

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEDERAL OPERATIONS CENTER 2004 OCT 22 A 10:34

1. NAME OF COMMITTEE (or IRS) TYPE OR PRINT Example: if typing, type over the lines. 12FE4M5 SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

ADDRESS (number and street) Check if different than previously reported. (AO) 2790 NISSA GRANDE FAIRFIELD CA 94534

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE 000406108 3. IS THIS REPORT NEW OR AMENDED (X) (N) (A)

Table with columns for Type of Report (a) and (b), and rows for various report types like Quarterly Reports, 12-Day PRE-Election Report, and 30-Day POST-Election Report.

5. Covering Period 01'01'2004 through 09'30'2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, exact and complete. Type or Print Name of Treasurer Donald G. Lewis Signature of Treasurer Date 10'18'2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

Report Covering the Period:

From:

01'07'2004

To:

09'30'2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6 (a) Cash on Hand January 1, 2004	2004	0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19) .....	20,133.19	20,133.19
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	20,133.19	20,133.19
7. Total Disbursements (from Line 31).....	16,232.17	16,232.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3,901.02	3,901.02
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) .....	615.38	
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 109)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 02/2009)

Page 3

Write or Type Committee Name

SORANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

Report Covering the Period:

From:

01 01 2004

To:

09 30 2004

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).....	5,367.68	5,367.68
(ii) Unitemized.....	7,526.69	7,526.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12,894.37	12,894.37
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1,000.00	1,000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	13,894.37	12,894.37
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).....	3,215.38	3,215.38
16. Refunds or 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).....	3,292.80	3,292.80
(b) Levin Funds (from Schedule H5).....	630.64	630.64
(c) Total Transfers (add 18(a) and 18(b))..	3,923.44	3,923.44
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 17, and 18(c)).....▶	20,133.19	20,133.19
20. Total Federal Receipts (subtract Line 15(c) from Line 19).....▶	16,207.75	16,207.75

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

R. 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 .....	4,452.20	4,452.20
(ii) Non-Federal Share .....	3,292.80	3,292.80
(b) Other Federal Operating Expenditures .....	2,302.75	2,302.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10,047.75	10,047.75
22. Transfers to Affiliates/Other Party Committees .....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	0.00	0.00
24. Independent Expenditures (see Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditure (2 U.S.C. §441a(d)) (see 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) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	354.73	354.73
(ii) "Levy" Share .....	630.64	630.64
(b) Federal Election Activity Paid Entirely With Federal Funds .....	5,199.05	5,199.05
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	6,184.42	6,184.42
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .....	16,232.17	16,232.17
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(ii) from Line 31) .....	12,308.73	12,308.73

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 6

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 5) .....	, 12,994.37	, 12,994.37
34. Total Contribution Refunds (from Line 28(d)) .....	, 0.00	, 0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	, 12,994.37	, 12,994.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	, 14,499.95	, 14,499.95
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	, 3,215.38	, 3,215.38
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	, 11,284.57	, 11,284.57

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

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

FOR LINE NUMBER: PAGE 4 OF

(check only one)

<input checked="" type="checkbox"/> 11A	<input type="checkbox"/> 11B	<input type="checkbox"/> 11C	<input type="checkbox"/> 12
<input type="checkbox"/> 18	<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)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

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

Mailing Address  
**2236 W. BENJAMIN HOLT DRIVE**

City **STOCKTON** State **CA** Zip Code **95207**

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

Name of Employer: **CALIFORNIA SENATE** Occupation: **DISTRICT DIRECTOR**

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt  
**03 22 2004**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address  
**2236 W. BENJAMIN HOLT DRIVE**

City **STOCKTON** State **CA** Zip Code **95207**

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

Name of Employer: **CALIFORNIA SENATE** Occupation: **DISTRICT DIRECTOR**

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt  
**04 29 2004**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address  
**2236 W. BENJAMIN HOLT DRIVE**

City **STOCKTON** State **CA** Zip Code **95207**

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

Name of Employer: **CALIFORNIA SENATE** Occupation: **DISTRICT DIRECTOR**

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt  
**08 10 2004**

Amount of Each Receipt this Period  
**100.00**

SUBTOTAL of Receipts This Page (optional) ..... **225.00**

TOTAL This Period (last page this line number only) ..... **225.00**

**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 7 OF 7	
	<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)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DEAN, DANA</b>		Date of Receipt <b>05 26 2004</b>
Mailing Address <b>503 CAMBRIDGE DRIVE</b>		Amount of Each Receipt this Period <b>, 390.00</b>
City <b>BENICIA</b>	State Zip Code <b>CA 94510</b>	
FEC ID number of contributing federal political committee <b>C</b>		Amount of Each Receipt this Period <b>, 455.00</b>
Name of Employer <b>SELF</b>	Occupation <b>ATTORNEY</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>▼</b>	Aggregate Year-to-Date <b>▼</b> <b>, 455.00</b>	

Full Name (Last, First, Middle Initial) <b>B. DEAN, DANA</b>		Date of Receipt <b>07 18 2004</b>
Mailing Address <b>503 CAMBRIDGE DRIVE</b>		Amount of Each Receipt this Period <b>, 75.00</b>
City <b>BENICIA</b>	State Zip Code <b>CA 94510</b>	
FEC ID number of contributing federal political committee <b>C</b>		Amount of Each Receipt this Period <b>, 455.00</b>
Name of Employer <b>SELF</b>	Occupation <b>ATTORNEY</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>▼</b>	Aggregate Year-to-Date <b>▼</b> <b>, 455.00</b>	

Full Name (Last, First, Middle Initial) <b>C. DEMOCRATIC HEADQUARTERS 21002</b>		Date of Receipt <b>06 09 2004</b>
Mailing Address <b>PO BOX 1025</b>		Amount of Each Receipt this Period <b>, 640.48</b>
City <b>BENICIA</b>	State Zip Code <b>CA 94510</b>	
FEC ID number of contributing federal political committee <b>C</b>		Amount of Each Receipt this Period <b>, 640.48</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>▼</b>	Aggregate Year-to-Date <b>▼</b> <b>, 640.48</b>	

SUBTOTAL of Receipts This Page (optional)	<b>, 1,095.48</b>
TOTAL This Period (last page this line number only)	<b>, 1,095.48</b>

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

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 2 OF	
	(check only one)			
<input checked="" 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)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF NORREN EVANS FOR ASSEMBLY</b>		Date of Receipt M M ' D D ' Y Y Y Y <b>02 ' 13 ' 2004</b>
Mailing Address <b>1275 FOURTH STREET BOX 249</b>		Amount of Each Receipt this Period <b>10.00</b>
City <b>SANTA ROSA</b>	State Zip Code <b>CA 95404</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1,010.00</b>	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF NORREN EVANS FOR ASSEMBLY</b>		Date of Receipt M M ' D D ' Y Y Y Y <b>07 ' 03 ' 2004</b>
Mailing Address <b>1275 FOURTH STREET BOX 249</b>		Amount of Each Receipt this Period <b>1,000.00</b>
City <b>SANTA ROSA</b>	State Zip Code <b>CA 95404</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1,010.00</b>	

Full Name (Last, First, Middle Initial) <b>C. HEALY, DAN</b>		Date of Receipt M M ' D D ' Y Y Y Y <b>08 ' 25 ' 2004</b>
Mailing Address <b>1517 TENNESSEE STREET</b>		Amount of Each Receipt this Period <b>200.00</b>
City <b>VALLEJO</b>	State Zip Code <b>CA 94590</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>SELF</b>	Occupation <b>ATTORNEY</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>236.00</b>	

SUBTOTAL of Receipts This Page (optional).....▶	<b>1,210.00</b>
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 NUMBERS: (check only one)		PAGE 7 OF	
<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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 18

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NAME OF COMMITTEE (In Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>HEALY, DAN</b>		Date of Receipt <b>09/18/2004</b>
Mailing Address <b>1577 TENNESSEE STREET</b>		Amount of Each Receipt this Period <b>36.00</b>
City <b>VALLEJO</b>	State Zip Code <b>CA 94590</b>	
FEC ID number of contributing federal political committee <b>C</b>		Amount of Each Receipt this Period <b>236.00</b>
Name of Employer <b>SELF</b>	Occupation <b>AFFORNEY</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date <input type="checkbox"/> <b>236.00</b>	

