

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAIL CENTER

2022 FEB 10 PM 4:00

Office Use Only

12FE4M5  
30 JAN 22

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

ADDRESS (number and street) 13661 CARROLL WAY  
 Check if different than previously reported. (ACC)  
TUSTIN CA 92780

2. **FEC IDENTIFICATION NUMBER** C00655985  
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 01 / 01 / 2021 through 12 / 31 / 2021

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 JENNIFER RUTH GOLDEN

Signature of Treasurer Jennifer Ruth Golden Date 01 / 30 / 2022

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

NON-PROFIT COMMONS

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

TUSTIN DEMOCRATIC CLUB

Report Covering the Period: From:

MM / DD / YYYY  
01 / 01 / 2021

To:

MM / DD / YYYY  
12 / 31 / 2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span>YYYY</span> <u>2021</u>		1,438.46
(b) Cash on Hand at Beginning of Reporting Period.....	1,438.46	
(c) Total Receipts (from Line 19).....	5,690.34	5,690.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7,128.80	7,128.80
7. Total Disbursements (from Line 31).....	1,482.52	1,482.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5,646.28	5,646.28
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  
1050 First Street, N.E.  
Washington, DC 20463

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

NON-FEDERAL CAMPAIGN

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

TUSTIN DEMOCRATIC CLUB

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 01 / 01 / 2021 To: <sup>M M / D D / Y Y Y Y</sup> 12 / 31 / 2021

**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).....	5,690.34	5,690.34
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5,690.34	5,690.34
(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).....▶	5,690.34	5,690.34
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)).....▶	5,690.34	5,690.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5,690.34	5,690.34

NON-FEDERAL INFORMATION

**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
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 .....	1,482.52	1,482.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1,482.52	1,482.52
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)) ..	1,482.52	1,482.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1,482.52	1,482.52

NON-FEDERAL DONATIONS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	5,690.34	5,690.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5,690.34	5,690.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1,482.52	1,482.52
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1,482.52	1,482.52

NONDISCLOSURE INFORMATION

**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	OF
<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>
<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>
<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	17	<input type="checkbox"/>

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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. KIMBERLY ADAMS</b>		Date of Receipt M M / D D / Y Y Y Y <b>03 23 2021</b>
Mailing Address <b>1372 GARLAND AVENUE</b>		Amount of Each Receipt this Period <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>CALIFORNIA YIMBY</b>	Occupation (for Individual) <b>REGIONAL ORGANIZING DIRECTOR</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. KIMBERLY ADAMS</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 10 2021</b>
Mailing Address <b>1372 GARLAND AVENUE</b>		Amount of Each Receipt this Period <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>CALIFORNIA YIMBY</b>	Occupation (for Individual) <b>REGIONAL ORGANIZING DIRECTOR</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. KIMBERLY ADAMS</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 18 2021</b>
Mailing Address <b>1372 GARLAND AVENUE</b>		Amount of Each Receipt this Period <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>CALIFORNIA YIMBY</b>	Occupation (for Individual) <b>REGIONAL ORGANIZING DIRECTOR</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>60.00</b>	

SUBTOTAL of Receipts This Page (optional).....	<b>60.00</b>
TOTAL This Period (last page this line number only).....	

NON-PROFIT ORGANIZATION

**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	OF
	<input 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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ARIANA ATTIE</b>			Date of Receipt M M / D D / Y Y Y Y <b>07 22 / 2021</b>
Mailing Address <b>13412 SAN REMO</b>			Amount of Each Receipt this Period <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92782</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>20.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. JOSEPH AUBY</b>			Date of Receipt M M / D D / Y Y Y Y <b>10 13 / 2021</b>
Mailing Address <b>2323 PASEO CIRCULO CIRCLE</b>			Amount of Each Receipt this Period <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92782</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>COMM SCOPE</b>		Occupation (for Individual) <b>SOFTWARE ENGINEER</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>20.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SEAN BRADLEY</b>			Date of Receipt M M / D D / Y Y Y Y <b>09 26 / 2021</b>
Mailing Address <b>13311 VERONA</b>			Amount of Each Receipt this Period <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92782</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>PSSC LABS</b>		Occupation (for Individual) <b>PROTEST MANAGER</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>20.00</b>	

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

NON-PROFIT ORGANIZATION

**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 OF

<input 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)

TUSTIN DEMOCRATIC CLUB

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

A. GARY BROWN

Mailing Address

1352 FOOTHILL BLVD.

City

SANTA ANA

State

CA

Zip Code

92705

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

BUSINESS OWNER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

10 26 2021

Amount of Each Receipt this Period

99.00

Memo Item

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

B. GARY BROWN

Mailing Address

1352 FOOTHILL BLVD

City

SANTA ANA

State

CA

Zip Code

92705

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

BUSINESS OWNER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

12 19 2021

Amount of Each Receipt this Period

60.00

Memo Item

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

C. ROBBIN BURTON

Mailing Address

2009 BARCLAY COURT

City

SANTA ANA

State

CA

Zip Code

92701

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

EDWARD JONES

Occupation (for Individual)

ADMINISTRATOR

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

01 26 2021

Amount of Each Receipt this Period

50.00

Memo Item

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

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	OF
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ROBBIN BURTON</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 14 20 21</b>
Mailing Address <b>2009 BARCLAY COURT</b>		Amount of Each Receipt this Period <b>, , 18.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
Zip Code <b>92701</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>EDWARD JONES</b>		Aggregate Year-to-Date ▼ <b>, , .</b>
Occupation (for Individual) <b>ADMINISTRATOR</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ROBBIN BURTON</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 19 20 21</b>
Mailing Address <b>2009 BARCLAY COURT</b>		Amount of Each Receipt this Period <b>, , 20.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
Zip Code <b>92701</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>EDWARD JONES</b>		Aggregate Year-to-Date ▼ <b>, , 88.00</b>
Occupation (for Individual) <b>ADMINISTRATOR</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. GAIL CARSTENS</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 14 20 21</b>
Mailing Address <b>1042 TROPIC LANE</b>		Amount of Each Receipt this Period <b>, , 166.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
Zip Code <b>92705</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>TUSTIN UNIFIED SCHOOL DISTRICT</b>		Aggregate Year-to-Date ▼ <b>, , .</b>
Occupation (for Individual) <b>CLERK</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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:		PAGE	OF
<input 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)

**TUSTIN DEMOCRATIC CLUB**

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

**A. GAIL CARSTENS**

Mailing Address

**1042 TROPIC LANE**

City

**SANTA ANA**

State

**CA**

Zip Code

**92705**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**TUSTIN UNIFIED SCHOOL DISTRICT**

Occupation (for Individual)

**CLERK**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , **196.00**

Date of Receipt

**11 09 2021**

Amount of Each Receipt this Period

, , **30.00**

Memo Item

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

**B. CHERYL CER VANTES**

Mailing Address

**1821 OVERVIEW CIRCLE**

City

**SANTA ANA**

State

**CA**

Zip Code

**92705**

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 ▼

, , **30.00**

Date of Receipt

**09 29 2021**

Amount of Each Receipt this Period

, , **30.00**

Memo Item

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

**C. ACHALA CHATTERJEE**

Mailing Address

**18782 DODGE AVENUE**

City

**SANTA ANA**

State

**CA**

Zip Code

**92705**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**UNEMPLOYED**

Occupation (for Individual)

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , **30.00**

Date of Receipt

**12 18 2021**

Amount of Each Receipt this Period

, , **30.00**

Memo Item

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

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

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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE	OF
(check only one)			
<input 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)

TUSTIN DEMOCRATIC CLUB

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

A. ELIZABETH MESHIRE

Mailing Address

2215 CATALPA DRIVE

City

TUSTIN

State

CA

Zip Code

92782

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , 20.00

Date of Receipt

M M / D D / Y Y Y Y  
01 26 2021

Amount of Each Receipt this Period

20.00

Memo Item

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

B. JO ANN COHN

Mailing Address

422 S. RODEO DRIVE

City

BEVERLY HILLS

State

CA

Zip Code

90212

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , 30.00

Date of Receipt

M M / D D / Y Y Y Y  
04 25 2021

Amount of Each Receipt this Period

30.00

Memo Item

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

C. LESLIE COX

Mailing Address

2294 CLOVER DRIVE

City

TUSTIN

State

CA

Zip Code

92780

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

VETERAN'S ADMINISTRATION SOCIAL WORKER

Occupation (for Individual)

