

**FEC  
FORM 3X**

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

2018 JUL 8 Office Use Only 12:08

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

12 FEB 4 15 RECEIVED  
FEDERAL ELECTION COMMISSION  
REPORT ANALYSIS DIVISION

Foothill Community Democrats

ADDRESS (number and street)

PO Box 1958

Check if different than previously reported. (ACC)

Monrovia CA 91017 - 1958

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00417097

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  /  /  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  04 /  01 /  2018 through  06 /  30 /  2018

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 Catherine A. McCallum

Signature of Treasurer Catherine A. McCallum

Date  07 /  06 /  2018

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

Office Use Only							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Foothill Community Democrats**

Report Covering the Period: From:

04 / 01 / 2018

To:

06 / 30 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2018		2859.63
(b) Cash on Hand at Beginning of Reporting Period.....	2818.83	
(c) Total Receipts (from Line 19).....	996.00	1442.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3764.63	4301.63
7. Total Disbursements (from Line 31).....	796.19	1282.99
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3018.64	3018.64
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**Foothill Community Democrats**

Report Covering the Period: From: 

MEM	/	D	D	/	Y	Y	Y	Y	Y	Y
04		01			2018					

 To: 

MEM	/	D	D	/	Y	Y	Y	Y	Y	Y
06		30			2018					

**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).....

50.00

50.00

(ii) Unitemized.....

946.00

1392.00

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

996.00

1442.00

(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).....▶

996.00

1442.00

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

0.00

0.00

13. All Loans Received.....

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

996.00

1442.00

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

996.00

1442.00

NON-FEDERAL CONTRIBUTIONS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

**II. Disbursements**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

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.....	796.19	1282.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)).....▶	796.19	1282.99
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).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	796.19	1282.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....▶	796.19	1282.99

20180700-00000000000000000000

**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).....	996.00	1442.00
34. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33).....	996.00	1442.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....▶	796.19	1282.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36).....▶	796.19	1282.99

NOTATION ON DONOR CONTRIBUTION

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

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

FOR LINE NUMBER: PAGE 1 OF 1

(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"/> 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)

Foothill Community Democrats

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

**A. Deana Igelsrud**

Mailing Address

801 S. LaVerne Blvd., #208

City  
Los Angeles

State  
CA

Zip Code  
90005

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)  
State of California

Occupation (for Individual)

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

05 / 24 / 2018

Amount of Each Receipt this Period

50.00

Memo Item

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

**B.**

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

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

**C. ActBlue**

Mailing Address

City  
Somerville

State  
MA

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

200.00

Memo Item

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

50.00

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

50.00

**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)					PAGE 1 OF 3
	<input checked="" type="checkbox"/> 21b 28a	<input type="checkbox"/> 22 28b	<input type="checkbox"/> 23 28c	<input type="checkbox"/> 26 29	<input type="checkbox"/> 27 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)  
Foothill Community Democrats

**A.** Full Name (Last, First, Middle Initial)  
United Methodist Church of Monrovia

Mailing Address  
140 E. Palm

City Monrovia State CA Zip Code 91016

Purpose of Disbursement  
Room Rental

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
04 / 09 / 2018

FEC Identification Number  
C

Amount of Each Disbursement this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
United Methodist Church of Monrovia

Mailing Address  
140 E. Palm

City Monrovia State CA Zip Code 91016

Purpose of Disbursement  
Room Rental

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
05 / 09 / 2018

FEC Identification Number  
C

Amount of Each Disbursement this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
United Methodist Church of Monrovia

Mailing Address  
140 E. Palm

City Monrovia State CA Zip Code 91016

Purpose of Disbursement  
Room Rental

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
06 / 01 / 2018

FEC Identification Number  
C

Amount of Each Disbursement this Period  
100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional) ..... 300.00

TOTAL This Period (last page this line number only) ..... 300.00

2018-07-09 10:00:00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Foothill Community Democrats**

Full Name (Last, First, Middle Initial)

Date of Disbursement

M	M	/	D	D	/	Y	Y	-	Y	Y	-	Y	Y
0	5		2	4		2	0	1	8				

A.

