

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

ADDRESS (number and street)

PO Box 423

☐Check if different  
than previously  
reported. (ACC)

Roseville

CA

95678

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00433318

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  
Quarterly 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

2009

through

06

30

2009

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

Linda Carol Hall

Signature of Treasurer

Electronically Filed by Linda Carol Hall

Date

08

19

2010

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 25

Write or Type Committee Name

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2009</span>		8843.03
(b) Cash on Hand at Beginning of Reporting Period .....	8843.03	
(c) Total Receipts (from Line 19) .....	20960.00	20960.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	29803.03	29803.03
7. Total Disbursements (from Line 31) .....	27415.38	27415.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2387.65	2387.65
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



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

**For further information contact:**

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

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

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	6	0	3	0	2	0	9

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) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	20460.00	20460.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	20460.00	20460.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	500.00	500.00
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 Transfer (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)) .....	20960.00	20960.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	20960.00	20960.00

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared 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.....	26065.38	26065.38	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	26065.38	26065.38	
22. Transfers to Affiliated/Other Party Committees.....	1350.00	1350.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared 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))..	27415.38	27415.38	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27415.38	27415.38	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	20460.00	20460.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20460.00	20460.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	26065.38	26065.38
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	500.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	25565.38	25565.38

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

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

FOR LINE NUMBER: PAGE 6 / 25

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Auburn Manor Holding Corporation

Mailing Address 4020 Sierra College Blvd  
Suite 200

City State Zip Code  
Rocklin CA 95677

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 8 / 2 0 0 9

Transaction ID: SA11C.4254

Amount of Each Receipt this Period

500.00

Jefferson Jackson Dinner

**B.**

Full Name (Last, First, Middle Initial)

California Teachers Association

Mailing Address 1118 10th St

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
C70001227

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: SA11C.4200

Amount of Each Receipt this Period

1000.00

JJ Dinner

**C.**

Full Name (Last, First, Middle Initial)

California Teachers Association

Mailing Address 1118 10th St

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
C70001227

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: SA11C.4255

Amount of Each Receipt this Period

1000.00

JJ Dinner

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

2500.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

CWA-COPE PCC

Mailing Address 2804 Gateway Oaks Dr  
Suite 150

City State Zip Code  
Sacramento CA 95833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
C00002089

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 7 / 2 0 0 9

Transaction ID: SA11C.4257

Amount of Each Receipt this Period

500.00

JJ Dinner

**B.**

Full Name (Last, First, Middle Initial)

IBEW Local 340 PAC Fund

Mailing Address 2840 El Centro Rd  
Suite 115

City State Zip Code  
Sacramento CA 95833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 9

Transaction ID: SA11C.4204

Amount of Each Receipt this Period

1000.00

JJ Dinner

**C.**

Full Name (Last, First, Middle Initial)

IBEW Local 340 PAC Fund

Mailing Address 2840 El Centro Rd  
Suite 115

City State Zip Code  
Sacramento CA 95833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 9

Transaction ID: SA11C.4259

Amount of Each Receipt this Period

1000.00

JJ Dinner

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

2500.00

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

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

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FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Laborer's Local 185 PAC Small Contributor Committee

Mailing Address 555 Capital Mall  
Suite 1425

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

Transaction ID: SA11C.4206

Amount of Each Receipt this Period

2000.00

JJ Dinner

**B.**

Full Name (Last, First, Middle Initial)  
Laborer's Local 185 PAC Small Contributor Committee

Mailing Address 555 Capital Mall  
Suite 1425

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

Transaction ID: SA11C.4260

Amount of Each Receipt this Period

2000.00

JJ Dinner

**C.**

Full Name (Last, First, Middle Initial)  
Operating Engineers Local 3 District 80 Pac

Mailing Address 4044 North Freeway Blvd

City State Zip Code  
Sacramento CA 95834

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 9

Transaction ID: SA11C.4210

Amount of Each Receipt this Period

1000.00

JJ Dinner

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

5000.00

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



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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 / 25

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Operating Engineers Local 3 District 80 Pac

Mailing Address 4044 North Freeway Blvd

City

Sacramento

State

CA

Zip Code

95834

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 9

Transaction ID: SA11C.4262

Amount of Each Receipt this Period

1000.00

JJ Dinner

**B.**

Full Name (Last, First, Middle Initial)

Plumbers and Pipefitters Local 447 Commercial Account

Mailing Address 5841 Newman Ct

City

Sacramento

State

CA

Zip Code

95819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 9

Transaction ID: SA11C.4212

Amount of Each Receipt this Period

2000.00

JJ Dinner

**C.**

Full Name (Last, First, Middle Initial)

Plumbers and Pipefitters Local 447 Commercial Account

Mailing Address 5841 Newman Ct

City

Sacramento

State

CA

Zip Code

95819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 9

Transaction ID: SA11C.4263

Amount of Each Receipt this Period

2000.00

JJ Dinner

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

5000.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 25

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Sacramento Central Labor Council AFL-CIO