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, ,

Date of Receipt

M M / D D / Y Y Y Y  
01 02 2021

Amount of Each Receipt this Period

100.00

Memo Item

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

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

NON-FEDERAL CAMPAIGN CONTRIBUTION

**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 OF

<input 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)

**TUSTIN DEMOCRATIC CLUB**

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

**A. LESLIE COX**

Mailing Address

**2294 CLOVER DRIVE**

City

**TUSTIN**

State

**CA**

Zip Code

**92780**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**VETERAN'S ADMINISTRATION**

Occupation (for Individual)

**SOCIAL WORKER**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**06 24 2021**

Amount of Each Receipt this Period

**1,500.00**

Memo Item

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

**B. LESLIE COX**

Mailing Address

**2294 CLOVER DRIVE**

City

**TUSTIN**

State

**CA**

Zip Code

**92780**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**VETERAN'S ADMINISTRATION**

Occupation (for Individual)

**SOCIAL WORKER**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**07 27 2021**

Amount of Each Receipt this Period

**50.00**

Memo Item

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

**C. LESLIE COX**

Mailing Address

**2294 CLOVER DRIVE**

City

**TUSTIN**

State

**CA**

Zip Code

**92780**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**VETERAN'S ADMINISTRATION**

Occupation (for Individual)

**SOCIAL WORKER**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**08 14 2021**

Amount of Each Receipt this Period

**28.00**

Memo Item

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

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

NONDISCRIMINATION

**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	OF
	<input 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)  
**TUSTIN DEMOCRATIC CLUB**

**A. LESLIE COX**

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

Mailing Address  
**2294 CLOVER DRIVE**

City  
**TUSTIN** State  
**CA** Zip Code  
**92780**

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

Name of Employer (for Individual)  
**VETERAN'S ADMINISTRATION** Occupation (for Individual)  
**SOCIAL WORKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
**12 07 / 2021**

Amount of Each Receipt this Period  
**50.00**

Memo Item

**B. LESLIE COX**

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

Mailing Address  
**2294 CLOVER DRIVE**

City  
**TUSTIN** State  
**CA** Zip Code  
**92780**

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

Name of Employer (for Individual)  
**VETERAN'S ADMINISTRATION** Occupation (for Individual)  
**SOCIAL WORKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
**12 19 / 2021**

Amount of Each Receipt this Period  
**400.00**

Memo Item

**C. ~~SHIRLEY~~ CARRIE CREVEL**

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

Mailing Address  
**13972 MALENA DRIVE**

City  
**TUSTIN** State  
**CA** Zip Code  
**92780**

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

Name of Employer (for Individual)  
**UNEMPLOYED** Occupation (for Individual)  
**—**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
**12 17 / 2021**

Amount of Each Receipt this Period  
**20.00**

Memo Item

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

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

NON-INDIVIDUAL CONTRIBUTION

**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 OF

<input 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"/> 17	

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NAME OF COMMITTEE (In Full)

**TUSTIN DEMOCRATIC CLUB**

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

A. **DEBRA CURRY**

Mailing Address

**1205 E. 1ST STREET**

City

**TUSTIN**

State

**CA**

Zip Code

**92780**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**YOSEMITE CAPITAL MANAGEMENT**

Occupation (for Individual)

**CFP**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , **30.00**

Date of Receipt

**12 03 2021**

Amount of Each Receipt this Period

**30.00**

Memo Item

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

B. **COLLEEN CULVER-JAFFE**

Mailing Address

**11355 ARROYO AVENUE**

City

**SANTA ANA**

State

**CA**

Zip Code

**92705**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**UNEMPLOYED**

Occupation (for Individual)

**-**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , **30.00**

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

**30.00**

Memo Item

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

C. **ALLYSON DAMIKOLAS**

Mailing Address

**14172 LIVINGSTON ST. APT. S**

City

**TUSTIN**

State

**CA**

Zip Code

**92780**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**TUSTIN UNIFIED SCHOOL DISTRICT**

Occupation (for Individual)

**TRUSTEE**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , .

Date of Receipt

**02 23 2021**

Amount of Each Receipt this Period

**100.00**

Memo Item

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

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

NON DISCRIMINATION

**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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)  
**TUSTIN DEMOCRATIC CLUB**

UNRECORDED COPY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ALLYSON DAMIKOLAS</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 09 / 2021</b>
Mailing Address <b>14172 LIVINGSTON ST. APT. 3</b>			Amount of Each Receipt this Period <b>150.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C.</b>			Memo Item
Name of Employer (for Individual) <b>TUSTIN UNIFIED SCHOOL DISTRICT</b>		Occupation (for Individual) <b>TRUSTEE</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ALLYSON DAMIKOLAS</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 18 / 2021</b>
Mailing Address <b>14172 LIVINGSTON ST. APT. 3</b>			Amount of Each Receipt this Period <b>25.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C.</b>			Memo Item
Name of Employer (for Individual) <b>TUSTIN UNIFIED SCHOOL DISTRICT</b>		Occupation (for Individual) <b>TRUSTEE</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>275.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. HONOUR DEL CROGNALE</b>			Date of Receipt M M / D D / Y Y Y Y <b>01 10 / 2021</b>
Mailing Address <b>13792 LORETTA</b>			Amount of Each Receipt this Period <b>30.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C.</b>			Memo Item
Name of Employer (for Individual) <b>TUSTIN UNIFIED SCHOOL DISTRICT</b>		Occupation (for Individual) <b>LIBRARIAN</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>30.00</b>	

SUBTOTAL of Receipts This Page (optional).....▶	
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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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)

TUSTIN DEMOCRATIC CLUB

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MICHELLE DIEP</b>			Date of Receipt M M / D D / Y Y Y Y <u>01 26 2021</u>
Mailing Address <u>76 BARTLET PLACE</u>			Amount of Each Receipt this Period  <u>20.00</u>
City <u>TUSTIN</u>	State <u>CA</u>	Zip Code <u>92782</u>	
FEC ID number of contributing federal political committee. <u>C</u>			Memo Item
Name of Employer (for Individual) <u>QUALITY CARE</u>		Occupation (for Individual) <u>PHARMACIST</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. MICHELLE DIEP</b>			Date of Receipt M M / D D / Y Y Y Y <u>12 19 2021</u>
Mailing Address <u>76 BARTLET PLACE</u>			Amount of Each Receipt this Period  <u>110.00</u>
City <u>TUSTIN</u>	State <u>CA</u>	Zip Code <u>92782</u>	
FEC ID number of contributing federal political committee. <u>C</u>			Memo Item
Name of Employer (for Individual) <u>QUALITY CARE</u>		Occupation (for Individual) <u>PHARMACIST</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. MICHELLE DIEP</b>			Date of Receipt M M / D D / Y Y Y Y <u>12 27 2021</u>
Mailing Address <u>76 BARTLET PLACE</u>			Amount of Each Receipt this Period  <u>20.00</u>
City <u>TUSTIN</u>	State <u>CA</u>	Zip Code <u>92782</u>	
FEC ID number of contributing federal political committee. <u>C</u>			Memo Item
Name of Employer (for Individual) <u>QUALITY CARE</u>		Occupation (for Individual) <u>PHARMACIST</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <u>150.00</u>	

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

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

NON-FEDERAL CONTRIBUTION



**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 OF

<input 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)

**TUSTIN DEMOCRATIC CLUB**

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

**A. KIM DONAHUE**

Mailing Address

**11982 RED HILL AVENUE**

City

**SANTA ANA**

State

**CA**

Zip Code

**92705**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**ISTCALLHEALTH**

Occupation (for Individual)

