

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2016 OCT 13 PM 1:16

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

CHICO DEMOCRATS

ADDRESS (number and street) 1355 E 10TH ST

Check if different than previously reported. (ACC) CHICO CA 95928

FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C80455382 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period MM / DD / YYYY through MM / DD / YYYY

07 / 01 / 2016 through 09 / 30 / 2016

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

Type or Print Name of Treasurer Michael Hawkins

Signature of Treasurer Michael Hawkins Date MM / DD / YYYY

10 / 09 / 2016

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)

Page 2

Write or Type Committee Name

Crowco Democrats

Report Covering the Period: From:

MM	DD	YYYY
07	01	2014

 To:

MM	DD	YYYY
07	30	2016

20160730 16:01:01

	COLUMN A This Period	COLUMN B Calendar Year-to-Date			
6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>2014</td></tr></table>	YYYY	2014		<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>304243</td></tr></table>	304243
YYYY					
2014					
304243					
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>542624</td></tr></table>	542624			
542624					
(c) Total Receipts (from Line 19)	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>783761</td></tr></table>	783761	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>1782777</td></tr></table>	1782777	
783761					
1782777					
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>1296077</td></tr></table>	1296077	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>2092020</td></tr></table>	2092020	
1296077					
2092020					
7. Total Disbursements (from Line 31).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>378300</td></tr></table>	378300	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>1174343</td></tr></table>	1174343	
378300					
1174343					
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>917657</td></tr></table>	917657	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>917657</td></tr></table>	917657	
917657					
917657					
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>-0-</td></tr></table>	-0-			
-0-					
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>-0-</td></tr></table>	-0-			
-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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

CHICO DEMOCRATS

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2016

To:

MM / DD / YYYY
09 / 30 / 2016

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).....

4360.00

2760.00

(ii) Unitemized.....

3174.01

7504.33

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....

7534.01

15264.33

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....

12. Transfers From Affiliated/Other Party Committees.....

2613.44

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b)).....

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....

7534.01

17877.77

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....

7534.01

17877.27

NON-FEDERAL RECEIPTS

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	24,000	5,666.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		24,666.77
22. Transfers to Affiliated/Other Party Committees	1,400.00	1,400.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)	9,086.9	9,086.9
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements (Including Non-Federal Donations)		29,284.1
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds	28,720.1	50,800.1
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	37,887.0	11,743.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	37,887.0	11,743.63

2025 RELEASE UNDER E.O. 14176

**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 10	
	<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

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)
CHICO DEMOCRATS

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

Mailing Address
99 ALMA BLVD AVE

City **CHICO** State **CA** Zip Code **95926**

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

Name of Employer (for Individual) **SELF** Occupation (for Individual) **BOILER**

Receipt For: Primary General Other (specify) **Aggregate Year-to-Date** **450.00**

Date of Receipt **08 / 25 / 2016**

Amount of Each Receipt this Period **400.00**

Memo Item

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

Mailing Address
1636 MEADOW RD

City **CHICO** State **CA** Zip Code **95926**

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

Name of Employer (for Individual) **SELF** Occupation (for Individual) **BOILER**

Receipt For: Primary General Other (specify) **Aggregate Year-to-Date** **600.00**

Date of Receipt **09 / 27 / 2016**

Amount of Each Receipt this Period **500.00**

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For: Primary General Other (specify) **Aggregate Year-to-Date**

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **200.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 11

<input 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 checked="" 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)

Chico Democrats

Full Name (Last, First, Middle Initial)

A.

Hewitson, Michael

Mailing Address

1355 B 10th St

City

Chico

State

CA

Zip Code

95928

Purpose of Disbursement

Postage

Candidate Name

Category/
Type

Date of Disbursement

08 / 28 / 2014

FEC Identification Number

C

Amount of Each Disbursement this Period

688.00

Memo Item

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Hewitson, Michael

Mailing Address

1355 B 10th St

City

Chico

State

CA

Zip Code

95928

Purpose of Disbursement

Postage

Candidate Name

Category/
Type

Date of Disbursement

09 / 10 / 2014

FEC Identification Number

C

Amount of Each Disbursement this Period

100.50

Memo Item

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

BOB MULHOLLAND

Mailing Address

PO Box 4924

City

Chico

State

CA

Zip Code

95927

Purpose of Disbursement

DOOR HANDBILLS

Candidate Name

Michael Hewitson

Category/
Type

Date of Disbursement

08 / 26 / 2014

FEC Identification Number

C

Amount of Each Disbursement this Period

276.91

Memo Item

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

1,064.91

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

2,872.01

**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"/> 26	<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 30b
	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29		

PAGE 10 OF 11

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)
CHICO Democrats

A.

Full Name (Last, First, Middle Initial)
creature type

Date of Disbursement
09 / 12 / 2014

Mailing Address
3010 ALAMO AVE

City
CHICO State
CA Zip Code
95973

Purpose of Disbursement
Graphic Design

Candidate Name
[Signature] Category/Type
[]

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

State: District: Amount of Each Disbursement this Period
389

B.

Full Name (Last, First, Middle Initial)
MRS Signs

Date of Disbursement
09 / 10 / 2014

Mailing Address
[Signature]

City
[Signature] State
[Signature] Zip Code
[Signature]

Purpose of Disbursement
Signs Display

Candidate Name
[Signature] Category/Type
[]

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

State: District: Amount of Each Disbursement this Period
863.68

C.

Full Name (Last, First, Middle Initial)
Authorate Mailing

Date of Disbursement
09 / 16 / 2014

Mailing Address
8910 BETHY LEO LN

City
SACRAMENTO State
CA Zip Code
95814

Purpose of Disbursement
MAILER

Candidate Name
[Signature] Category/Type
[]

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

State: District: Amount of Each Disbursement this Period
604.42

SUBTOTAL of Disbursements This Page (optional).....▶ **1,857.10**

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

NOV 10 10 00 AM '14

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1 OF 1
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Critico Democrats		FEC IDENTIFICATION NUMBER C00455352
Check if <input type="checkbox"/> 24-hour report	<input type="checkbox"/> 48-hour report	New report <input checked="" type="checkbox"/> Amends report filed on <input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>

Full Name of Payee H + S Signs		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 10 / 2016
Mailing Address			Amount 812.69
City	State	Zip Code	Date of Disbursement or Obligation 09 / 15 / 2016
Purpose of Expenditure Signs Display		Category/Type	
Name of Federal Candidate: Hillary Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 90869		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Creative Type		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 12 / 2016
Mailing Address 3010 ALAMO AVE			Amount 95.00
City Critico	State CA	Zip Code 95973	Date of Disbursement or Obligation 09 / 15 / 2016
Purpose of Expenditure Signs - Design		Category/Type	
Name of Federal Candidate: Hillary Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 90869		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	90869
(a) SUBTOTAL of Unitemized Independent Expenditures	-
(a) TOTAL Independent Expenditures	90869


Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Michael Hewson

Date **09 / 10 / 2016**

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input checked="" type="checkbox"/> USPS Priority Mail	Postmarked 10/11/16
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER  (3/2015) 10/13/16
DATE PREPARED

20161013 10:10:00 AM