

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
California College Democrats Fed

ADDRESS (number and street) 1212 S Victory Bl
 Check if different than previously reported. (ACC)
Burbank CA 91502

2. **FEC IDENTIFICATION NUMBER** C00412106
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 (12G)
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 11 25 2008 through 12 31 2008

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 Kinde Durkee

Signature of Treasurer Electronically Filed by Kinde Durkee Date 01 30 2009

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									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
California College Democrats Fed

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		159.75
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	2019.16									
(c) Total Receipts (from Line 19)	10970.64	14674.14								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12989.80	14833.89								
7. Total Disbursements (from Line 31)	4453.17	6297.26								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8536.63	8536.63								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
California College Democrats Fed

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	1600.00	1600.00
(i) Itemized (use Schedule A)	8370.64	9165.64
(ii) Unitemized	9970.64	10765.64
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	1000.00	3908.50
(c) Other Political Committees (such as PACs)	10970.64	14674.14
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	.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 Committees00	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))	10970.64	14674.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10970.64	14674.14

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	132.00	586.16
(ii) Non-Federal Share.....	132.00	586.14
(b) Other Federal Operating Expenditures.....	394.31	435.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	658.31	1607.40
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 Expenditure (use Schedule E)	3794.86	3794.86
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	895.00
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))..	4453.17	6297.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4321.17	5711.12

DETAILED SUMMARY PAGE
of Disbursements

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)	10970.64	14674.14
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10970.64	14674.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	526.31	1021.26
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	526.31	1021.26

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 18
(check only one)

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

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)
California College Democrats Fed

A.

Full Name (Last, First, Middle Initial)
Joe Bamberg

Mailing Address 787 Green St

City State Zip Code
East Palo Alto CA 94303

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

Name of Employer Roche Palo Alto Occupation Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: SA11ai00000000623948

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Thomas Fong

Mailing Address 58 West Portal Av #186

City State Zip Code
San Francisco CA 94127

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: SA11ai00000000623947

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Marsha Laufer

Mailing Address 178 Old Field Rd

City State Zip Code
Setauket NY 11733

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

Name of Employer N/A Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: SA11ai00000000623952

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 7 / 18
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
California College Democrats Fed

A.

Full Name (Last, First, Middle Initial)
Robert Markovic

Mailing Address 116 N Robertson Blvd #806

City State Zip Code
Los Angeles CA 90048

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

Name of Employer Robert Markovic Occupation Psychotherapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: SA11ai00000000623949

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Katharine T Thompson

Mailing Address PO Box 48

City State Zip Code
South Tamworth NH 03883

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

Name of Employer Katharine T. Thompson Occupation Retail

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: SA11ai00000000623950

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 18
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
California College Democrats Fed

A.	Full Name (Last, First, Middle Initial) Monterey County Democratic Central Committee - Federal		Date of Receipt
	Mailing Address PO BOX 3024		<input type="text" value="12"/> <input type="text" value="15"/> <input type="text" value="2008"/>
	City	State	Zip Code
	Monterey	CA	93942
	FEC ID number of contributing federal political committee.		<input type="text" value="C00419986"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="400.00"/>
		<input type="text" value="400.00"/>	

B.	Full Name (Last, First, Middle Initial) USA PAC		Date of Receipt
	Mailing Address 777 S Figueroa St #4050		<input type="text" value="12"/> <input type="text" value="16"/> <input type="text" value="2008"/>
	City	State	Zip Code
	Los Angeles	CA	90017
	FEC ID number of contributing federal political committee.		<input type="text" value="C00422774"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="600.00"/>
		<input type="text" value="600.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1000.00"/>

**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 9 / 18

<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)
California College Democrats Fed

A. Full Name (Last, First, Middle Initial) Auburn Quad Inc <hr/> Mailing Address PO Box 390728 <hr/> City Cambridge State MA Zip Code 02139 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21b000000000616046 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 10.68
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Auburn Quad Inc <hr/> Mailing Address PO Box 390728 <hr/> City Cambridge State MA Zip Code 02139 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21b000000000616472 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 12.30
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Auburn Quad Inc <hr/> Mailing Address PO Box 390728 <hr/> City Cambridge State MA Zip Code 02139 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21b000000000616920 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 3.95
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	26.93
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 10 / 18

<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)
California College Democrats Fed

A.