**DIRECTOR OF MARKETING**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**08 / 14 / 2021**

Amount of Each Receipt this Period

**, , 36.00**

Memo Item

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

**B. KIM DONAHUE**

Mailing Address

**11982 RED HILL AVENUE**

City

**SANTA ANA**

State

**CA**

Zip Code

**92705**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**ISTCALLHEALTH**

Occupation (for Individual)

**DIRECTOR OF MARKETING**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**12 / 18 / 2021**

Amount of Each Receipt this Period

**, , 50.00**

Memo Item

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

**C. REGINA DUNDA**

Mailing Address

**2232 ASPEN STREET**

City

**TUSTIN**

State

**CA**

Zip Code

**92782**

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

**UNEMPLOYED**

Occupation (for Individual)

**-**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**12 / 03 / 2021**

Amount of Each Receipt this Period

**, , 30.00**

Memo Item

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

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

NON-CONFIDENTIAL

**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. VIRGINIA ESHETMARDI</b>			Date of Receipt M M / D D / Y Y Y Y <b>07 / 14 / 2021</b>
Mailing Address <b>950 SOUTH BUCKNELL CIRCLE</b>			Amount of Each Receipt this Period  , , <b>20.00</b>
City <b>ANAHEIM HILLS</b>	State <b>CA</b>	Zip Code <b>92807</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  , , <b>20.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SEBASTIAN FELDMAN</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 / 13 / 2021</b>
Mailing Address <b>902 S. PAULA LANE</b>			Amount of Each Receipt this Period  , , <b>60.00</b>
City <b>ANAHEIM</b>	State <b>CA</b>	Zip Code <b>92805</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>JEWISH FEDERATION OF ORANGE COUNTY</b>		Occupation (for Individual) <b>CAMPAIGN ASSOCIATE</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  , , <b>60.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SHANA LIFE</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 / 18 / 2021</b>
Mailing Address <b>13682 SAIGON LANE</b>			Amount of Each Receipt this Period  , , <b>20.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	Zip Code <b>92705</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  , , <b>20.00</b>	

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

CONFIDENTIAL - WE DON'T TALK BUSINESS

**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	OF
	<input 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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. LEE FINK</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 15 2021</b>
Mailing Address <b>150 MOUNTAIN VIEW DRIVE</b>		Amount of Each Receipt this Period  <b>, , 30.00</b>
City <b>TUSTIN</b>	State Zip Code <b>CA 92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>BROWER LAW GROUP APC</b>	Occupation (for Individual) <b>LAWYER</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>, , 30.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. STEPHEN FISCHMAN</b>		Date of Receipt M M / D D / Y Y Y Y <b>07 09 2021</b>
Mailing Address <b>26582 DOLOROSA</b>		Amount of Each Receipt this Period  <b>, , 35.00</b>
City <b>MISSION VIEJO</b>	State Zip Code <b>CA 92691</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>	Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>, , 35.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. GEORGE DAVID</b>		Date of Receipt M M / D D / Y Y Y Y <b>01 03 2021</b>
Mailing Address <b>7 LONGVALE</b>		Amount of Each Receipt this Period  <b>, , 20.00</b>
City <b>IRVINE</b>	State Zip Code <b>CA 92602</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>	Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>, , 20.00</b>	

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

NON-CONFIDENTIAL

**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 OF

<input 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)

TUSTIN DEMOCRATIC CLUB

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

**A.** JENNIFER GOLDEN

Date of Receipt

M M / D D / Y Y Y Y  
02 24 2021

Mailing Address

13661 CARROLL WAY

City

TUSTIN

State

CA

Zip Code

92780

Amount of Each Receipt this Period

, , 20.00

Memo Item

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

**B.** JENNIFER GOLDEN

Date of Receipt

M M / D D / Y Y Y Y  
07 13 2021

Mailing Address

13661 CARROLL WAY

City

TUSTIN

State

CA

Zip Code

92780

Amount of Each Receipt this Period

, , 50.00

Memo Item

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

**C.** JENNIFER GOLDEN

Date of Receipt

M M / D D / Y Y Y Y  
07 18 2021

Mailing Address

13661 CARROLL WAY

City

TUSTIN

State

CA

Zip Code

92780

Amount of Each Receipt this Period

, , 50.00

Memo Item

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

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

20210714 10:00 AM

**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	OF
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. JENNIFER GOLDEN</b>			Date of Receipt M M / D D / Y Y Y Y <b>08 14 2021</b>
Mailing Address <b>13661 CARROLL WAY</b>			Amount of Each Receipt this Period  <b>, , 160.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>-</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. JENNIFER GOLDEN</b>			Date of Receipt M M / D D / Y Y Y Y <b>10 23 2021</b>
Mailing Address <b>13661 CARROLL WAY</b>			Amount of Each Receipt this Period  <b>, , 70.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>-</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. JENNIFER GOLDEN</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 07 2021</b>
Mailing Address <b>13661 CARROLL WAY</b>			Amount of Each Receipt this Period  <b>, , 40.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>-</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	

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

NON-CONFIDENTIAL

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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE	OF
<input 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)

TUSTIN DEMOCRATIC CLUB

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

A. JENNIFER GOLDEN

Mailing Address

13661 CARROLL WAY

City

TUSTIN

State

CA

Zip Code

92780

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , 664.00

Date of Receipt

M M / D D / Y Y Y Y  
12 18 2021

Amount of Each Receipt this Period

, , 274.00

Memo Item

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

B. REBECCA GOMEZ

Mailing Address

17512 CHATHAM DRIVE

City

TUSTIN

State

CA

Zip Code

92780

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

ORANGE COUNTY BOARD OF EDUCATION

Occupation (for Individual)

TRUSTEE

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, ,

Date of Receipt

M M / D D / Y Y Y Y  
10 26 2021

Amount of Each Receipt this Period

, , 30.00

Memo Item

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

C. REBECCA GOMEZ

Mailing Address

17512 CHATHAM DRIVE

City

TUSTIN

State

CA

Zip Code

92780

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

ORANGE COUNTY BOARD OF EDUCATION

Occupation (for Individual)

TRUSTEE

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , 280.00

Date of Receipt

M M / D D / Y Y Y Y  
12 15 2021

Amount of Each Receipt this Period

, , 250.00

Memo Item

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

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

NON-PROFIT COMMON SENSE

**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 OF

<input 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)

TUSTIN DEMOCRATIC CLUB

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

A. LISA HARRISON

Mailing Address

14221 RONDEL PLACE

City

TUSTIN

State

CA

Zip Code

92780

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

COLLEGE CONSULTANT

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

12 / 14 / 2021

Amount of Each Receipt this Period

30.00

Memo Item

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

B. LISA HARRISON

Mailing Address

14221 RONDEL PLACE

City

TUSTIN

State

CA

Zip Code

92780

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

COLLEGE CONSULTANT

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

12 / 18 / 2021

Amount of Each Receipt this Period

150.00

Memo Item

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

C. KAREN HERNANDEZ

Mailing Address

435 W. CENTER ST. PROMENADE

City

ANAHEIM

State

CA

Zip Code

92805

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

GGFD

Occupation (for Individual)

SENIOR ANALYST

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

12 / 14 / 2021

Amount of Each Receipt this Period

20.00

Memo Item

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

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	OF
<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	11c	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	12	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	15	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	16	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		17

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. GENIECE HIGGINS</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 14 2021</b>
Mailing Address <b>14482 CHERRYWOOD LANE</b>		Amount of Each Receipt this Period  <b>, 20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
Zip Code <b>92780</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>COUNTY OF ORANGE</b>	Occupation (for Individual) <b>SUPERVISOR</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. GENIECE HIGGINS</b>		Date of Receipt M M / D D / Y Y Y Y <b>10 26 2021</b>
Mailing Address <b>14482 CHERRYWOOD LANE</b>		Amount of Each Receipt this Period  <b>, 100.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
Zip Code <b>92780</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>COUNTY OF ORANGE</b>	Occupation (for Individual) <b>SUPERVISOR</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, 120.00</b>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. FLORICE HOFFMAN</b>		Date of Receipt M M / D D / Y Y Y Y <b>03 07 2021</b>
Mailing Address <b>8502 E. CHAPMAN AVE. # 353</b>		Amount of Each Receipt this Period  <b>, 20.00</b>
City <b>ORANGE</b>	State <b>CA</b>	
Zip Code <b>92869</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>SELF-EMPLOYED</b>	Occupation (for Individual) <b>LAWYER</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, 20.00</b>

