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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

WACKING COUNTY DEMOCRATIC WOMEN'S CAUCUS

ADDRESS (number and street) PO BOX 91

Check if different than previously reported. (ACC)

NEWARK OH 43058-1091

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00436723

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), 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 [MM/DD/YYYY] in the State of []

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

Election on [MM/DD/YYYY] in the State of []

5. Covering Period 01 01 2012 through 03 30 2012

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 Grace Anne Cherrington

Signature of Treasurer [Signature] Date 04 10 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only table with 10 columns and 1 row.

FEC FORM 3X Rev. 12/2004

12030781880

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Licking County Democratic Women's Caucus

Report Covering the Period:

From:

M M ' D D ' Y Y Y

01 01 2012

To:

M M ' D D ' Y Y Y

03 30 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y	2012	605.79
(b) Cash on Hand at Beginning of Reporting Period.....	605.79	
(c) Total Receipts (from Line 19).....	790.00	790.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	595.79	595.79
7. Total Disbursements (from Line 31).....	350.37	350.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	545.42	545.42
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	/	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	/	



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

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**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Licking County Democratic Women's Caucus

Report Covering the Period: From:

01 01 2012

To:

03 30 2012

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).....

(ii) Unitemized.....

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

(b) Political Party Committees.....

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

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

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

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)).....▶

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

290 -

290 -

290 -

290 -

290 -

290 -

290 -

290 -

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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)				PAGE OF	
	<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 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)
Licking County Democratic Women's Caucus

A. <i>Creative Catering</i>		Date of Disbursement
Mailing Address <i>102 Lakewood Drive</i>		<i>03' 29' 2012</i>
City <i>Hebron OH</i>	State <i>OH</i>	Zip Code <i>43025</i>
Purpose of Disbursement <i>Catering</i>	Category/Type <i>003</i>	Amount of Each Disbursement this Period <i>100.-</i>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>Event</i>
State: District:		

B. <i>Licking County Sheep Development</i>		Date of Disbursement
Mailing Address <i>c/o Foster 4201 Beaver Run Rd</i>		<i>03' 30' 2012</i>
City <i>Hebron OH</i>	State <i>OH</i>	Zip Code <i>43025</i>
Purpose of Disbursement <i>Ad</i>	Category/Type <i>003</i>	Amount of Each Disbursement this Period <i>50.-</i>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>Event</i>
State: District:		


C. <i>Buckeye Winery</i>		Date of Disbursement
Mailing Address <i>25 N 3rd St</i>		<i>03' 29' 2012</i>
City <i>Newark OH</i>	State <i>OH</i>	Zip Code <i>43025</i>
Purpose of Disbursement <i>Catering</i>	Category/Type <i>003</i>	Amount of Each Disbursement this Period <i>200.37</i>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>Event</i>
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<i>350.37</i>
TOTAL This Period (last page this line number only).....	<i>350.37</i>

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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
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input checked="" type="checkbox"/> USPS Priority Mail	Postmarked 4/9/12
Delivery Confirmation™ or Signature Confirmation™ Label	<input checked="" type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	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
 (3/2005)

4/16/12
DATE PREPARED

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