Full Name (Last, First, Middle Initial)
Auburn Quad Inc

Mailing Address PO Box 390728

City State Zip Code
Cambridge MA 02139

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21b00000000623959

Date of Disbursement

12 / 03 / 2008

Amount of Each Disbursement this Period

367.38

SUBTOTAL of Disbursements This Page (optional)

367.38

TOTAL This Period (last page this line number only)

394.31

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) California College Democrats Fed	FEC IDENTIFICATION NUMBER C C00412106
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Charlie Carnow

Mailing Address
10126 Reseda Blvd #111

City State Zip Code
Northridge CA 91324

Purpose of Expenditure
Independent Expenditure: Travel for GOTV

Category/Type **011**

Name of Federal Candidate supported or Opposed by expenditure:
Jim Martin

Calendar Year-To-Date Per Election for Office Sought **3794.86**

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

Amount
1125.70

Transaction ID: SE000000000000623905

Office Sought: House State: GA
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
Delta Airlines 1 World Way

Mailing Address
1 World Way
Los Angeles International Aiport

City State Zip Code
Los Angeles CA 90023

Purpose of Expenditure
Independent Expenditure: Travel for GOTV

Category/Type **011**

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought **.00**

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

Amount
194.50

Transaction ID: SE000000000000021910

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	1125.70
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Kinde Durkee
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) California College Democrats Fed	FEC IDENTIFICATION NUMBER C C00412106
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Expedia Travel

Mailing Address
13810 SE Eastgate Way #400

City Bellevue	State WA	Zip Code 98005
------------------	-------------	-------------------

Purpose of Expenditure Independent Expenditure: Travel for GOTV	Category/Type 011
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Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought .00

Date
MM / DD / YYYY
12 / 23 / 2008

Amount
374.00

Transaction ID: SE000000000000021908

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Frontier Airlines

Mailing Address
Po Box 17304

City Denver	State CO	Zip Code 80217
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Purpose of Expenditure Independent Expenditure: Travel for GOTV	Category/Type 011
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought .00

Date
MM / DD / YYYY
12 / 23 / 2008

Amount
185.20

Transaction ID: SE000000000000021909

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Kinde Durkee
Signature

Date MM / DD / YYYY
01 / 30 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) California College Democrats Fed	FEC IDENTIFICATION NUMBER C C00412106
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
US Airways

Mailing Address
1 World Way
Los Angeles International Aiport

City Los Angeles	State CA	Zip Code 90045
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Purpose of Expenditure Independent Expenditure: Travel for GOTV	Category/Type 011
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:

Date
MM / DD / YYYY
12 / 23 / 2008

Amount
372.00

Transaction ID: SE000000000000021907

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
_____ .00

[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Nick Caston

Mailing Address
1542 Camden Ct

City Santa Rosa	State CA	Zip Code 95405
--------------------	-------------	-------------------

Purpose of Expenditure Independent Expenditure: Travel for GOTV	Category/Type 011
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Jim Martin

Date
MM / DD / YYYY
12 / 23 / 2008

Amount
801.48

Transaction ID: SE0000000000000623915

Office Sought: House State: GA
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Calendar Year-To-Date Per Election for Office Sought
_____ 3794.86

(a) SUBTOTAL of Itemized Independent Expenditures	801.48
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

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

Kinde Durkee
Signature

Date MM / DD / YYYY
01 / 30 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) California College Democrats Fed	FEC IDENTIFICATION NUMBER C C00412106
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Orbitz

Mailing Address
200 S Wacker Dr #1900

City Chicago	State IL	Zip Code 60606
-----------------	-------------	-------------------

Purpose of Expenditure Independent Expenditure: Travel for GOTV	Category/Type 011
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Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought .00