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

NON-PROFIT CORPORATION



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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE		OF	
<input 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"/> 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)

TUSTIN DEMOCRATIC CLUB

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

A. SARAM JAKLE

Mailing Address

4135 CHARLENE DR

City

LOS ANGELES

State

CA

Zip Code

90035

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , 20.00

Date of Receipt

M M / D D / Y Y Y Y  
12 13 2021

Amount of Each Receipt this Period

, , 20.00

Memo Item

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

B. JANICE KENDRICK

Mailing Address

14192 LIVINGSTON STREET

City

TUSTIN

State

CA

Zip Code

92780

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, ,

Date of Receipt

M M / D D / Y Y Y Y  
08 14 2021

Amount of Each Receipt this Period

, , ~~52.00~~

Memo Item

70.00

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

C. JANICE KENDRICK

Mailing Address

14192 LIVINGSTON STREET

City

TUSTIN

State

CA

Zip Code

92780

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, ,

Date of Receipt

M M / D D / Y Y Y Y  
11 27 2021

Amount of Each Receipt this Period

, , 30.00

Memo Item

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

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

UNEMPLOYED

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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE	OF
<input 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)

TUSTIN DEMOCRATIC CLUB

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

A. SARAH JAKLE

Date of Receipt

M M / D D / Y Y Y Y  
12 13 2021

Mailing Address

4135 CHARLENE DRIVE

City

LOS ANGELES

State

CA

Zip Code

90035

Amount of Each Receipt this Period

, , 20.00

FEC ID number of contributing federal political committee.

C

Memo Item

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , 20.00

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

B. JANICE KENDRICK

Date of Receipt

M M / D D / Y Y Y Y  
08 14 2021

Mailing Address

14192 LIVINGSTON STREET

City

TUSTIN

State

CA

Zip Code

92780

Amount of Each Receipt this Period

, , 70.00

FEC ID number of contributing federal political committee.

C

Memo Item

Name of Employer (for Individual)

ST. JOSEPH HOSPITAL

Occupation (for Individual)

DIETITIAN

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, ,

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

C. JANICE KENDRICK

Date of Receipt

M M / D D / Y Y Y Y  
11 27 2021

Mailing Address

14192 LIVINGSTON STREET

City

TUSTIN

State

CA

Zip Code

92780

Amount of Each Receipt this Period

, , 30.00

FEC ID number of contributing federal political committee.

C

Memo Item

Name of Employer (for Individual)

ST. JOSEPH HOSPITAL

Occupation (for Individual)

DIETITIAN

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , 100.00

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

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

NON-PROFIT ORGANIZATION

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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE		OF
<input 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)

TUSTIN DEMOCRATIC CLUB

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. KATHLEEN FITZSIMMONS KLEIN</b>			Date of Receipt M M / D D / Y Y Y Y <u>08 14 2021</u>
Mailing Address <u>14022 MATRYCE WAY</u>			Amount of Each Receipt this Period  \$ <u>30.00</u>
City <u>TUSTIN</u>	State <u>CA</u>	Zip Code <u>92780</u>	
FEC ID number of contributing federal political committee. <u>C</u>			Memo Item
Name of Employer (for Individual) <u>UNEMPLOYED</u>		Occupation (for Individual) <u>—</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  \$ <u>30.00</u>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ELLEN KNOFF</b>			Date of Receipt M M / D D / Y Y Y Y <u>02 06 2021</u>
Mailing Address <u>17626 CHATHAM DRIVE</u>			Amount of Each Receipt this Period  \$ <u>20.00</u>
City <u>TUSTIN</u>	State <u>CA</u>	Zip Code <u>92780</u>	
FEC ID number of contributing federal political committee. <u>C</u>			Memo Item
Name of Employer (for Individual) <u>UNEMPLOYED</u>		Occupation (for Individual) <u>—</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  \$ <u>20.00</u>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. ELLEN KNOFF</b>			Date of Receipt M M / D D / Y Y Y Y <u>04 14 2021</u>
Mailing Address <u>17626 CHATHAM DRIVE</u>			Amount of Each Receipt this Period  \$ <u>20.00</u>
City <u>TUSTIN</u>	State <u>CA</u>	Zip Code <u>92780</u>	
FEC ID number of contributing federal political committee. <u>C</u>			Memo Item
Name of Employer (for Individual) <u>UNEMPLOYED</u>		Occupation (for Individual) <u>—</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  \$ <u>20.00</u>	

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

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

NON-FEDERAL CONTRIBUTIONS 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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ELLEN KNOFF</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 14 2021</b>
Mailing Address <b>17626 CNATHAM DRIVE</b>		Amount of Each Receipt this Period  <b>, , 10.00</b>
City <b>TUSTIN</b>	State <b>CA</b> Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>	Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>, , 50.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. LISA KOLIBAR</b>		Date of Receipt M M / D D / Y Y Y Y <b>01 06 2021</b>
Mailing Address <b>14452 HOWLAND WAY</b>		Amount of Each Receipt this Period  <b>, , 50.00</b>
City <b>TUSTIN</b>	State <b>CA</b> Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>ONLINE TRADING ACADEMY</b>	Occupation (for Individual) <b>MARKETING</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>, , 50.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. CHARLES KU</b>		Date of Receipt M M / D D / Y Y Y Y <b>05 12 2021</b>
Mailing Address <b>10952 HARROGATE PLACE</b>		Amount of Each Receipt this Period  <b>, , 30.00</b>
City <b>SANTA ANA</b>	State <b>CA</b> Zip Code <b>92705</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>ANAHEIM UNION HIGH SCHOOL DISTRICT</b>	Occupation (for Individual) <b>ADMINISTRATOR</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>, , 30.00</b>	

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

COMMONS

**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MICHAEL LEKAWA</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 19 2021</b>
Mailing Address <b>761 NARCISSUS</b>			Amount of Each Receipt this Period  <b>, , 70.00</b>
City <b>CORONA DEL MAR</b>	State <b>CA</b>	Zip Code <b>92625</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UCI</b>		Occupation (for Individual) <b>SURGEON</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 70.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ROSEANN LINAKER</b>			Date of Receipt M M / D D / Y Y Y Y <b>07 25 2021</b>
Mailing Address <b>12570 BARRETT LANE</b>			Amount of Each Receipt this Period  <b>, , 20.00</b>
City <b>NORTH TUSTIN</b>	State <b>CA</b>	Zip Code <b>92705</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 20.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. DORIS LONGMEAD</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 10 2021</b>
Mailing Address <b>8236 E. CANDLEBERRY CIRCLE</b>			Amount of Each Receipt this Period  <b>, , 50.00</b>
City <b>GRANGE</b>	State <b>CA</b>	Zip Code <b>92869</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 50.0</b>	

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

NON-PROFIT ORGANIZATION

**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	OF
<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>
<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>
<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>
<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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MARIE LUEBBERS</b>			Date of Receipt M M / D D / Y Y Y Y <b>08 14 2021</b>
Mailing Address <b>14201 CHERRY WOOD LANE</b>			Amount of Each Receipt this Period  <b>, , 41.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>-</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 41.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BARBARA LUTHER</b>			Date of Receipt M M / D D / Y Y Y Y <b>02 02 2021</b>
Mailing Address <b>7315 E. WRANGLER CIRCLE</b>			Amount of Each Receipt this Period  <b>, , 20.00</b>
City <b>ORANGE</b>	State <b>CA</b>	Zip Code <b>92869</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>SOCCLD</b>		Occupation (for Individual) <b>TEACHER</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, ,</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BARBARA LUTHER</b>			Date of Receipt M M / D D / Y Y Y Y <b>07 25 2021</b>
Mailing Address <b>7315 E. WRANGLER CIRCLE</b>			Amount of Each Receipt this Period  <b>, , 35.00</b>
City <b>ORANGE</b>	State <b>CA</b>	Zip Code <b>92869</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>SOCCLD</b>		Occupation (for Individual) <b>TEACHER</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 55.00</b>	