Mailing Address 2840 El Centro Rd  
Suite 111

City State Zip Code  
Sacramento CA 95833

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 9

Transaction ID: SA11C.4216

Amount of Each Receipt this Period

2000.00

JJ Dinner

**B.**

Full Name (Last, First, Middle Initial)  
Sacramento Central Labor Council AFL-CIO

Mailing Address 2840 El Centro Rd  
Suite 111

City State Zip Code  
Sacramento CA 95833

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 9

Transaction ID: SA11C.4265

Amount of Each Receipt this Period

2000.00

JJ Dinner

**C.**

Full Name (Last, First, Middle Initial)  
United Transportation Union Political Action Committee

Mailing Address 1005 12th St  
Suite 4

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
C00001636

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: SA11C.4218

Amount of Each Receipt this Period

500.00

JJ Dinner

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

4500.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 25

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

United Transportation Union Political Action Committee

Mailing Address 1005 12th St  
Suite 4

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
C00001636

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: SA11C.4266

Amount of Each Receipt this Period

500.00

JJ Dinner

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

500.00

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

20000.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 25

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

South Placer Heritage Foundation Inc

Mailing Address 5940 Horseshoe Bar Rd

City

Loomis

State

CA

Zip Code

95650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA15.4220

Amount of Each Receipt this Period

250.00

hall rental deposit refund

**B.**

Full Name (Last, First, Middle Initial)

South Placer Heritage Foundation Inc

Mailing Address 5940 Horseshoe Bar Rd

City

Loomis

State

CA

Zip Code

95650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA15.4267

Amount of Each Receipt this Period

250.00

hall rental deposit refund

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

500.00

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

500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 25

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

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Act Blue California	<b>Transaction ID:</b> SB21B.4222 <b>Date of Disbursement</b>																				
Mailing Address PO 382110	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	9		2	0	0	9												
City Cambridge State MA Zip Code 02238	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>229.62</td> </tr> </table>	229.62																			
229.62																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Act Blue California	<b>Transaction ID:</b> SB21B.4268 <b>Date of Disbursement</b>																				
Mailing Address PO 382110	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	9		2	0	0	9												
City Cambridge State MA Zip Code 02238	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>229.62</td> </tr> </table>	229.62																			
229.62																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Telegraph Telephone American	<b>Transaction ID:</b> SB21B.4224 <b>Date of Disbursement</b>																				
Mailing Address po box T	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	0	9												
City Sacramento State CA Zip Code 95847	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>558.96</td> </tr> </table>	558.96																			
558.96																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

1018.20

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 25

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

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Telegraph Telephone American

Mailing Address po box T

City Sacramento State CA Zip Code 95847

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4269

Date of Disbursement

/   /

Amount of Each Disbursement this Period

558.96

**B.** Full Name (Last, First, Middle Initial)  
California Secretary of State

Mailing Address 1500 11th St

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4226

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
California Secretary of State

Mailing Address 1500 11th St

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4270

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

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

1058.96

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 25

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Sharon Cammack

Mailing Address 5830 Macargo

City  
Granite Bay

State  
CA

Zip Code  
95746

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4228

Date of Disbursement

/   /

Amount of Each Disbursement this Period

625.69

B.

Full Name (Last, First, Middle Initial)

Sharon Cammack

Mailing Address 5830 Macargo

City  
Granite Bay

State  
CA

Zip Code  
95746

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4271

Date of Disbursement

/   /

Amount of Each Disbursement this Period

625.69

C.

Full Name (Last, First, Middle Initial)

Darren Cook

Mailing Address 289 Waterfield Dr

City  
Roseville

State  
CA

Zip Code  
95678

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4230

Date of Disbursement

/   /

Amount of Each Disbursement this Period

562.50

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

1813.88

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 25

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

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Darren Cook

Mailing Address 289 Waterfield Dr

City  
Roseville

State  
CA

Zip Code  
95678

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4272

Date of Disbursement

06 / 03 / 2009

Amount of Each Disbursement this Period

562.50

B.

Full Name (Last, First, Middle Initial)

Larry Dubois

Mailing Address 3195 Humphrey Rd

City  
Loomis

State  
CA

Zip Code  
95650

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4231

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

247.91

C.

Full Name (Last, First, Middle Initial)

Larry Dubois

Mailing Address 3195 Humphrey Rd

City  
Loomis

State  
CA

Zip Code  
95650

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4273

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

247.91

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

1058.32

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 25

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

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

four waters media

Mailing Address 624 Todhunter Ave

City  
West Sacramento

State  
CA

Zip Code  
95605

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4232

Date of Disbursement

/   /

Amount of Each Disbursement this Period

577.50

**B.**

Full Name (Last, First, Middle Initial)

four waters media

Mailing Address 624 Todhunter Ave

City  
West Sacramento

State  
CA

Zip Code  
95605

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4274

Date of Disbursement

/   /

Amount of Each Disbursement this Period

577.50

**C.**

Full Name (Last, First, Middle Initial)