B. Full Name (Last, First, Middle Initial) <b>KAYS, STEVEN</b>		Date of Receipt <b>06/01/2004</b>
Mailing Address <b>1652 WEST TEXAS STREET</b>		Amount of Each Receipt this Period <b>33.48</b> <i>IN KIND DIRECTOR OFFICE</i>
City <b>FAIRFIELD</b>	State Zip Code <b>CA 94533</b>	
FEC ID number of contributing federal political committee <b>C</b>		Amount of Each Receipt this Period <b>979.20</b>
Name of Employer <b>CALIFORNIA BUSINESS CENTER</b>	Occupation <b>LANDLORD / OWNER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date <input type="checkbox"/> <b>979.20</b>	

C. Full Name (Last, First, Middle Initial) <b>KAYS, STEVEN</b>		Date of Receipt <b>07/01/2004</b>
Mailing Address <b>1652 WEST TEXAS STREET</b>		Amount of Each Receipt this Period <b>36.72</b> <i>IN KIND DIRECTOR OFFICE</i>
City <b>FAIRFIELD</b>	State Zip Code <b>CA 94534</b>	
FEC ID number of contributing federal political committee <b>C</b>		Amount of Each Receipt this Period <b>979.20</b>
Name of Employer <b>CALIFORNIA BUSINESS CENTER</b>	Occupation <b>LANDLORD / OWNER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date <input type="checkbox"/> <b>979.20</b>	

SUBTOTAL of Receipts This Page (optional)	<b>106.20</b>
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 10 OF	
(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"/> 18 <input type="checkbox"/> 17

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NAME OF COMMITTEE (in full)

SOLAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. KAYS, STEVEN		Date of Receipt 08/01/2004
Mailing Address 1652 WEST TEXAS STREET		Amount of Each Receipt this Period 432.00 IN-KIND: OFFICE SPACE
City FAIRFIELD	State CA	
FEC ID number of contributing federal political committee C		
Name of Employer CALIFORNIA BUSINESS LEADER	Occupation LANDLORD/OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 979.20	

Full Name (Last, First, Middle Initial) B. KAYS, STEVEN		Date of Receipt 08/01/2004
Mailing Address 1652 WEST TEXAS STREET		Amount of Each Receipt this Period 477.00 IN-KIND: OFFICE SPACE + CONFERENCE ROOM
City FAIRFIELD	State CA	
FEC ID number of contributing federal political committee C		
Name of Employer CALIFORNIA BUSINESS LEADER	Occupation LANDLORD/OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 979.20	

Full Name (Last, First, Middle Initial) C. MILLER, TEENA		Date of Receipt 08/13/2004
Mailing Address 214 SANDY BECK WAY		Amount of Each Receipt this Period 30.00
City VALLEJO	State CA	
FEC ID number of contributing federal political committee C		
Name of Employer VALLEJO UNIFIED SCHOOL DISTRICT	Occupation TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

SUBTOTAL of Receipts This Page (optional) ..... 939.00

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 (check only one)		PAGE 1 OF	
	<input checked="" type="checkbox"/> 110	<input type="checkbox"/> 111	<input type="checkbox"/> 112	<input type="checkbox"/> 113
	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19

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NAME OF COMMITTEE (in Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MILLER, TIANA</b>		Date of Receipt <b>09/18/2004</b>
Mailing Address <b>216 SANDY NECK WAY</b>		Amount of Each Receipt this Period <b>, 25.00</b>
City <b>VALLEJO</b>	State <b>CA</b> Zip Code <b>94591</b>	
FEC ID number of contributing federal political committee <b>C</b>		
Name of Employer <b>VACAVILLE UNIFIED SCHOOL DISTRICT</b>		
Occupation <b>TEACHER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Aggregate Year-to-Date <b>, 245.00</b>

Full Name (Last, First, Middle Initial) <b>B. MILLER, TIANA</b>		Date of Receipt <b>09/18/2004</b>
Mailing Address <b>216 SANDY NECK WAY</b>		Amount of Each Receipt this Period <b>, 190.00</b>
City <b>VALLEJO</b>	State <b>CA</b> Zip Code <b>94591</b>	
FEC ID number of contributing federal political committee <b>C</b>		
Name of Employer <b>VACAVILLE UNIFIED SCHOOL DISTRICT</b>		
Occupation <b>TEACHER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Aggregate Year-to-Date <b>, 245.00</b>

Full Name (Last, First, Middle Initial) <b>C. TERANISHI, PATRICIA</b>		Date of Receipt <b>08/24/2004</b>
Mailing Address <b>405 EMERALD HILLS CIRCLE</b>		Amount of Each Receipt this Period <b>, 12.00</b>
City <b>FAIRFIELD</b>	State <b>CA</b> Zip Code <b>94533</b>	
FEC ID number of contributing federal political committee <b>C</b>		
Name of Employer		
Occupation <b>RETIRED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Aggregate Year-to-Date <b>, 752.00</b>

SUBTOTAL of Receipts This Page (optional)	<b>, 727.00</b>
TOTAL This Period (last page this line number only)	

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

Use separate schedules for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 OF				
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. TERANISHI, PATRICIA</b>		Date of Receipt <b>04' 28' 2004</b>
Mailing Address <b>885 EMERALD HILLS CIRCLE</b>		Amount of Each Receipt This Period <b>40.00</b>
City <b>FAIRFIELD</b>	State Zip Code <b>CA 94533</b>	
FEC ID number of contributing federal political committee <b>C</b>		Amount of Each Receipt This Period <b>752.00</b>
Name of Employer	Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) <b>B. TERANISHI, PATRICIA</b>		Date of Receipt <b>03' 25' 2004</b>
Mailing Address <b>885 EMERALD HILLS CIRCLE</b>		Amount of Each Receipt This Period <b>100.00</b>
City <b>FAIRFIELD</b>	State Zip Code <b>CA 94533</b>	
FEC ID number of contributing federal political committee <b>C</b>		Amount of Each Receipt This Period <b>752.00</b>
Name of Employer	Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) <b>C. TERANISHI, PATRICIA</b>		Date of Receipt <b>07' 13' 2004</b>
Mailing Address <b>885 EMERALD HILLS CIRCLE</b>		Amount of Each Receipt This Period <b>600.00</b>
City <b>FAIRFIELD</b>	State Zip Code <b>CA 94533</b>	
FEC ID number of contributing federal political committee <b>C</b>		Amount of Each Receipt This Period <b>752.00</b>
Name of Employer	Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date <input type="checkbox"/>	

SUBTOTAL of Receipts This Page (optional)	<b>740.00</b>
TOTAL This Period (last page this line number only)	<b>740.00</b>

**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 12 OF	
	<input checked="" type="checkbox"/> 11A	<input type="checkbox"/> 11B	<input type="checkbox"/> 11C	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

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

Mailing Address **245 ATLANTIC DRIVE**

City **RIO Vista** State **CA** Zip Code **94571**

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

Name of Employer \_\_\_\_\_ Occupation **RETIRED**

Receipt For:  Primary  General  Other (specify) \_\_\_\_\_

Aggregate Year-to-Date **575.00**

Date of Receipt **06 23 2004**

Amount of Each Receipt this Period **100.00**

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

Mailing Address **245 ATLANTIC DRIVE**

City **RIO Vista** State **CA** Zip Code **94571**

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

Name of Employer \_\_\_\_\_ Occupation **RETIRED**

Receipt For:  Primary  General  Other (specify) \_\_\_\_\_

Aggregate Year-to-Date **575.00**

Date of Receipt **09 07 2004**

Amount of Each Receipt this Period **75.00**

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

Mailing Address **245 ATLANTIC DRIVE**

City **RIO Vista** State **CA** Zip Code **94571**

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

Name of Employer \_\_\_\_\_ Occupation **RETIRED**

Receipt For:  Primary  General  Other (specify) \_\_\_\_\_

Aggregate Year-to-Date **575.00**

Date of Receipt **09 13 2004**

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional) **575.00**

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: (check only one)	PAGE 4 OF
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
		<input type="checkbox"/> 17 18