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

NON-PROFIT ORGANIZATION

**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	OF
<input 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)

**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. EYDIE MALIK</b>			Date of Receipt M M / D D / Y Y Y Y <b>07 07 2021</b>
Mailing Address <b>1025 SUNDANCE</b>			Amount of Each Receipt this Period  <b>, , 20.00</b>
City <b>ANAMELM HILLS</b>	State <b>CA</b>	Zip Code <b>92782</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>, , 20.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BRANDON MARTINEZ</b>			Date of Receipt M M / D D / Y Y Y Y <b>08 14 2021</b>
Mailing Address <b>2165 PALMER PLACE</b>			Amount of Each Receipt this Period  <b>, , 18.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92782</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>STUDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>, , 18.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. CYNTHIA McCARDWELL</b>			Date of Receipt M M / D D / Y Y Y Y <b>01 10 2021</b>
Mailing Address <b>2165 POPPY DRIVE</b>			Amount of Each Receipt this Period  <b>, , 20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>, , 20.00</b>	

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

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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE	OF
<input 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)

TUSTIN DEMOCRATIC CLUB

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

A. TINA MILLER

Date of Receipt

M M / D D / Y Y Y Y  
01 / 03 / 2021

Mailing Address

621 W. FLETCHER AVENUE UNIT 4

City

ORANGE

State

CA

Zip Code

92865

Amount of Each Receipt this Period

, , 20.00

FEC ID number of contributing federal political committee.

C

Memo Item

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , 20.00

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

B. ANGELA MISCIONE

Date of Receipt

M M / D D / Y Y Y Y  
08 / 14 / 2021

Mailing Address

12381 CHARLOMA DRIVE

City

TUSTIN

State

CA

Zip Code

92780

Amount of Each Receipt this Period

, , 30.00

FEC ID number of contributing federal political committee.

C

Memo Item

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , 30.00

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

C. SHARON OHARA

Date of Receipt

M M / D D / Y Y Y Y  
12 / 12 / 2021

Mailing Address

700 W. WALNUT AVE. APT. 21

City

ORANGE

State

CA

Zip Code

92868

Amount of Each Receipt this Period

, , 20.00

FEC ID number of contributing federal political committee.

C

Memo Item

Name of Employer (for Individual)

UNEMPLOYED

Occupation (for Individual)

—

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

, , 20.00

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

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

NON-PROFIT ORGANIZATION



**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. CELINE OSBORN</b>		Date of Receipt M M / D D / Y Y Y Y <b>07 10 2021</b>
Mailing Address <b>1602 S.E. SKYLINE</b>		Amount of Each Receipt this Period  <b>, , 50.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		
Occupation (for Individual) <b>—</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , .</b>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. CELINE OSBORN</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 02 2021</b>
Mailing Address <b>1602 S.E. SKYLINE</b>		Amount of Each Receipt this Period  <b>, , 20.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		
Occupation (for Individual) <b>—</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , .</b>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. CELINE OSBORN</b>		Date of Receipt M M / D D / Y Y Y Y <b>10 26 2021</b>
Mailing Address <b>1602 S.E. SKYLINE</b>		Amount of Each Receipt this Period  <b>, , 100.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		
Occupation (for Individual) <b>—</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 170.00</b>

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

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**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	OF
	<input 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)  
**TUSTIN DEMOCRATIC CLUB**

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

Mailing Address  
**13412 MONTECITO**

City State Zip Code  
**TUSTIN CA 92782**

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

Name of Employer (for Individual) Occupation (for Individual)  
**MOLINA HEALTHCARE INC. HEALTHCARE MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**30.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**02 03 2021**

Amount of Each Receipt this Period  
**30.00**

Memo Item

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

Mailing Address  
**14692 LIVINGSTON STREET**

City State Zip Code  
**TUSTIN CA 92780**

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

Name of Employer (for Individual) Occupation (for Individual)  
**AUHSD TEACHER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
**07 10 2021**

Amount of Each Receipt this Period  
**30.00**

Memo Item

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

Mailing Address  
**14692 LIVINGSTON STREET**

City State Zip Code  
**TUSTIN CA 92780**

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

Name of Employer (for Individual) Occupation (for Individual)  
**AUHSD TEACHER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**60.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**09 24 2021**

Amount of Each Receipt this Period  
**30.00**

Memo Item

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

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

NON-IDENTIFIABLE INFORMATION

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE	OF
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. CLAUDIA RILEY</b>			Date of Receipt M M / D D / Y Y Y Y <b>06 16 2021</b>
Mailing Address <b>2191 DOGWOOD ROAD</b>			Amount of Each Receipt this Period  <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>, ,</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. CLAUDIA RILEY</b>			Date of Receipt M M / D D / Y Y Y Y <b>09 25 2021</b>
Mailing Address <b>2191 DOGWOOD ROAD</b>			Amount of Each Receipt this Period  <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>, , 40.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SANDRA ROBBIE</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 12 2021</b>
Mailing Address <b>19102 BARNETT LANE</b>			Amount of Each Receipt this Period  <b>40.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	Zip Code <b>92705</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>, , 40.00</b>	

SUBTOTAL of Receipts This Page (optional).....▶	<b>20.00</b>
TOTAL This Period (last page this line number only).....▶	<b>20.00</b>

NON-PROFIT ORGANIZATION

**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	OF
	<input 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)  
**TUSTIN DEMOCRATIC CLUB**

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

Mailing Address  
**6 BRISBANE WAY**

City **IRVINE** State **CA** Zip Code **92612**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 01 2021**

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

Amount of Each Receipt this Period  
 , , **20.00**

Name of Employer (for Individual) **SAVOY FOOD GROUP** Occupation (for Individual) **FOOD BROKER**

Memo Item

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 , , **20.00**

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

Mailing Address  
**13571 FAIRMONT WAY**

City **TUSTIN** State **CA** Zip Code **92780**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 17 2021**

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

Amount of Each Receipt this Period  
 , , **20.00**

Name of Employer (for Individual) **SELF-EMPLOYED** Occupation (for Individual) **NOT STATED**

Memo Item

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 , , **20.00**

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

Mailing Address  
~~44895~~ **1501 LONGMONT PLACE**

City **SANTA ANA** State **CA** Zip Code **92705**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 18 2021**

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

Amount of Each Receipt this Period  
 , , **30.00**

Name of Employer (for Individual) **UNEMPLOYED** Occupation (for Individual) **-**

Memo Item

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 , , **30.00**

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

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

NON-PROFIT ORGANIZATION

**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	OF
	<input 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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MELISSA SEELEY</b>			Date of Receipt
Mailing Address <b>13816 LORETTA DRIVE</b>			M M / D D / Y Y Y Y <b>10 19 2021</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	Amount of Each Receipt this Period  <b>, , 50.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer (for Individual) <b>PACIFIC COAST SPEECH</b>		Occupation (for Individual) <b>MARKETING/HR</b>	Memo Item
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 50.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SANFORD SIMON</b>			Date of Receipt
Mailing Address <b>10884 KIMBALL PLACE</b>			M M / D D / Y Y Y Y <b>03 24 2021</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92782</b>	Amount of Each Receipt this Period  <b>, , 30.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer (for Individual) <b>EVENT WIZARD INC.</b>		Occupation (for Individual) <b>NOT STATED</b>	Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 30.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. CONNIE SIMON</b>			Date of Receipt
Mailing Address <b>10884 KIMBALL PLACE</b>			M M / D D / Y Y Y Y <b>08 14 2021</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	Amount of Each Receipt this Period  <b>, , 18.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	Memo Item
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 18.00</b>	

