



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>	<input type="text" value="13355"/>	<input type="text" value="13355"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6883.77"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2179.32"/>	<input type="text" value="16189.33"/>
(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="9063.09"/>	<input type="text" value="29544.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="402.23"/>	<input type="text" value="20883.47"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="8660.86"/>	<input type="text" value="8660.86"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	

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).....	1440	7880
(ii) Unitemized .....	724.32	5419.33
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2164.32	13299.33
(b) Political Party Committees .....	15	150
(c) Other Political Committees (such as PACs).....	0	2740
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2179.32	16189.33
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	2179.32	16189.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2179.32	16189.33

**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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	392.23	17180.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	392.23	17180.07
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	10	3703.4
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	10	3703.4
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	402.23	20883.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	402.23	20883.47

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2179.32	16189.33
34. Total Contribution Refunds (from Line 28(d)) .....	10	3703.4
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2169.32	12485.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	392.23	17180.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	392.23	17180.07

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

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

FOR LINE NUMBER: PAGE 6 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. Walter Clark**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 77427 Mallorca  
 City State Zip Code  
 Indian Wells CA 92210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Walter Clark LLP Attorney  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2014  
**Transaction ID : SA11AI.C4563454**  
 Amount of Each Receipt this Period  
 200.00

**B. Arthur Copleston**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1581 Concha Circle  
 City State Zip Code  
 Palm Springs CA 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 None Retired  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1600.01

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2014  
**Transaction ID : SA11AI.C4565894**  
 Amount of Each Receipt this Period  
 100.00

**C. Phil Flemion**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 10971  
 City State Zip Code  
 Palm Desert CA 92255  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 None Retired  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2014  
**Transaction ID : SA11AI.C4565869**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
<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. George Garcia**  
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : SA11AI.C4565878**

Amount of Each Receipt this Period  
**25.00**

**B. Tim Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
n/a Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : SA11AI.C4565881**

Amount of Each Receipt this Period  
**20.00**

**C. Geoff Kors**  
Full Name (Last, First, Middle Initial)

Mailing Address 1455 N. Vine Ave.

City State Zip Code  
Palm Springs CA 92262

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

Name of Employer Occupation  
None Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : SA11AI.C4565889**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>145.00</b>
<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 8 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Kathleen O'Regan**

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
 n/a Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**650**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : SA11AI.C4565875**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. Greg Rodriguez**

Mailing Address 233 Camino sur

City State Zip Code  
 Palm Springs CA 92262

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

Name of Employer Occupation  
 House of Representatives District Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**275**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : SA11AI.C4565865**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**C. Bob Warburton**

Mailing Address 1110 Via Verde

City State Zip Code  
 Cathedral City CA 92234

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

Name of Employer Occupation  
 n/a Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1875**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : SA11AI.C4565873**

Amount of Each Receipt this Period  
**125.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.00**

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



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

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

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

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

**A. Bob Warburton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1110 Via Verde  
 City State Zip Code  
 Cathedral City CA 92234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 n/a Retired  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**1875**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2014**  
**Transaction ID : SA11AI.C4565893**  
 Amount of Each Receipt this Period  
**500.00**

**B. Rick Weingard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3674 E Bogert Tr.  
 City State Zip Code  
 Palm Springs CA 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Promotivators Sales/Mktg  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**1300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 07 / 2014**  
**Transaction ID : SA11AI.C4567633**  
 Amount of Each Receipt this Period  
**25.00**

**C. Rick Weingard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3674 E Bogert Tr.  
 City State Zip Code  
 Palm Springs CA 92264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Promotivators Sales/Mktg  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**1300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2014**  
**Transaction ID : SA11AI.C4565895**  
 Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **625.00**  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Robert Westwood**  
 Full Name (Last, First, Middle Initial)  
 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 n/a Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **725**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 01 / 2014**  
**Transaction ID : SA11AI.C4565879**  
 Amount of Each Receipt this Period  
**100.00**

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>1440.00</b>

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

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

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

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

**A. RCDCC - Fed**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11333 Lakeport Drive  
 City Riverside State CA Zip Code 92505  
 FEC ID number of contributing federal political committee. **C** C00396994  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 150

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2014  
**Transaction ID : SA11B.C4565896**  
 Amount of Each Receipt this Period  
 15.00

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. Southern California Edison**

Mailing Address PO Box 300

City Rosemead State CA Zip Code 91772

Purpose of Disbursement  
electric bill

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1600116**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Southern California Edison**

Mailing Address PO Box 300

City Rosemead State CA Zip Code 91772

Purpose of Disbursement  
electric bill

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.E1603659**

Amount of Each Disbursement this Period

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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. Robert Moon**

Mailing Address 1196 Abrigo Road

City State Zip Code  
Palm Springs CA 92262

Purpose of Disbursement  
Refund of 11/01/2014 contribution - reverse double deposit

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB28A.E1602258**

Amount of Each Disbursement this Period

See Schedule A, Line 11(a)

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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