailing Address GRIT PS Asset Mgmt. ATTN: Account  
201 N. Palm Canyon Drive, Suite 25

City Palm Springs State CA Zip Code 92262

Purpose of Disbursement  
May office rent

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1687**  
Amount of Each Disbursement this Period

Memo Item

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

**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

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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial) <b>A. Canyon Plaza South</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2019
Mailing Address GRIT PS Asset Mgmt. ATTN: Account 201 N. Palm Canyon Drive, Suite 25		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.E1684</b> Amount of Each Disbursement this Period 1196.41
City Palm Springs	State CA	Zip Code 92262
Purpose of Disbursement Monthly office rent	Category/Type 001	
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: CA District:		

Full Name (Last, First, Middle Initial) <b>B. Canyon Plaza South</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2019
Mailing Address GRIT PS Asset Mgmt. ATTN: Account 201 N. Palm Canyon Drive, Suite 25		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.E1686</b> Amount of Each Disbursement this Period 1196.41
City Palm Springs	State CA	Zip Code 92262
Purpose of Disbursement Monthly office rent	Category/Type 001	
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: CA District:		

Full Name (Last, First, Middle Initial) <b>C. Canyon Plaza South</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2019
Mailing Address GRIT PS Asset Mgmt. ATTN: Account 201 N. Palm Canyon Drive, Suite 25		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.E168</b> Amount of Each Disbursement this Period 1196.41
City Palm Springs	State CA	Zip Code 92262
Purpose of Disbursement March rent	Category/Type 001	
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: CA District:		

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

3589.23

**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)  
**Democratic Headquarters of the Desert**

Full Name (Last, First, Middle Initial)

**A. Canyon Plaza South**

Mailing Address GRIT PS Asset Mgmt. ATTN: Account  
201 N. Palm Canyon Drive, Suite 25

City Palm Springs State CA Zip Code 92262

Purpose of Disbursement  
April 2019 rent

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1685**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Canyon Plaza South**

Mailing Address GRIT PS Asset Mgmt. ATTN: Account  
201 N. Palm Canyon Drive, Suite 25

City Palm Springs State CA Zip Code 92262

Purpose of Disbursement  
January office rent

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.E1682**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 45 OF 45
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Democratic Headquarters of the Desert**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ICS</b>			Nature of Debt (Purpose): cc processing charge
Mailing Address PO Box 3429			
City Thousand Oaks	State CA	Zip Code 91359-0000	

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.E1641206</b>	
<input type="text" value="0.01"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.01"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Top of the Line Signs</b>			Nature of Debt (Purpose): New office sign
Mailing Address PO Box 179			
City La Quinta	State CA	Zip Code 92247-0000	

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.E1653793</b>	
<input type="text" value="406.75"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="406.75"/>	

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			
<input type="text"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="406.76"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="406.76"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="406.76"/>