**Deanna Igelsrud**

Mailing Address

**801 S. LaVerne Blvd., #208**

City

**Los Angeles**

State

**CA**

Zip Code

**90005**

Purpose of Disbursement

**In-Kind Contribution, Meeting supplies**

Candidate Name

**001**

Category/  
Type

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**50.00**

Memo Item

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

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

**50.00**

NOTICE ON FORM 3X: CONFIDENTIAL



**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 3 OF 3
	<input checked="" type="checkbox"/> 21b <input type="checkbox"/> 28a	<input type="checkbox"/> 22 <input type="checkbox"/> 28b	<input type="checkbox"/> 23 <input type="checkbox"/> 28c	<input type="checkbox"/> 26 <input type="checkbox"/> 29	<input type="checkbox"/> 27 <input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Foothill Community Democrats**

**A.**

Full Name (Last, First, Middle Initial)  
**United Methodist Church of Monrovia**

Mailing Address  
**140 E. Palm**

City: **Monrovia** State: **CA** Zip Code: **91016**

Purpose of Disbursement  
**Room Rental, Town Hall**

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**05 / 23 / 2018**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**400.00**

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL of Disbursements This Page (optional)**.....▶ **400.00**

**TOTAL This Period (last page this line number only)**.....▶ **750.00**

20180523 05:00:00

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20463



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Foothill Community Democrats  
PO Box 1958  
Monrovia, CA 91017-1958

**PAYMENT BY ACCOUNT (if applicable)**  
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**DELIVERY OPTIONS (Customer Use Only)**  
 SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.  
**Delivery Options**  
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 Sunday/Holiday Delivery Required (additional fee, where available)  
 10:30 AM Delivery Required (additional fee, where available)  
\*Refer to USPS.com or local Post Office™ for availability.  
**TO:** (PLEASE PRINT) PHONE ( )  
Federal Election Commission  
1050 First Street NE  
Washington, DC 20463  
ZIP + 4® (U.S. ADDRESSES ONLY)  
20463

WRITE FIRMLY WITH BALL POINT PEN ON HARD SURFACE TO MAKE ALL COPIES LEGIBLE.

ORIGIN (POSTAL SERVICE USE ONLY)		DELIVERY (POSTAL SERVICE USE ONLY)	
PO ZIP Code 91060	Scheduled Delivery Date (MM/DD/YYYY) 07/09/18	Delivery Attempt (MM/DD/YYYY) Time AM PM	Employee Signature
Date Accepted (MM/DD/YYYY) 07/06/18	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> 10:30 AM Delivery Fee <input type="checkbox"/> 42 NOON	Delivery Attempt (MM/DD/YYYY) Time AM PM	Employee Signature
Time Accepted 2:05 PM	Return Receipt Fee \$	Weight (lb. oz.) 4 oz.	Flat Rate Acceptance Employee Initials CD
Insurance Fee \$	Live Animal Transportation Fee \$	Special Handling/Fragile \$	Sunday/Holiday Premium Fee \$
Postage \$ 24.70	Return Receipt Fee \$	Special Handling/Fragile \$	Sunday/Holiday Premium Fee \$
COD Fee \$	Live Animal Transportation Fee \$	Weight (lb. oz.) 4 oz.	Flat Rate Acceptance Employee Initials CD
Return Receipt Fee \$	Live Animal Transportation Fee \$	Special Handling/Fragile \$	Sunday/Holiday Premium Fee \$
Postage \$ 24.70	Return Receipt Fee \$	Special Handling/Fragile \$	Sunday/Holiday Premium Fee \$

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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.

20180706 09:01:00

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Date of Receipt
<input type="checkbox"/> USPS Priority Mail	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail Express	Postmarked 7/6/18
<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
ES PREPARER	7/9/18 DATE PREPARED