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NAME OF COMMITTEE (in Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

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

Mailing Address  
**1830 ST. FRANCIS COURT**

City **BENICIA** State **CA** Zip Code **94510**

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

Name of Employer **PIKE BEACH INN** Occupation **OWNER**

Receipt For:  
 Primary  General  
 Other (specify) **W-EMP: STAY AT INN**

Aggregate Year-to-Date **250.00**

Date of Receipt  
**07-18-2004**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) **250.00**

TOTAL This Period (last page this line number only) **5367.60**

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

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

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NAME OF COMMITTEE (in Full)  
SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
FRIENDS OF CONGRESSMAN GEORGE MILLER

Mailing Address  
PO BOX 5864

City  
CONCORD State CA Zip Code 94924

FEC ID number of contributing federal political committee  
C00026757

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date \$

Date of Receipt  
09 27 2004

Amount of Each Receipt this Period  
100.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee  
C

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date \$

Date of Receipt  
M M / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee  
C

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date \$

Date of Receipt  
M M / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	<u>100.00</u>
TOTAL This Period (last page this line number only)	<u>100.00</u>

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

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

FORM LINE NUMBER: (check only one)		PAGE 15 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 checked="" 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 seeking 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)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

**A. Full Name (Last, First, Middle Initial)**  
**FILIPINO AMERICAN DEMOCRATIC CLUBS**

**Mailing Address**  
**449 GILCREST AVENUE**

**City** **VALLEJO** **State** **CA** **Zip Code** **94591**

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

**Name of Employer** \_\_\_\_\_ **Occupation** \_\_\_\_\_

**Receipt For:**  
 Primary  General  
 Other (specify) \_\_\_\_\_

**Aggregate Year-to-Date** **1,405.76**

**Date of Receipt**  
**07 28 2004**

**Amount of Each Receipt this Period**  
**300.00**  
**PAYMENT OF SHARE OF JOINT HEADQUARTERS SECURITY DEPOSIT**

**B. Full Name (Last, First, Middle Initial)**  
**FILIPINO AMERICAN DEMOCRATIC CLUBS**

**Mailing Address**  
**449 GILCREST AVENUE**

**City** **VALLEJO** **State** **CA** **Zip Code** **94591**

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

**Name of Employer** \_\_\_\_\_ **Occupation** \_\_\_\_\_

**Receipt For:**  
 Primary  General  
 Other (specify) \_\_\_\_\_

**Aggregate Year-to-Date** **1,405.76**

**Date of Receipt**  
**08 09 2004**

**Amount of Each Receipt this Period**  
**300.00**  
**PAYMENT OF SHARE OF RENT FOR JOINT HEADQUARTERS**

**C. Full Name (Last, First, Middle Initial)**  
**FILIPINO AMERICAN DEMOCRATIC CLUBS**

**Mailing Address**  
**449 GILCREST AVENUE**

**City** **VALLEJO** **State** **CA** **Zip Code** **94591**

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

**Name of Employer** \_\_\_\_\_ **Occupation** \_\_\_\_\_

**Receipt For:**  
 Primary  General  
 Other (specify) \_\_\_\_\_

**Aggregate Year-to-Date** **1,405.76**

**Date of Receipt**  
**08 27 2004**

**Amount of Each Receipt this Period**  
**305.76**  
**PAYMENT OF SHARE OF RENT INSTALLMENT & STIPEND FOR COORDINATOR AT JOINT HEADQUARTERS**

**SUBTOTAL of Receipts This Page (optional)** **905.76**

**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 17 OF

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. FILIPINO AMERICAN DEMOCRATIC CLUB

Mailing Address

4119 GIL CREEK AVENUE

City

VALLEJO

State

CA

Zip Code

94591

Date of Receipt

07 09 2004

Amount of Each Receipt this Period

500.00  
PAYMENT OF SHARE  
OF RENT FOR  
JOINT HEADQUARTERS

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,405.86

Full Name (Last, First, Middle Initial)

B. UNITED DEMOCRATS OF VALLEJO BEACH AREA AMERICAN CANYON

Mailing Address

PO BOX 7126

City

VALLEJO

State

CA

Zip Code

94590

Date of Receipt

07 23 2004

Amount of Each Receipt this Period

1,000.00  
PAYMENT OF SHARE  
OF SECURITY  
DEPOSIT RENT  
FOR JOINT HEADQUARTERS

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,809.62

Full Name (Last, First, Middle Initial)

C. UNITED DEMOCRATS OF VALLEJO BEACH AREA AMERICAN CANYON

Mailing Address

PO Box 7126

City

VALLEJO

State

CA

Zip Code

94590

Date of Receipt

07 09 2004

Amount of Each Receipt this Period

809.62  
PAYMENT OF SHARE OF  
RENT, PHONE INSTALLATION  
+ COORDINATOR  
STIPEND AT JOINT  
HEADQUARTERS

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,809.62

SUBTOTAL of Receipts This Page (optional)

2,309.62

TOTAL This Period (last page this line number only)

3,215.38

**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)

PAGE 1 OF

<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)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial): **VALLEJO MUSEUM**

Mailing Address: **734 MARRIN STREET**

City: **VALLEJO** State: **CA** Zip Code: **94590**

Purpose of Disbursement: **HALL RENTAL FOR FUND RAISER**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **07 18 2004**

Amount of Each Disbursement this Period: **500.00**

Category/Type: **003**

**B.**

Full Name (Last, First, Middle Initial): **KAYS, STEVEN**

Mailing Address: **1652 WEST TEXAS STREET**

City: **FAIRFIELD** State: **CA** Zip Code: **94533**

Purpose of Disbursement: **IN KIND CONTRIBUTION OF VIRTUAL OFFICE**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **05 01 2004**

Amount of Each Disbursement this Period: **33.48**

Category/Type: **001**

MEMO: SEE ALSO SCHEDULE H4

**C.**

Full Name (Last, First, Middle Initial): **KAYS, STEVEN**

Mailing Address: **1652 WEST TEXAS STREET**

City: **FAIRFIELD** State: **CA** Zip Code: **94533**

Purpose of Disbursement: **IN KIND CONTRIBUTION OF VIRTUAL OFFICE**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **07 01 2004**

Amount of Each Disbursement this Period: **36.72**

Category/Type: **001**

MEMO: SEE ALSO SCHEDULE H4

SUBTOTAL of Disbursements 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 17 OF

<input checked="" type="checkbox"/> 21B 27	<input type="checkbox"/> 22 28A	<input type="checkbox"/> 23 28B	<input type="checkbox"/> 24 29C	<input type="checkbox"/> 25 29	<input type="checkbox"/> 29 30B
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NAME OF COMMITTEE (In Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial): **KAYS, STEVEN**

Dating Address: **1652 WEST TEXAS STREET**

City: **FAIRFIELD** State: **CA** Zip Code: **94533**

Purpose of Disbursement: **IN-KIND CONTRIBUTION OF OFFICE SPACE**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **08' 01' 2004**

MEMO: SEE ALSO SCHEDULE H-1

Amount of Each Disbursement this Period: **932.00**

Category/Type: **001**

**B.**

Full Name (Last, First, Middle Initial): **KAYS, STEVEN**

Dating Address: **1652 WEST TEXAS STREET**

City: **FAIRFIELD** State: **CA** Zip Code: **94533**

Purpose of Disbursement: **IN-KIND CONTRIBUTION OF OFFICE SPACE**

Candidate Name: **A CONFERENCE ROOM**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **07' 01' 2004**

MEMO: SEE ALSO SCHEDULE H-1

Amount of Each Disbursement this Period: **477.00**

Category/Type: **001**

**C.**

Full Name (Last, First, Middle Initial): \_\_\_\_\_

Dating Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: \_\_\_\_\_

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: \_\_\_\_\_

Amount of Each Disbursement this Period: \_\_\_\_\_

Category/Type: \_\_\_\_\_

**SUBTOTAL** of Disbursements This Page (optional): \_\_\_\_\_

**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	FORM LINE NUMBER: (check only one)						PAGE 4 OF
	<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 checked="" type="checkbox"/> 30	