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

NON-CONFIDENTIAL

**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. TERESA SOREY</b>			Date of Receipt
Mailing Address <b>108 WILDWOOD</b>			M M / D D / Y Y Y Y <b>12 18 2021</b>
City <b>IRVINE</b>	State <b>CA</b>	Zip Code <b>92604</b>	Amount of Each Receipt this Period  <b>20.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	Memo Item
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>20.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. RICHARD SPICER</b>			Date of Receipt
Mailing Address <b>13921 MAUVE DRIVE</b>			M M / D D / Y Y Y Y <b>01 10 2021</b>
City <b>NORTH TUSTIN</b>	State <b>CA</b>	Zip Code <b>92705</b>	Amount of Each Receipt this Period  <b>10.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer (for Individual) <b>LAMPS PLUS INC.</b>		Occupation (for Individual) <b>VP SALES + MARKETING</b>	Memo Item
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>10.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BRIAN SJOBERG</b>			Date of Receipt
Mailing Address <b>163 NORTH "B" STREET</b>			M M / D D / Y Y Y Y <b>08 14 2021</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	Amount of Each Receipt this Period  <b>18.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	Memo Item
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>18.00</b>	

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

NON-CONFIDENTIAL

**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BRIAN SJOBERG</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 15 2021</b>
Mailing Address <b>163 NORTH "B" STREET</b>		Amount of Each Receipt this Period  <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>	Occupation (for Individual) <b>-</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>38.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. LEEANN STONE</b>		Date of Receipt M M / D D / Y Y Y Y <b>10 02 2021</b>
Mailing Address <b>12952 MIRIAM PLACE</b>		Amount of Each Receipt this Period  <b>20.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>	Occupation (for Individual) <b>-</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>20.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. HILLARY STREICHENBERGER</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 14 2021</b>
Mailing Address <b>165 MOUNTAIN VIEW DRIVE</b>		Amount of Each Receipt this Period  <b>18.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>	Occupation (for Individual) <b>-</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>18.00</b>	

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

NON-IDENTIFIABLE INFORMATION

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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE	OF
<input 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)

**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. HILLARY STREICHENBERGER</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 17 2021</b>
Mailing Address <b>165 MOUNTAIN VIEW</b>		Amount of Each Receipt this Period  <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>	Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>38.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. YVONNE SU</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 14 2021</b>
Mailing Address <b>14160 RED HILL AVE, APT. 60</b>		Amount of Each Receipt this Period  <b>18.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>	Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>38.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. KAREN SWOPE</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 14 2021</b>
Mailing Address <b>11601 WILSHIRE BLVD, STE. 600</b>		Amount of Each Receipt this Period  <b>18.00</b>
City <b>LOS ANGELES</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>MUDSON PACIFIC PROPERTIES</b>	Occupation (for Individual) <b>REALTOR</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>38.00</b>	

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

DUPLICATE ORIGINAL ONLY



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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE	OF
<input 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)

TUSTIN DEMOCRATIC CLUB

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. <u>KAREN SWOPE</u></b>		Date of Receipt M M / D D / Y Y Y Y <u>12 18 2021</u>
Mailing Address <u>11601 WILSHIRE BLVD., STE. 600</u>		Amount of Each Receipt this Period  <u>30.00</u>
City <u>LOS ANGELES</u>	State <u>CA</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Memo Item
Name of Employer (for Individual) <u>HUDSON PACIFIC PROPERTIES</u>	Occupation (for Individual) <u>REALTOR</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>48.00</u>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. <u>CATHY THREADGILL</u></b>		Date of Receipt M M / D D / Y Y Y Y <u>01 10 2021</u>
Mailing Address <u>12181 McCULLA DRIVE</u>		Amount of Each Receipt this Period  <u>10.00</u>
City <u>TUSTIN</u>	State <u>CA</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Memo Item
Name of Employer (for Individual) <u>UNEMPLOYED</u>	Occupation (for Individual) <u>-</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>10.00</u>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. <u>NANCY VALETT</u></b>		Date of Receipt M M / D D / Y Y Y Y <u>01 31 2021</u>
Mailing Address <u>617 SPRINGBROOK NORTH</u>		Amount of Each Receipt this Period  <u>20.00</u>
City <u>IRVINE</u>	State <u>CA</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Memo Item
Name of Employer (for Individual) <u>UCI MEDICAL CENTER</u>	Occupation (for Individual) <u>REGISTERED NURSE</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u></u>	

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

NON-CONFIDENTIAL

**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. NANCY VALETT</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 14 2021</b>
Mailing Address <b>619 SPRINGBROOK NORTH</b>		Amount of Each Receipt this Period  <b>, , 20.00</b>
City <b>IRVINE</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UCI MEDICAL CENTER</b>	Occupation (for Individual) <b>REGISTERED NURSE</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>, , 40.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. EDITH VAN HUSS</b>		Date of Receipt M M / D D / Y Y Y Y <b>03 11 2021</b>
Mailing Address <b>2615 SAINT ANDREW</b>		Amount of Each Receipt this Period  <b>, , 80.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>	Occupation (for Individual) <b>-</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>, ,</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. EDITH VAN HUSS</b>		Date of Receipt M M / D D / Y Y Y Y <b>08 14 2021</b>
Mailing Address <b>2615 SAINT ANDREW</b>		Amount of Each Receipt this Period  <b>, , 38.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>	Occupation (for Individual) <b>-</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <b>, , 118.00</b>	

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

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**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	OF
<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>
<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>
<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>
<input type="checkbox"/>	17			

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

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

Mailing Address  
**3315 LAVIANA STREET**

City State Zip Code  
**TUSTIN CA 92782**

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

Name of Employer (for Individual) Occupation (for Individual)  
**SELF-EMPLOYED ACCOUNTANT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 , , **20.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 18 / 2021**

Amount of Each Receipt this Period  
 , , **20.00**

Memo Item

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

Mailing Address  
**8213 E. WHITE OAK RIDGE #41**

City State Zip Code  
**ORANGE CA 92869**

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

Name of Employer (for Individual) Occupation (for Individual)  
**SCAN HEALTH PLAN PROJECT MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 , , .

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 09 / 2021**

Amount of Each Receipt this Period  
 , , **50.00**

Memo Item

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

Mailing Address  
**8213 E. WHITE OAK RIDGE #41**

City State Zip Code  
**ORANGE CA 92869**

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

Name of Employer (for Individual) Occupation (for Individual)  
**SCAN HEALTH PLAN PROJECT MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 , , **88.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 14 / 2021**

Amount of Each Receipt this Period  
 , , **38.00**

Memo Item

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

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

NON-CONFIDENTIAL

**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	OF
	<input 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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. <b>MARISSA WALDMAN</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 14 2021</b>
Mailing Address <b>2092 SALT AIR DRIVE</b>		Amount of Each Receipt this Period <b>20.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
Zip Code <b>92705</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>BRAINARD STRATEGY</b>		Aggregate Year-to-Date <b>20.00</b>
Occupation (for Individual) <b>PRESIDENT</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. <b>SUDHA WARRIER</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 18 2021</b>
Mailing Address <b>10671 EQUESTRIAN DRIVE</b>		Amount of Each Receipt this Period <b>20.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
Zip Code <b>92705</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Aggregate Year-to-Date <b>20.00</b>
Occupation (for Individual) <b>—</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. <b>RONNA WELTMAN</b>		Date of Receipt M M / D D / Y Y Y Y <b>07 09 2021</b>
Mailing Address <b>1672 SIRRIE DRIVE</b>		Amount of Each Receipt this Period <b>100.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
Zip Code <b>92705</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Aggregate Year-to-Date
Occupation (for Individual) <b>—</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