Gold Country Fair

Mailing Address 1273 High St

City  
Auburn

State  
CA

Zip Code  
95604

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4234

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

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

1755.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Gold Country Fair

Mailing Address 1273 High St

City  
Auburn

State  
CA

Zip Code  
95604

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4275

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**B.**

Full Name (Last, First, Middle Initial)

Kim Haswell

Mailing Address 1630 Burlin Way

City  
Auburn

State  
CA

Zip Code  
95603

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4236

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2272.38

**C.**

Full Name (Last, First, Middle Initial)

Kim Haswell

Mailing Address 1630 Burlin Way

City  
Auburn

State  
CA

Zip Code  
95603

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4276

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2272.38

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

5144.76

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 25

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

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Edith Hensley	<b>Transaction ID:</b> SB21B.4237 <b>Date of Disbursement</b>																				
Mailing Address 6126 Preston Cir	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	9		2	0	0	9												
City Rocklin State CA Zip Code 95765	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>3500.00</td> </tr> </table>	3500.00																			
3500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Edith Hensley	<b>Transaction ID:</b> SB21B.4277 <b>Date of Disbursement</b>																				
Mailing Address 6126 Preston Cir	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	9		2	0	0	9												
City Rocklin State CA Zip Code 95765	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>3500.00</td> </tr> </table>	3500.00																			
3500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Johny 5 Productions	<b>Transaction ID:</b> SB21B.4238 <b>Date of Disbursement</b>																				
Mailing Address 534 Vernon #2	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	9		2	0	0	9												
City Roseville State CA Zip Code 95678	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>551.00</td> </tr> </table>	551.00																			
551.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

7551.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 25

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

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Johny 5 Productions

Mailing Address 534 Vernon  
#2

City Roseville State CA Zip Code 95678

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4278

Date of Disbursement

04 / 09 / 2009

Amount of Each Disbursement this Period

551.00

B.

Full Name (Last, First, Middle Initial)

Perfect Image Printing

Mailing Address 3223 Monier Cir

City Rancho Cordova State CA Zip Code 95742

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4240

Date of Disbursement

01 / 08 / 2009

Amount of Each Disbursement this Period

409.45

C.

Full Name (Last, First, Middle Initial)

Perfect Image Printing

Mailing Address 3223 Monier Cir

City Rancho Cordova State CA Zip Code 95742

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4279

Date of Disbursement

01 / 08 / 2009

Amount of Each Disbursement this Period

409.45

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

1369.90

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 25

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

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Placer County Fair

Mailing Address 800 All american City Blvd

City Roseville State CA Zip Code 95678

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4242

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

350.00

B.

Full Name (Last, First, Middle Initial)

Placer County Fair

Mailing Address 800 All american City Blvd

City Roseville State CA Zip Code 95678

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4280

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

350.00

C.

Full Name (Last, First, Middle Initial)

Placer County Young Democrats

Mailing Address 2632 Hearthside Way

City Roseville State CA Zip Code 95747

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4244

Date of Disbursement

06 / 03 / 2009

Amount of Each Disbursement this Period

250.00

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

950.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Placer County Young Democrats

Mailing Address 2632 Hearthside Way

City  
Roseville

State  
CA

Zip Code  
95747

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4281

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Planned Parenthood Mar Monte Candidate PAC

Mailing Address 210 29th St  
Suite A

City  
Sacramento

State  
CA

Zip Code  
95816

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4246

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Planned Parenthood Mar Monte Candidate PAC

Mailing Address 210 29th St  
Suite A

City  
Sacramento

State  
CA

Zip Code  
95816

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4282

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

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

750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

South Placer Heritage Foundation Inc

Mailing Address 5940 Horseshoe Bar Rd

City  
Loomis

State  
CA

Zip Code  
95650

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4247

Date of Disbursement

/   /

Amount of Each Disbursement this Period

750.00

**B.**

Full Name (Last, First, Middle Initial)

South Placer Heritage Foundation Inc

Mailing Address 5940 Horseshoe Bar Rd

City  
Loomis

State  
CA

Zip Code  
95650

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4283

Date of Disbursement

/   /

Amount of Each Disbursement this Period

750.00

**C.**

Full Name (Last, First, Middle Initial)

Viking Printing

Mailing Address 1125 11th St

City  
Sacramento

State  
CA

Zip Code  
95814

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.4248

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1047.68

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

2547.68

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Viking Printing

Mailing Address 1125 11th St

City  
Sacramento

State  
CA

Zip Code  
95814

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.4284

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1047.68

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

1047.68

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

26065.38



# **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)

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

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NAME OF COMMITTEE (In Full)

PLACER COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

California Democratic Party

Mailing Address 1401 21st St  
Suite 200

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB22.4250

Date of Disbursement

/   /

Amount of Each Disbursement this Period

675.00

**B.**

Full Name (Last, First, Middle Initial)

California Democratic Party

Mailing Address 1401 21st St  
Suite 200

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB22.4285

Date of Disbursement

/   /

Amount of Each Disbursement this Period

675.00

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

1350.00

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

1350.00