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NAME OF COMMITTEE (In Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. PATRICIA GLOD</b>		Date of Disbursement <b>07 30 2004</b>
Mailing Address <b>14120 FARRELL STREET</b>		Amount of Each Disbursement This Period <b>1,000.00</b>
City <b>VALLEJO</b>	State Zip Code <b>CA 94590</b>	
Purpose of Disbursement <b>SEPTEMBER COORDINATOR STIPEND</b>	Category/Type <b>001</b>	
Candidate Name <b></b>	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) ▼	

Full Name (Last, First, Middle Initial) <b>B. SONOMA COUNTY DEMOCRATIC CENTRAL COMMITTEE</b>		Date of Disbursement <b>09 24 2004</b>
Mailing Address <b>PO BOX 3727</b>		Amount of Each Disbursement This Period <b>930.00</b>
City <b>SANTA ROSA</b>	State Zip Code <b>CA 95402</b>	
Purpose of Disbursement <b>PURCHASE OF KEERT EDWARDS SIGNS</b>	Category/Type <b>006</b>	
Candidate Name <b></b>	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) ▼	

Full Name (Last, First, Middle Initial) <b>C. HOFFMAN, KATHY</b>		Date of Disbursement <b>09 18 2004</b>
Mailing Address <b>304 PALO VERDE</b>		Amount of Each Disbursement This Period <b>719.41</b>
City <b>VALLEJO</b>	State Zip Code <b>CA 94590</b>	
Purpose of Disbursement <b>REIMBURSEMENT FOR KEERT EDWARDS SIGNS</b>	Category/Type <b>006</b>	
Candidate Name <b></b>	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)	<b>2,649.41</b>
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	FORM LINE NUMBER: (check only one)						PAGE 21 OF
	<input type="checkbox"/> 21a	<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"/> 29a	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial): **DEMSTOLE, CORP**

Mailing Address: **5104 MACARTHUR BOULEVARD, NW**

City: **WASHINGTON** State: **DC** Zip Code: **20016**

Purpose of Disbursement: **PURCHASE OF CANDIDATE PERIODICALS**

Candidate Name: **INTERSTATE** Category Type: **006**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **v**

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **08/25/2004**

Amount of Each Disbursement this Period: **1,549.64**

**B.**

Full Name (Last, First, Middle Initial): **PATRICIA GLOYD**

Mailing Address: **1420 FARRELL STREET**

City: **VALLEJO** State: **CA** Zip Code: **94590**

Purpose of Disbursement: **BUDGET COORDINATOR STIPEND**

Candidate Name: \_\_\_\_\_ Category Type: **001**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **v**

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **08/31/2004**

Amount of Each Disbursement this Period: **4,000.00**

**C.**

Full Name (Last, First, Middle Initial): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: \_\_\_\_\_

Candidate Name: \_\_\_\_\_ Category Type: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **v**

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: \_\_\_\_\_

Amount of Each Disbursement this Period: \_\_\_\_\_

SUBTOTAL of Disbursements This Page (optional) ..... **2,549.64**

TOTAL This Period (last page this line number only) ..... **5,199.05**

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

**DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedules for each numbered line)	PAGE 22 OF
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (in full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PHILIPINO AMERICAN DEMOCRATIC CLUB</b>	Nature of Debt (Purpose): <b>PAYMENT OF SHARE OF JOINT HEADQUARTERS COORDINATOR STIPEND</b>
Mailing Address <b>7117 GUNCREST AVENUE</b>	
City State Zip Code <b>VALLEJO CA 94591</b>	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	384.62	Payment This Period	0.00
			Outstanding Balance at Close of This Period
			384.62

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>UNITED DEMOCRATS OF VALLEJO, BENIGNA - AMERICAN CANTON</b>	Nature of Debt (Purpose): <b>PAYMENT OF SHARE OF JOINT HEADQUARTERS COORDINATOR STIPEND</b>
Mailing Address <b>PO BOX 7126</b>	
City State Zip Code <b>VALLEJO CA 94590</b>	

Outstanding Balance Beginning This Period	0.00		
Amount Incurred This Period	230.76	Payment This Period	0.00
			Outstanding Balance at Close of This Period
			230.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period		Payment This Period	
			Outstanding Balance at Close of This Period

1) SUBTOTAL This Period This Page (optional)	615.38
2) TOTALS This Period (last page this line number only)	615.38
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	615.38

**SCHEDULE H1 (FEC Form 3X)**

**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NON-FEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)**

NAME OF COMMITTEE (in Full)

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

**USE ONLY ONE SECTION**

**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)

**Separate Segregated Funds and Non-Connected Committees**

Funds Expended

Estimated Direct Candidate Support -- Federal ..... %

Estimated Direct Candidate Support -- Non-Federal ..... %

ADJUSTMENTS TO FUNDS EXPENDED:

Actual Direct Candidate Support -- Federal ..... %

Actual Direct Candidate Support -- Non-Federal .....

**SCHEDULE H2 (FEC Form 3X)  
ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT  
ACTIVITIES APPEARING ON THIS REPORT:**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NON-FEDERAL %
<p><u>TRIVIA BEE</u></p> <p>ACTIVITY IS:  <input checked="" type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input checked="" type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	100.00 %	0.00 %
<p><u>RENOMA YACHT CLUB</u></p> <p>ACTIVITY IS:  <input checked="" type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input checked="" type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	100.00 %	100.00 %
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	. %	. %
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	. %	. %
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	. %	. %
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	. %	. %



**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NON-FEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NON-FEDERAL ACTIVITY**

PAGE 25 OF  
FOR LINE 19 OF FORM 3X

NAME OF COMMITTEE (in Full)

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NON FEDERAL ACCOUNT	05 27 2004	512.00

**BREAKDOWN OF TRANSFER RECEIVED**

i) Total Administrative .....	512.00
ii) Generic Voter Drive .....	0.00
iii) Exempt Activities .....	0.00
iv) Direct Fundraising (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Fundraising .....	0.00
v) Direct Candidate Support (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Candidate Support .....	0.00

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

TOTAL This Period (Administrative) .....	512.00
TOTAL This Period (Generic Voter Drive) .....	
TOTAL This Period (Exempt Activities) .....	
TOTAL This Period (Direct Fundraising) .....	
TOTAL This Period (Direct Candidate Support) .....	
TOTAL This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NON-FEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NON-FEDERAL ACTIVITY**

PAGE 28 OF  
FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (in Full)  
*SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE*

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
<i>NON FEDERAL ACCOUNT</i>	<i>08-09-2004</i>	<i>59.52</i>

**BREAKDOWN OF TRANSFER RECEIVED**

i) Total Administrative	<i>59.52</i>
ii) Generic Voter Drive	<i>0.00</i>
iii) Exempt Activities	<i>0.00</i>
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	<i>0.00</i>
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	<i>0.00</i>

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

TOTAL This Period (Administrative)	<i>59.52</i>
TOTAL This Period (Generic Voter Drive)	<i>0.00</i>
TOTAL This Period (Exempt Activities)	<i>0.00</i>
TOTAL This Period (Direct Fundraising)	<i>0.00</i>
TOTAL This Period (Direct Candidate Support)	<i>0.00</i>
TOTAL This Period (Total Amount Transferred)	<i>59.52</i>

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NON-FEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NON-FEDERAL ACTIVITY**

PAGE 1 OF 1  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
<u>NONFEDERAL ACCOUNT</u>	<u>07 01 2004</u>	<u>6523</u>

**BREAKDOWN OF TRANSFER RECEIVED**

i) Total Administrative	<u>6523</u>
ii) Generic Voter Drive	<u>000</u>
iii) Exempt Activities	<u>000</u>
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	<u>000</u>
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	<u>000</u>

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

TOTAL This Period (Administrative)	<u>6523</u>
TOTAL This Period (Generic Voter Drive)	<u>000</u>
TOTAL This Period (Exempt Activities)	<u>000</u>
TOTAL This Period (Direct Fundraising)	<u>000</u>
TOTAL This Period (Direct Candidate Support)	<u>000</u>
TOTAL This Period (Total Amount Transferred)	<u>6523</u>

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NON-FEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NON-FEDERAL ACTIVITY**