DUPLICATE ON COMMONS

**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	OF
	<input 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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. RONNA WELTMAN</b>		Date of Receipt M M / D D / V V V V V <b>10 26 2021</b>
Mailing Address <b>1672 SIRRIE DRIVE</b>		Amount of Each Receipt this Period  <b>, 250.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
Zip Code <b>92705</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Aggregate Year-to-Date ▼
Occupation (for Individual) <b>—</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. RONNA WELTMAN</b>		Date of Receipt M M / D D / V V V V V <b>12 14 2021</b>
Mailing Address <b>1672 SIRRIE DRIVE</b>		Amount of Each Receipt this Period  <b>, 10.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
Zip Code <b>92705</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Aggregate Year-to-Date ▼
Occupation (for Individual) <b>—</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. RONNA WELTMAN</b>		Date of Receipt M M / D D / V V V V V <b>12 18 2021</b>
Mailing Address <b>1672 SIRRIE DRIVE</b>		Amount of Each Receipt this Period  <b>, 86.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
Zip Code <b>92705</b>		Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Aggregate Year-to-Date ▼
Occupation (for Individual) <b>—</b>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

UNEMPLOYED

**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	OF
<input 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)

TUSTIN DEMOCRATIC CLUB

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. RONNA WELTMAN</b>		Date of Receipt M M / D D / Y Y Y Y <u>01 10 2021</u>
Mailing Address <u>1672 SIRRINE DRIVE</u>		Amount of Each Receipt this Period  <u>80.00</u>
City <u>SANTA ANA</u>	State <u>CA</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Memo Item
Name of Employer (for Individual) <u>UNEMPLOYED</u>	Occupation (for Individual) <u>—</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <u>526.00</u>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. CAROLYN WHITTA</b>		Date of Receipt M M / D D / Y Y Y Y <u>12 18 2021</u>
Mailing Address <u>17621 17TH STREET</u>		Amount of Each Receipt this Period  <u>20.00</u>
City <u>TUSTIN</u>	State <u>CA</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Memo Item
Name of Employer (for Individual) <u>UNEMPLOYED</u>	Occupation (for Individual) <u>—</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <u>20.00</u>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. MEG WOLFF</b>		Date of Receipt M M / D D / Y Y Y Y <u>12 13 2021</u>
Mailing Address <u>1341 LURLINE LANE</u>		Amount of Each Receipt this Period  <u>20.00</u>
City <u>TUSTIN</u>	State <u>CA</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Memo Item
Name of Employer (for Individual) <u>SCOUT PRODUCTIONS</u>	Occupation (for Individual) <u>MARKETING</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  <u>          </u>	

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

NON-INDIVIDUAL CONTRIBUTIONS

**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	OF
	<input 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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MEG WOLFF</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 19 2021</b>
Mailing Address <b>1341 LURLINE LANE</b>			Amount of Each Receipt this Period  <b>50.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92780</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>SCOUT PRODUCTIONS</b>		Occupation (for Individual) <b>MARKETING</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>70.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SUZIE WON-SPEIZER</b>			Date of Receipt M M / D D / Y Y Y Y <b>05 16 2021</b>
Mailing Address <b>2296 ASPEN STREET</b>			Amount of Each Receipt this Period  <b>20.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92782</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>SELF-EMPLOYED</b>		Occupation (for Individual) <b>PR CONSULTANT</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>20.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. CELINDA YORK</b>			Date of Receipt M M / D D / Y Y Y Y <b>04 25 2021</b>
Mailing Address <b>1042 CASTLEROCK LANE</b>			Amount of Each Receipt this Period  <b>20.00</b>
City <b>SANTA ANA</b>	State <b>CA</b>	Zip Code <b>92705</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>20.00</b>	

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

NONNATIONAL COMMONS

**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	OF
	<input 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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. DAN MAYES</b>			Date of Receipt M M / D D / Y Y Y Y <b>01 10 2021</b>
Mailing Address <b>2960 CHAMPION WAY APT. 905</b>			Amount of Each Receipt this Period  <b>, , 10.00</b>
City <b>TUSTIN</b>	State <b>CA</b>	Zip Code <b>92782</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>NEXTGEN PHARMA</b>		Occupation (for Individual) <b>CREDIT MANAGER</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 10.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. DOUG &amp; MELISSA OLDHAM</b>			Date of Receipt M M / D D / Y Y Y Y <b>01 10 2021</b>
Mailing Address <b>2585 N. COTTONWOOD STREET</b>			Amount of Each Receipt this Period  <b>, , 10.00</b>
City <b>ORANGE</b>	State <b>CA</b>	Zip Code <b>91865</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 10.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. DON &amp; JACQUELIN POWELL</b>			Date of Receipt M M / D D / Y Y Y Y <b>01 10 2021</b>
Mailing Address <b>13102 COTTONWOOD DRIVE</b>			Amount of Each Receipt this Period  <b>, , 16.67</b>
City <b>SANTA ANA</b>	State <b>CA</b>	Zip Code <b>92705</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item
Name of Employer (for Individual) <b>UNEMPLOYED</b>		Occupation (for Individual) <b>—</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼  <b>, , 16.67</b>	

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

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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)  
**TUSTIN DEMOCRATIC CLUB**

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

Mailing Address  
**17612 MEDFORD AVENUE**

City: **TUSTIN** State: **CA** Zip Code: **92780**

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

Name of Employer (for Individual): **SEE'S CANDY SHOPS** Occupation (for Individual): **SALES ASSOCIATE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**6.67**

Date of Receipt  
M M / D D / Y Y Y Y  
**01 / 10 / 2021**

Amount of Each Receipt this Period  
**6.67**

Memo Item

**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

Amount of Each Receipt this Period

Memo Item

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

**TOTAL** This Period (last page this line number only).....▶ **5,690.34**

2025 RELEASE UNDER E.O. 14176

**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

21b  22  23  26  27  
 28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

JUSTIN DEMOCRATIC CLUB

Full Name (Last, First, Middle Initial)

**A.** ACTBLUE

Mailing Address: 366 SUMMER ST.

City: SOMMERVILLE State: MA Zip Code: 02144

Purpose of Disbursement: SERVICE CHARGE

Candidate Name: NOT APPLICABLE Category/Type: C

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) FUND RAISING

Date of Disbursement: 01 31 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 65.11

Memo Item:

**B.** ACTBLUE

Mailing Address: 366 SUMMER ST.

City: SOMMERVILLE State: MA Zip Code: 02144

Purpose of Disbursement: SERVICE CHARGE

Candidate Name: NOT APPLICABLE Category/Type: C

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) FUND RAISING

Date of Disbursement: 02 28 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 8.70

Memo Item:

**C.** ACTBLUE

Mailing Address: 366 SUMMER ST.

City: SOMMERVILLE State: MA Zip Code: 02144

Purpose of Disbursement: SERVICE CHARGE

Candidate Name: NOT APPLICABLE Category/Type: C

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) FUND RAISING

Date of Disbursement: 03 31 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 12.65

Memo Item:

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

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

NON-PROFIT CORPORATION

**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"/> 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)

JUSTIN DEMOCRATIC CLUB

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y

A.

ACTBLUE

04 30 2021

Mailing Address

366 SUMMER ST.

FEC Identification Number

City

SOMMERVILLE

State

MA

Zip Code

02144

C

Purpose of Disbursement

SERVICE CHARGE

Amount of Each Disbursement this Period

Candidate Name

NOT APPLICABLE

Category/  
Type

, , 2.77

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) FUND RAISING

State:

District:

Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y

B.

ACTBLUE

05 31 2021

Mailing Address

366 SUMMER ST.

FEC Identification Number

City

SOMMERVILLE

State

MA

Zip Code

02144

C

Purpose of Disbursement

SERVICE CHARGE

Amount of Each Disbursement this Period

Candidate Name

NOT APPLICABLE

Category/  
Type

, , 3.96

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) FUND RAISING

State:

District:

Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y

C.