Date
MM / DD / YYYY
12 / 23 / 2008

Amount
801.48

Transaction ID: SE000000000000021915

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Alissa Ko

Mailing Address
2504 Barona St

City West Sacramento	State CA	Zip Code 95691
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Purpose of Expenditure Independent Expenditure: Travel for GOTV	Category/Type 011
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Name of Federal Candidate supported or Opposed by expenditure:
Jim Martin

Calendar Year-To-Date Per Election for Office Sought 3794.86

Date
MM / DD / YYYY
12 / 23 / 2008

Amount
1867.68

Transaction ID: SE0000000000000623914

Office Sought: House State: GA
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	1867.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Kinde Durkee
Signature

Date MM / DD / YYYY
01 / 30 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) California College Democrats Fed	FEC IDENTIFICATION NUMBER C C00412106
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Expedia Travel

Mailing Address
13810 SE Eastgate Way #400

City Bellevue	State WA	Zip Code 98005
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Purpose of Expenditure Independent Expenditure: Travel for GOTV	Category/Type 011
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Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought	.00
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Date
MM / DD / YYYY
12 / 23 / 2008

Amount
772.00

Transaction ID: SE000000000000021913

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Hotwire, Inc.

Mailing Address
655 Montgomery St # 600

City San Francisco	State CA	Zip Code 94111
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Purpose of Expenditure Independent Expenditure: Travel for GOTV	Category/Type 011
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Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought	.00
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Date
MM / DD / YYYY
12 / 23 / 2008

Amount
334.00

Transaction ID: SE000000000000021912

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

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

Kinde Durkee
Signature

Date MM / DD / YYYY
01 / 30 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) California College Democrats Fed	FEC IDENTIFICATION NUMBER C C00412106
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Orbitz

Mailing Address
200 S Wacker Dr #1900

City Chicago	State IL	Zip Code 60606
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Purpose of Expenditure Independent Expenditure: Travel for GOTV	Category/Type 011
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Name of Federal Candidate supported or Opposed by expenditure:

Date
MM / DD / YYYY
12 / 23 / 2008

Amount
324.68

Transaction ID: SE000000000000021911

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

Calendar Year-To-Date Per Election for Office Sought
_____ .00

Full Name (Last, First, Middle, Initial) of Payee
US Airways

Mailing Address
1 World Way
Los Angeles International Aiport

City Los Angeles	State CA	Zip Code 90045
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Purpose of Expenditure Independent Expenditure: Travel for GOTV	Category/Type 011
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Name of Federal Candidate supported or Opposed by expenditure:

Date
MM / DD / YYYY
12 / 23 / 2008

Amount
437.00

Transaction ID: SE000000000000021914

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

Calendar Year-To-Date Per Election for Office Sought
_____ .00

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	3794.86

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

Kinde Durkee
Signature

Date MM / DD / YYYY
01 / 30 / 2009

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 California College Democrats Fed

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %
 Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
California College Democrats Fed

A. Full Name (Last, First, Middle Initial) Durkee & Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1212 S Victory Bl			Allocated Activity or Event Year-To-Date 1172.30	
City Burbank	State CA	Zip Code 91502	Date MM / DD / YYYY 12 / 02 / 2008	
Purpose of Disbursement: Accounting			Transaction ID: H4000000000000615442	
Activity or Event Identifier: Admin				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.00		39.00		78.00

B. Full Name (Last, First, Middle Initial) Durkee & Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1212 S Victory Bl			Allocated Activity or Event Year-To-Date 1172.30	
City Burbank	State CA	Zip Code 91502	Date MM / DD / YYYY 12 / 19 / 2008	
Purpose of Disbursement: Accounting			Transaction ID: H4000000000000623903	
Activity or Event Identifier: Admin				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.70		40.70		81.40

C. Full Name (Last, First, Middle Initial) Durkee & Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1212 S Victory Bl			Allocated Activity or Event Year-To-Date 1172.30	
City Burbank	State CA	Zip Code 91502	Date MM / DD / YYYY 12 / 31 / 2008	
Purpose of Disbursement: Accounting			Transaction ID: H4000000000000623917	
Activity or Event Identifier: Admin				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.30		52.30		104.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.00		132.00		264.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
132.00		132.00		264.00