PAGE 2 OF  
 FOR LINE 18A OF FORM 3X

NAME OF COMMITTEE (In Full)  
SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
<u>NON FEDERAL ACCOUNT</u>	<u>07/30/2004</u>	<u>320.00</u>

**BREAKDOWN OF TRANSFER RECEIVED**

i) Total Administrative	<u>320.00</u>
ii) Generic Voter Drive	<u>0.00</u>
iii) Exempt Activities	<u>0.00</u>
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	<u>0.00</u>
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	<u>0.00</u>

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

TOTAL This Period (Administrative)	<u>320.00</u>
TOTAL This Period (Generic Voter Drive)	<u>0.00</u>
TOTAL This Period (Exempt Activities)	<u>0.00</u>
TOTAL This Period (Direct Fundraising)	<u>0.00</u>
TOTAL This Period (Direct Candidate Support)	<u>0.00</u>
TOTAL This Period (Total Amount Transferred)	<u>320.00</u>

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NON-FEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NON-FEDERAL ACTIVITY**

PAGE 29 OF  
 FOR LINE USE OF FORM 3X

NAME OF COMMITTEE (in Full)  
SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
<u>NON FEDERAL ACCOUNT</u>	<u>08 08 2004</u>	<u>768.00</u>

**BREAKDOWN OF TRANSFER RECEIVED**

d) Total Administrative .....	<u>768.00</u>
e) Generic Voter Drive .....	<u>0.00</u>
f) Exempt Activities .....	<u>0.00</u>
g) Direct Fundraising (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Fundraising .....	<u>0.00</u>
h) Direct Candidate Support (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Candidate Support .....	<u>0.00</u>

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

TOTAL This Period (Administrative) .....	<u>768.00</u>
TOTAL This Period (Generic Voter Drive) .....	
TOTAL This Period (Exempt Activities) .....	
TOTAL This Period (Direct Fundraising) .....	
TOTAL This Period (Direct Candidate Support) .....	
TOTAL This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NON-FEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NON-FEDERAL ACTIVITY**

PAGE 27 OF  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NON-FEDERAL ACCOUNT	08/18/2004	320.00

**BREAKDOWN OF TRANSFER RECEIVED**

b) Total Administrative	320.00
l) Generic Voter Drive	0.00
8) Exempt Activities	0.00
m) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	0.00
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	0.00

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

TOTAL This Period (Administrative)	320.00
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Total Amount Transferred)	320.00

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NON-FEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NON-FEDERAL ACTIVITY**

PAGE 21 OF  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NONFEDERAL ACCOUNT	03 FEB 2004	8000

**BREAKDOWN OF TRANSFER RECEIVED**

b) Total Administrative	8000
k) Generic Voter Drive	000
l) Exempt Activities	000
m) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	000
n) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	000

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

TOTAL This Period (Administrative)	8000
TOTAL This Period (Generic Voter Drive)	000
TOTAL This Period (Exempt Activities)	000
TOTAL This Period (Direct Fundraising)	000
TOTAL This Period (Direct Candidate Support)	000
TOTAL This Period (Total Amount Transferred)	8000

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NON-FEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NON-FEDERAL ACTIVITY**

PAGE 33 OF  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (in Full)  
SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
<u>NON-FEDERAL ACCOUNT</u>	<u>07 '02' 3009</u>	<u>248.00</u>

**BREAKDOWN OF TRANSFER RECEIVED**

i) Total Administrative	<u>248.00</u>
ii) Generic Voter Drive	<u>348.00</u>
iii) Exempt Activities	<u>0.00</u>
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	<u>0.00</u>
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	<u>0.00</u>

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

TOTAL This Period (Administrative)	<u>248.00</u>
TOTAL This Period (Generic Voter Drive)	<u>348.00</u>
TOTAL This Period (Exempt Activities)	<u>0.00</u>
TOTAL This Period (Direct Fundraising)	<u>0.00</u>
TOTAL This Period (Direct Candidate Support)	<u>0.00</u>
TOTAL This Period (Total Amount Transferred)	<u>596.00</u>



**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NON-FEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NON-FEDERAL ACTIVITY**

PAGE 23 OF  
 FOR LINE 16a OF FORM 3X

NAME OF COMMITTEE (in Full)  
 SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NON FEDERAL ACCOUNT	07 02 2004	320.00

**BREAKDOWN OF TRANSFER RECEIVED**

i) Total Administrative	320.00
ii) Generic Voter Drive	0.00
iii) Exempt Activities	0.00
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	0.00
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	0.00

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

TOTAL This Period (Administrative)	320.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Total Amount Transferred)	320.00

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENTS OF ALLOCATED  
FEDERAL/NON-FEDERAL ACTIVITY**

NAME OF COMMITTEE (in Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>CALIFORNIA DEMOCRATIC PARTY</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Mailing Address: <b>1401 21ST STREET, SUITE 100</b>		Allocated Activity or Event Year-To-Date	
City <b>SACRAMENTO</b>	State <b>CA</b>	Zip Code <b>95814</b>	Date <b>08 07 2004</b>
Purpose of Disbursement: <b>PURCHASE OF INSURANCE</b>		Category Type <b>001</b>	
Activity or Event Identifier:			
FEDERAL SHARE	+	NON-FEDERAL SHARE	= TOTAL AMOUNT
<b>200.00</b>		<b>512.00</b>	<b>712.00</b>

B. Full Name (Last, First, Middle Initial) <b>KAYS STEVEN</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Mailing Address: <b>1652 WEST TEXAS STREET</b>		Allocated Activity or Event Year-To-Date	
City <b>FAIRFIELD</b>	State <b>CA</b>	Zip Code <b>94535</b>	Date <b>07 07 2004</b>
Purpose of Disbursement: <b>WIKING CONTRIBUTION OF VIRTUAL OFFICE</b>		Category Type <b>601</b>	
Activity or Event Identifier:			
FEDERAL SHARE	+	NON-FEDERAL SHARE	= TOTAL AMOUNT
<b>33.48</b>		<b>59.52</b>	<b>93.00</b>

C. Full Name (Last, First, Middle Initial) <b>KAYS STEVEN</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Mailing Address: <b>1652 WEST TEXAS STREET</b>		Allocated Activity or Event Year-To-Date	
City <b>FAIRFIELD</b>	State <b>CA</b>	Zip Code <b>94535</b>	Date <b>07 07 2004</b>
Purpose of Disbursement: <b>WIKING CONTRIBUTION OF VIRTUAL OFFICE</b>		Category Type <b>001</b>	
Activity or Event Identifier:			
FEDERAL SHARE	+	NON-FEDERAL SHARE	= TOTAL AMOUNT
<b>36.72</b>		<b>65.28</b>	<b>102.00</b>

SUBTOTAL of allocated Federal and Non-Federal Activity This Page			
FEDERAL SHARE	+	NON-FEDERAL SHARE	= TOTAL AMOUNT
<b>358.20</b>		<b>636.80</b>	<b>995.00</b>
TOTAL This Period (last page for each line only) (Federal share to 21(a)(1) and Non-Federal share to 21(a)(6))			TOTAL AMOUNT
FEDERAL SHARE		NON-FEDERAL SHARE	
TOTAL This Period for the Non-Federal Share			

**SCHEDULE H4 (FEC Form 3X)**  
**DISBURSEMENTS OF ALLOCATED**  
**FEDERAL/NON-FEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) HISTORICAL RESTORATION, INC		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 707 MARIN STREET		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City VALLEJO	State CA	Zip Code 94590	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: SECURITY DEPOSIT FOR HEADQUARTERS		Category/Type 001	Date 07 29 2004

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
900.00		320.00		1,300.00

B. Full Name (Last, First, Middle Initial) KAYS, STEVEN		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1622 WEST TEXAS STREET		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City FAIRFIELD	State CA	Zip Code 94533	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: IN KIND CONTRIBUTION OF OFFICE SPACE		Category/Type 001	Date 08 01 2004

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
432.00		768.00		1,200.00

C. Full Name (Last, First, Middle Initial) HISTORICAL RESTORATION, INC		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 707 MARIN STREET		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City VALLEJO	State CA	Zip Code 94590	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: RENT FOR HEADQUARTERS		Category/Type 001	Date 08 02 2004