ACTBLUE

06 30 2021

Mailing Address

366 SUMMER ST.

FEC Identification Number

City

SOMMERVILLE

State

MA

Zip Code

02144

C

Purpose of Disbursement

SERVICE CHARGE

Amount of Each Disbursement this Period

Candidate Name

NOT APPLICABLE

Category/  
Type

, , 1.98

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) FUND RAISING

State:

District:

Memo Item

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

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

NON-PROFIT CORPORATION

**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"/> 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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name (Last, First, Middle Initial) <b>ACTBLUE</b>			Date of Disbursement M M / D D / Y Y Y Y <b>07 31 2021</b>	
Mailing Address <b>366 SUMMER ST.</b>			FEC Identification Number <b>C</b>	
City <b>SOMMERVILLE</b>	State <b>MA</b>	Zip Code <b>02144</b>	Amount of Each Disbursement this Period <b>10.50</b>	
Purpose of Disbursement <b>SERVICE CHARGE</b>			Memo Item	
Candidate Name <b>NOT APPLICABLE</b>				
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) <b>FUND RAISING</b>			
State: District:				

Full Name (Last, First, Middle Initial) <b>ACTBLUE</b>			Date of Disbursement M M / D D / Y Y Y Y <b>08 31 2021</b>	
Mailing Address <b>366 SUMMER ST.</b>			FEC Identification Number <b>C</b>	
City <b>SOMMERVILLE</b>	State <b>MA</b>	Zip Code <b>02144</b>	Amount of Each Disbursement this Period <b>18.40</b>	
Purpose of Disbursement <b>SERVICE CHARGE</b>			Memo Item	
Candidate Name <b>NOT APPLICABLE</b>				
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) <b>FUND RAISING</b>			
State: District:				

Full Name (Last, First, Middle Initial) <b>ACTBLUE</b>			Date of Disbursement M M / D D / Y Y Y Y <b>09 30 2021</b>	
Mailing Address <b>366 SUMMER ST.</b>			FEC Identification Number <b>C</b>	
City <b>SOMMERVILLE</b>	State <b>CA</b>	Zip Code <b>02144</b>	Amount of Each Disbursement this Period <b>645</b>	
Purpose of Disbursement <b>SERVICE CHARGE</b>			Memo Item	
Candidate Name <b>NOT APPLICABLE</b>				
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) <b>FUND RAISING</b>			
State: District:				

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

NON-PROFIT CORPORATION

**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"/> 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)  
**TUSTIN DEMOCRATIC CLUB**

**A.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**

Mailing Address  
**366 SUMMER ST.**

City  
**SOMMERVILLE** State  
**MA** Zip Code  
**02144**

Purpose of Disbursement  
**SERVICE CHARGE**

Candidate Name  
**NOT APPLICABLE** Category/Type

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) **FUND RAISING**

Date of Disbursement  
M M / D D / Y Y Y Y  
**10 30 2021**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**3.56**

Memo Item

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

Mailing Address  
**366 SUMMER ST.**

City  
**SOMMERVILLE** State  
**MA** Zip Code  
**02144**

Purpose of Disbursement  
**SERVICE CHARGE**

Candidate Name  
**NOT APPLICABLE** Category/Type

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) **FUND RAISING**

Date of Disbursement  
M M / D D / Y Y Y Y  
**11 30 2021**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**11.00**

Memo Item

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

Mailing Address  
**366 SUMMER ST.**

City  
**SOMMERVILLE** State  
**MA** Zip Code  
**02144**

Purpose of Disbursement  
**SERVICE CHARGE**

Candidate Name  
**NOT APPLICABLE** Category/Type

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) **FUND RAISING**

Date of Disbursement  
M M / D D / Y Y Y Y  
**12 31 2021**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**11.19**

Memo Item

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

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

NON-PROFIT CORPORATION

**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

21b  22  23  26  27  
 28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

JUSTIN DEMOCRATIC CLUB

Full Name (Last, First, Middle Initial)

**A.** GREG & MONOUR DEL CROGNALE  
 Mailing Address 13792 LORETTA DRIVE  
 City TUSTIN State CA Zip Code 92780  
 Purpose of Disbursement REIMBURSEMENT OF POSTAGE STAMP EXPENSES  
 Candidate Name NOT APPLICABLE Category/Type  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) OPERATING COSTS  
 State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
01 12 2021

FEC Identification Number

C

Amount of Each Disbursement this Period  
65.00

Memo Item

**B.** GREG & MONOUR DEL CROGNALE  
 Mailing Address 13792 LORETTA DRIVE  
 City TUSTIN State CA Zip Code 92780  
 Purpose of Disbursement REIMBURSEMENT OF CONSTANT CONTACT CHARGES  
 Candidate Name NOT APPLICABLE Category/Type  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) OPERATING COSTS  
 State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
01 15 2021

FEC Identification Number

C

Amount of Each Disbursement this Period  
443.00

Memo Item

**C.** GREG & MONOUR DEL CROGNALE  
 Mailing Address 13792 LORETTA DRIVE  
 City TUSTIN State CA Zip Code 92780  
 Purpose of Disbursement REIMBURSEMENT OF POST BOX RENTAL FEE  
 Candidate Name NOT APPLICABLE Category/Type  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) OPERATING COSTS  
 State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
04 12 2021

FEC Identification Number

C

Amount of Each Disbursement this Period  
118.00

Memo Item

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

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

NONNION 1410N 00NONN004

**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

21b  22  23  26  27  
 28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

**TUSTIN DEMOCRATIC CLUB**

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y  
**09 30 / 2021**

**A. PRESS PRINT, INC.**

Mailing Address

**5085 MISSION HILLS DRIVE**

City

**BANNING**

State

**CA**

Zip Code

**92220**

Purpose of Disbursement

**BUTTONS -- "TUSTIN DEMS"**

Candidate Name

**NOT APPLICABLE**

Category/  
Type

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**, 339.41**

Memo Item

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) **OPERATING COSTS**

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y  
**03 29 / 2021**

**B. ORANGE DEMOCRATIC PARTY OF COUNTY**

Mailing Address

**1475 S. STATE COLLEGE BL, # 110**

City

**ANAHEIM**

State

**CA**

Zip Code

**92806**

Purpose of Disbursement

**MEMBERSHIP DUES**

Candidate Name

Category/  
Type

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**, 75.00**

Memo Item

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) **OPERATING COSTS**

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y  
**05 06 / 2021**

**C. SCALE TO WIN**

Mailing Address

**13742 HARPER STREET**

City

**SANTA ANA**

State

**CA**

Zip Code

**92703**

Purpose of Disbursement **"GET OUT THE VOTE"**

**CHARGES FOR TEXTING**

Candidate Name

Category/  
Type

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**, 194.54**

Memo Item

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **CA**

District:

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

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

NON-PROFIT CORPORATION

**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"/> 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)  
**TUSTIN DEMOCRATIC CLUB**

Full Name (Last, First, Middle Initial) <b>A. ELIZABETH SPICER</b>		Date of Disbursement <b>06 15 2021</b>
Mailing Address <b>350 E. TAYLOR ST. # 2206</b>		FEC Identification Number <b>C</b>
City <b>SAN JOSE</b>	State <b>CA</b>	
Purpose of Disbursement <b>REIMBURSEMENT FOR 200M ACCOUNT</b>		Amount of Each Disbursement this Period <b>149.90</b>
Candidate Name <b>NOT APPLICABLE</b>		
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) <b>OPERATING COSTS</b>	Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement
Mailing Address		FEC Identification Number <b>C</b>
City	State	
Purpose of Disbursement		Amount of Each Disbursement this Period
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 type="checkbox"/> Other (specify)	Memo Item
State:	District:	

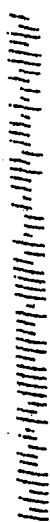
Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		FEC Identification Number <b>C</b>
City	State	
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Memo Item
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	<b>1482.52</b>
TOTAL This Period (last page this line number only).....	

NONN: ON: 14: ON: 00M0N: 0000



Ms. Jen  
13661 C  
Tusbu



7020 3160 0000 2861 8565



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FEDERAL ELECTION COMMISSION  
999 E. STREET, NW  
WASHINGTON, DC 20463

CONTENTS - REC FORM 3X  
FILING - YEAR END

NONN: ON: 14: OM: OOMON: ONN



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 checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>1/31/22</i>
<input type="checkbox"/> USPS Priority Mail	Postmarked
<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 <i>SPM</i> (3/2015)	<i>2/14/22</i> DATE PREPARED

NONN0N140N00N000