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
900.00		320.00		1,300.00

SUBTOTAL of Allocated Federal and Non-Federal Activity This Page				
FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
2,392.		1,408.00		3,800.00
TOTAL This Period (last page for each line only)(Federal share to 21(a)(1) and Non-Federal share to 21(a)(2))				
FEDERAL SHARE		NON-FEDERAL SHARE		TOTAL AMOUNT
TOTAL This Period for the Non-Federal Share				

**SCHEDULE H4 (FEC Form 3X)**  
**DISBURSEMENTS OF ALLOCATED**  
**FEDERAL/NON-FEDERAL ACTIVITY**

NAME OF COMMITTEE (in Full)  
SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) <u>HISTORICAL RESTORATION, INC</u>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Mailing Address <u>707 MARIN STREET</u>		Allocated Activity or Event Year-To-Date	
City <u>VALLEJO</u>	State <u>CA</u>	Zip Code <u>94590</u>	
Purpose of Disbursement: <u>INSTALLATION OF PHONE LINES</u>		Category/Type <u>001</u>	Date <u>08 25 2004</u>
Activity or Event Identifier			

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
, 245.00		, 80.00		, 325.00

B. Full Name (Last, First, Middle Initial) <u>KAYS, STEVEN</u>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Mailing Address <u>1652 WEST TEXAS STREET</u>		Allocated Activity or Event Year-To-Date	
City <u>FAIRFIELD</u>	State <u>CA</u>	Zip Code <u>94533</u>	
Purpose of Disbursement: <u>IN-KIND CONTRIBUTION OF OFFICE SPACE</u>		Category/Type <u>001</u>	Date M M O O Y Y Y Y
Activity or Event Identifier			

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
, 477.00		, 848.00		, 1,325.00

C. Full Name (Last, First, Middle Initial) <u>HISTORICAL RESTORATION, INC</u>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Mailing Address <u>707 MARIN STREET</u>		Allocated Activity or Event Year-To-Date	
City <u>VALLEJO</u>	State <u>CA</u>	Zip Code <u>94590</u>	
Purpose of Disbursement: <u>RENT FOR HEADQUARTERS</u>		Category/Type <u>001</u>	Date <u>09 00 2004</u>
Activity or Event Identifier			

FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
, 980.00		, 320.00		, 1,300.00

SUBTOTAL of Allocated Federal and Non-Federal Activity This Page				
FEDERAL SHARE	+	NON-FEDERAL SHARE	=	TOTAL AMOUNT
, 1,702.00		, 1,248.00		, 2,950.00
TOTAL This Period (last page for each line only)(Federal share to 21(a)(1) and Non-Federal share to 21(a)(2))				
FEDERAL SHARE				TOTAL AMOUNT
, 4,452.20		3,292.80		, 7,745.00
TOTAL This Period for the Non-Federal Share				
		, 3,292.80		

**SCHEDULE H5 (FEC Form 3X)**

**TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

PAGE 39 OF  
FOR LINE 15 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
<b>NON FEDERAL ACCOUNT</b>	<b>05 ' 29 ' 2004</b>	<b>448.00</b>

**BREAKDOWN OF THIS TRANSFER**

	VOTER REGISTRATION	VOTER ID	GOTV	GENERIC CAMPAIGN ACTIVITY
i) Voter Registration Total Amount Transferred for Voter Registration .....	<b>448.00</b>			
ii) Voter ID Total Amount Transferred for Voter ID .....		<b>0.00</b>		
iii) GOTV Total Amount Transferred for GOTV .....			<b>1.00</b>	
iv) Generic Campaign Activity Total Amount Transferred for Generic Campaign Activity .....				<b>0.00</b>

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
<b>NON FEDERAL ACCOUNT</b>	<b>07 ' 30 ' 2004</b>	<b>182.64</b>

**BREAKDOWN OF THIS TRANSFER**

	VOTER REGISTRATION	VOTER ID	GOTV	GENERIC CAMPAIGN ACTIVITY
i) Voter Registration Total Amount Transferred for Voter Registration .....	<b>179.20</b>			
ii) Voter ID Total Amount Transferred for Voter ID .....		<b>0.00</b>		
iii) GOTV Total Amount Transferred for GOTV .....			<b>3.44</b>	
iv) Generic Campaign Activity Total Amount Transferred for Generic Campaign Activity .....				<b>0.00</b>

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)**

TOTAL This Period (Voter Registration) .....	<b>627.20</b>
TOTAL This Period (Voter ID) .....	<b>0.00</b>
TOTAL This Period (GOTV) .....	<b>3.44</b>
TOTAL This Period (Generic Campaign Activity) .....	<b>0.00</b>
TOTAL This Period (Total Amount of Transfers Received) .....	<b>630.64</b>

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR ALLOCATED FEDERAL ELECTION ACTIVITY**  
(To be used by State, District and Local Party Committees Only)

PAGE 76 OF  
FOR LINE 59 OF FORM 5X

NAME OF COMMITTEE (In Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

A. Full Name (Last, First, Middle Initial) / Full Organization Name <b>SOLANO COUNTY FAIR</b>		Type of Allocated Activity or Event: <input checked="" type="checkbox"/> Voter Registration <input type="checkbox"/> Voter ID <input type="checkbox"/> GOTV <input type="checkbox"/> Generic Campaign	
Meeting Address: <b>900 FAIR GROUNDS DRIVE</b>		Allocated Activity or Event Year-To-Date <b>980.00</b>	
City <b>VALLEJO CA</b>	State <b>CA</b>	Zip Code <b>94591</b>	Category Type <b>007</b>
Purpose of Disbursement: <b>VOTER REGISTRATION BOOTH AT FAIR</b>		Date <b>08 04 2004</b>	
FEDERAL SHARE	+	LEVIN SHARE	= TOTAL AMOUNT
<b>252.00</b>		<b>728.00</b>	<b>980.00</b>

B. Full Name (Last, First, Middle Initial) / Full Organization Name <b>SOLANO COUNTY FAIR</b>		Type of Allocated Activity or Event: <input checked="" type="checkbox"/> Voter Registration <input type="checkbox"/> Voter ID <input type="checkbox"/> GOTV <input type="checkbox"/> Generic Campaign	
Meeting Address: <b>900 FAIR GROUNDS DRIVE</b>		Allocated Activity or Event Year-To-Date <b>980.00</b>	
City <b>VALLEJO CA</b>	State <b>CA</b>	Zip Code <b>94591</b>	Category Type <b>007</b>
Purpose of Disbursement: <b>PARKING &amp; GATE PASSES FOR FAIR</b>		Date <b>07 15 2004</b>	
FEDERAL SHARE	+	LEVIN SHARE	= TOTAL AMOUNT
<b>106.80</b>		<b>179.20</b>	<b>286.00</b>

C. Full Name (Last, First, Middle Initial) / Full Organization Name <b>KINICLO'S</b>		Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> Voter ID <input checked="" type="checkbox"/> GOTV <input type="checkbox"/> Generic Campaign	
Meeting Address: <b>1510 OLIVER ROAD</b>		Allocated Activity or Event Year-To-Date <b>5.37</b>	
City <b>FARFIELD CA</b>	State <b>CA</b>	Zip Code <b>94534</b>	Category Type <b>001</b>
Purpose of Disbursement: <b>COPTING OF VOLUNTEER FORMS</b>		Date <b>07 18 2004</b>	
FEDERAL SHARE	+	LEVIN SHARE	= TOTAL AMOUNT
<b>1.93</b>		<b>3.44</b>	<b>5.37</b>

SUBTOTAL of Shared Federal and Levin Activity This Page		TOTAL AMOUNT	
FEDERAL SHARE	+	LEVIN SHARE	=
<b>354.73</b>		<b>630.64</b>	<b>985.37</b>
TOTAL This Period (last page for each line only) (Federal share to 30(x)(i) and Levin share to 30(x)(ii))		TOTAL AMOUNT	
FEDERAL SHARE		LEVIN SHARE	
<b>354.73</b>		<b>630.64</b>	<b>985.37</b>
TOTAL This Period for the Levin Share			

## SCHEDULE L (FEC Form 3X)

## AGGREGATION PAGE: LEVIN FUNDS

NAME OF COMMITTEE (In Full)		SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE	
NAME OF ACCOUNT		NON FEDERAL ACCOUNT	
		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS		
	(a) Itemized (Use Schedule L-4)	8,675.80	8,675.80
	(b) Unitemized	8,443.00	8,443.00
	(c) Total	17,118.80	17,118.80
2.	OTHER RECEIPTS	174.76	174.76
3.	TOTAL RECEIPTS (Add Lines 1c and 2)	17,293.56	17,293.56
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-6)		
	(a) Voter Registration	627.20	627.20
	(b) Voter ID	0.00	0.00
	(c) GOTV	344	344
	(d) Generic Campaign	0.00	0.00
	(e) Total	630.64	630.64
5.	OTHER DISBURSEMENTS	22,539.00	22,539.00
6.	TOTAL DISBURSEMENTS (Add Lines 4e and 5)	23,169.70	23,169.70
7.	BEGINNING CASH ON HAND (For Column B, use open as of January 1st)	12,616.76	12,616.76
8.	RECEIPTS (From Line 3)	17,293.56	17,293.56
9.	SUBTOTAL (Add Lines 7 and 8)	29,910.32	29,910.32
10.	DISBURSEMENTS (From Line 6)	23,169.70	23,169.70
11.	ENDING CASH ON HAND (Subtract Line 10 From Line 9)	6,740.62	6,740.62

**SCHEDULE L-A (FEC Form 3X)**  
**ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER: (check only one)  1  2

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)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**A. CALIFORNIA TEACHERS ASSOCIATION - ASSOCIATION FOR FUTURE-LEADERSHIP**  
 Mailing Address  
**1705 MURCHISON DRIVE**  
 City State Zip Code  
**BURLINGAME CA 94010**  
 Name of Employer or Principal Place of Business  
 Occupation

Date of Receipt  
**01/27/2004**  
 Amount of Each Receipt this Period  
**500.00**  
 Aggregate Year-to-Date  
**500.00**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**B. NORTHERN CALIFORNIA CARPENTERS REGIONAL COUNCIL SMALL CONTRIBUTOR COMMITTEE**  
 Mailing Address  
**449 HEGERBERGER ROAD**  
 City State Zip Code  
**DANFORD CA 94621**  
 Name of Employer or Principal Place of Business  
 Occupation

Date of Receipt  
**01/23/2004**  
 Amount of Each Receipt this Period  
**300.00**  
 Aggregate Year-to-Date  
**300.00**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**C. CARQUINEZ DEMOCRATIC CLUB**  
 Mailing Address  
**PO BOX 1814**  
 City State Zip Code  
**BENICIA CA 94510**  
 Name of Employer or Principal Place of Business  
 Occupation

Date of Receipt  
**01/09/2004**  
 Amount of Each Receipt this Period  
**250.00**  
 Aggregate Year-to-Date  
**250.00**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**D. DISTRICT COUNCIL OF IRON WORKERS OF STATE OF CALIFORNIA AND VICINITY**  
 Mailing Address  
**1660 SAN PABLO AVENUE SUITE C**  
 City State Zip Code  
**PINDOLE CA 94564**  
 Name of Employer or Principal Place of Business  
 Occupation

Date of Receipt  
**01/09/2004**  
 Amount of Each Receipt this Period  
**300.00**  
 Aggregate Year-to-Date  
**300.00**

SUBTOTAL of Receipts This Page (optional) **1350.00**  
 TOTAL This Period (last page this line number only)



**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

PAGE 41 OF  
FOR LINE NUMBER: (check only one)  1A  2

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NAME OF COMMITTEE (in Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**A. HARDY, STEVE**

Mailing Address  
**4102 EVERGREEN DRIVE**

City State Zip Code  
**VACAVILLE CA 95629**

Name of Employer or Principal Place of Business  
**CALIFORNIA STATE SENATE**

Occupation  
**STAFF DIRECTOR**

Date of Receipt  
**01 31 2004**

Amount of Each Receipt this Period  
**85.00**

Aggregate Year-to-Date  
**295.00**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**B. HARDY, STEVE**

Mailing Address  
**4102 EVERGREEN DRIVE**

City State Zip Code  
**VACAVILLE CA 95629**

Name of Employer or Principal Place of Business  
**CALIFORNIA STATE SENATE**

Occupation  
**STAFF DIRECTOR**

Date of Receipt  
**02 05 2004**

Amount of Each Receipt this Period  
**210.00**

Aggregate Year-to-Date  
**295.00**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**C. HEALY, DAN**

Mailing Address  
**1517 TENNESSEE STREET**

City State Zip Code  
**VALLEJO CA 94590**

Name of Employer or Principal Place of Business  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Date of Receipt  
**01 09 2004**

Amount of Each Receipt this Period  
**400.00**

Aggregate Year-to-Date  
**460.00**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**D. HEALY, DAN**

Mailing Address  
**1517 TENNESSEE STREET**

City State Zip Code  
**VALLEJO CA 94590**

Name of Employer or Principal Place of Business  
**SELF-EMPLOYED**

Occupation  
**ATTORNEY**

Date of Receipt  
**01 31 2004**

Amount of Each Receipt this Period  
**60.00**

Aggregate Year-to-Date  
**460.00**

SUBTOTAL of Receipts (This Page optional) **755.00**

TOTAL This Period (last page this line number only) **755.00**

**755.00**

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER:  
(check only one)  1a  2

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NAME OF COMMITTEE (in Full)

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) / Full Organization Name

Date of Receipt

01/30/2004

A. INTERNATIONAL BUSINESS MACHINES CORPORATION

Mailing Address

720 TECHNOLOGY WAY SUITE B

Amount of Each Receipt This Period

City

State

Zip Code

WANA

CA

94558

700.00

Name of Employer or Principal Place of Business

Aggregate Year-to-Date

Occupation

700.00

Full Name (Last, First, Middle Initial) / Full Organization Name

Date of Receipt

01/09/2004

B. INTERNATIONAL ASSOCIATION OF BAKERS, STRUCTURAL  
URBANENTIAL, & REINFORCING IRON WORKERS LOCAL 1058

Mailing Address

3120 BAYSHORE ROAD

Amount of Each Receipt This Period

City

State

Zip Code

BERNIA

CA

94510

400.00

Name of Employer or Principal Place of Business

Aggregate Year-to-Date

Occupation

400.00

Full Name (Last, First, Middle Initial) / Full Organization Name

Date of Receipt

01/31/2004

C. LABRZ, DAWN

Mailing Address

607 SCOTTSDALE DRIVE

Amount of Each Receipt This Period

City

State

Zip Code

VACAVILLE

CA

95602

105.00

Name of Employer or Principal Place of Business

Aggregate Year-to-Date

Occupation

215.00

Full Name (Last, First, Middle Initial) / Full Organization Name

Date of Receipt

01/31/2004

D. LABRZ, DAWN

Mailing Address

607 SCOTTSDALE DRIVE

Amount of Each Receipt This Period

City

State

Zip Code

VACAVILLE

CA

95602

110.00

Name of Employer or Principal Place of Business

Aggregate Year-to-Date

Occupation

215.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1315.00

**SCHEDULE L-A (FEC Form 3X)**  
**ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER: (check only one)  1a  2

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NAME OF COMMITTEE (in Full)  
 SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) / Full Organization Name: KAYS, STEVEN  
 Date of Receipt: 06/01/2004  
 Mailing Address: 1652 WEST TEXAS STREET  
 Amount of Each Receipt this Period: 59.52  
 City: FAIRFIELD, CA Zip Code: 94533  
 Name of Employer or Principal Place of Business: CALIFORNIA BUSINESS CENTER  
 Aggregate Year-to-Date: 1,740.00  
 Occupation: OWNER/LANDLORD

B. Full Name (Last, First, Middle Initial) / Full Organization Name: KAYS, STEVEN  
 Date of Receipt: 07/01/2004  
 Mailing Address: 1652 WEST TEXAS STREET  
 Amount of Each Receipt this Period: 65.28  
 City: FAIRFIELD, CA Zip Code: 94533  
 Name of Employer or Principal Place of Business: CALIFORNIA BUSINESS CENTER  
 Aggregate Year-to-Date: 1,740.00  
 Occupation: OWNER/LANDLORD

C. Full Name (Last, First, Middle Initial) / Full Organization Name: KAYS, STEVEN  
 Date of Receipt: 08/01/2004  
 Mailing Address: 1652 WEST TEXAS STREET  
 Amount of Each Receipt this Period: 78.00  
 City: FAIRFIELD, CA Zip Code: 94533  
 Name of Employer or Principal Place of Business: CALIFORNIA BUSINESS CENTER  
 Aggregate Year-to-Date: 1,740.00  
 Occupation: OWNER/LANDLORD

D. Full Name (Last, First, Middle Initial) / Full Organization Name: KAYS, STEVEN  
 Date of Receipt: 09/01/2004  
 Mailing Address: 1652 WEST TEXAS STREET  
 Amount of Each Receipt this Period: 84.00  
 City: FAIRFIELD, CA Zip Code: 94533  
 Name of Employer or Principal Place of Business: CALIFORNIA BUSINESS CENTER  
 Aggregate Year-to-Date: 1,740.00  
 Occupation: OWNER/LANDLORD

SUBTOTAL of Receipts This Page (optional) ..... 1,740.00  
 TOTAL This Period (last page this line number only) ..... 1,740.00

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

PAGE 114 OF  
FOR LINE NUMBER: (check only one)  1a  2

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NAME OF COMMITTEE (in Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**A. HOW CARRIERS & LABORERS UNION LOCAL 326**  
Mailing Address  
**2980 SONOMA BOULEVARD SUITE B3**  
City **VALLEJO** State **CA** Zip Code **94590**  
Name of Employer or Principal Place of Business  
Occupation

Date of Receipt  
**10/09/2004**  
Amount of Each Receipt this Period  
**700.00**  
Aggregate Year-to-Date  
**700.00**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**B. NLRB-SOLANO COUNTY'S CENTRAL LABOR COUNCIL AFL-CIO**  
Mailing Address  
**945 EMPIRE STREET**  
City **FAIRFIELD** State **CA** Zip Code **94533**  
Name of Employer or Principal Place of Business  
Occupation

Date of Receipt  
**07/20/2004**  
Amount of Each Receipt this Period  
**600.00**  
Aggregate Year-to-Date  
**600.00**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**C. OPERATING ENGINEERS LOCAL UNION NO. 3 OF THE INTERNATIONAL UNION OF OPERATING ENGINEERS**  
Mailing Address  
**1620 SOUTH LOMA ROAD**  
City **ALAMEDA** State **CA** Zip Code **94502**  
Name of Employer or Principal Place of Business  
Occupation

Date of Receipt  
**01/09/2004**  
Amount of Each Receipt this Period  
**600.00**  
Aggregate Year-to-Date  
**600.00**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**D. SOLANO ASSOCIATION OF GOVERNMENT EMPLOYEES LOCAL 1200 SEIU AFL-CIO POLITICAL ACTION COMMITTEE**  
Mailing Address  
**944 JACKSON STREET**  
City **FAIRFIELD** State **CA** Zip Code **94533**  
Name of Employer or Principal Place of Business  
Occupation

Date of Receipt  
**01/09/2004**  
Amount of Each Receipt this Period  
**700.00**  
Aggregate Year-to-Date  
**700.00**

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

**2,600.00**

**SCHEDULE L-A (FEC Form 3X)**  
**ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER: (check only one)  1a  2

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NAME OF COMMITTEE (in Full)

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) / Full Organization Name

A. THOMPSON, SKIP

Date of Receipt

07/31/2004

Mailing Address

5752 WEBER ROAD

Amount of Each Receipt this Period

150.00

City

VACAVILLE

State

CA

Zip Code

95687

Name of Employer or Principal Place of Business

SOLANO COUNTY

Aggregate Year-to-Date

295.00

Occupation

COUNTY ASSESSOR-RECORDER

Full Name (Last, First, Middle Initial) / Full Organization Name

B. THOMPSON, SKIP

Date of Receipt

07/31/2004

Mailing Address

5752 WEBER ROAD

Amount of Each Receipt this Period

145.00

City

VACAVILLE

State

CA

Zip Code

95687

Name of Employer or Principal Place of Business

SOLANO COUNTY

Aggregate Year-to-Date

295.00

Occupation

COUNTY ASSESSOR-RECORDER

Full Name (Last, First, Middle Initial) / Full Organization Name

C. VA LOCAL 355 PAC

Date of Receipt

07/09/2004

Mailing Address

13 TENNESSEE STREET

Amount of Each Receipt this Period

300.00

City

VALLEJO

State

CA

Zip Code

94596

Name of Employer or Principal Place of Business

Aggregate Year-to-Date

300.00

Occupation

Full Name (Last, First, Middle Initial) / Full Organization Name

D. INIGGINS FOR SENATE 2006

Date of Receipt

07/23/2004

Mailing Address

555 CAPITOL MALL, SUITE 1425

Amount of Each Receipt this Period

150.00

City

SACRAMENTO

State

CA

Zip Code

95814

Name of Employer or Principal Place of Business

Aggregate Year-to-Date

320.00

Occupation

SUBTOTAL of Receipts This Page (optional)

745.00

TOTAL This Period (last page this line number only)

**SCHEDULE L-A (FEC Form 3X)**  
**ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
for each category of the  
Aggregation Form

FOR LINE NUMBER:  
(check only one)  1  2

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NAME OF COMMITTEE (in full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**A. WIGGINS FOR SENATE 2006**  
Mailing Address  
**555 CAPITOL MALL, SUITE 1425**  
City State Zip Code  
**SACRAMENTO CA 95814**  
Name of Employer or Principal Place of Business  
Occupation

Date of Receipt  
**01/31/2006**  
Amount of Each Receipt this Period  
**170.00**  
Aggregate Year-to-Date  
**320.00**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**B.**  
Mailing Address  
City State Zip Code  
Name of Employer or Principal Place of Business  
Occupation

Date of Receipt  
Amount of Each Receipt this Period  
Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name  
**C.**  
Mailing Address  
City State Zip Code  
Name of Employer or Principal Place of Business  
Occupation

Date of Receipt  
Amount of Each Receipt this Period  
Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name  
**D.**  
Mailing Address  
City State Zip Code  
Name of Employer or Principal Place of Business  
Occupation

Date of Receipt  
Amount of Each Receipt this Period  
Aggregate Year-to-Date

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

**170.00**  
**8675.00**

**SCHEDULE L-B (FEC Form 3X)**

**ITEMIZED DISBURSEMENTS OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF
	<input checked="" type="checkbox"/> 4a <input type="checkbox"/> 4b <input type="checkbox"/> 4c <input type="checkbox"/> 5	

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NAME OF COMMITTEE (in Full)  
**SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial) / Full Organization Name <b>SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE</b>		Date of Disbursement <b>05 27 2004</b>
Mailing Address <b>2790 VISTA GRANDE</b>		Amount of Each Disbursement this Period <b>448.00</b>
City <b>FAIRFIELD</b>	State Zip Code <b>CA 94534</b>	
Purpose of Disbursement <b>TRANSFER OF LEVIN FUNDS</b>		

Full Name (Last, First, Middle Initial) / Full Organization Name <b>SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE</b>		Date of Disbursement <b>07 30 2004</b>
Mailing Address <b>2790 VISTA GRANDE</b>		Amount of Each Disbursement this Period <b>179.20</b>
City <b>FAIRFIELD</b>	State Zip Code <b>CA 94534</b>	
Purpose of Disbursement <b>TRANSFER OF LEVIN FUNDS</b>		

Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		

Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		

Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		

SUBTOTAL of Disbursements This Page (optional)	<b>627.20</b>
TOTAL This Period (list page this the number only)	<b>627.20</b>

**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**

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

FOR LINE NUMBER: PAGE 7 OF 8  
(check only one)  4a  4b  5  
 4c  4d

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)

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name  
SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE  
FEDERAL ACCOUNT

Date of Disbursement  
07/30/2004

Mailing Address  
2770 WEST GARDNER

City State Zip Code  
FAIRFIELD CA 94534

Purpose of Disbursement  
TRANSFER OF LEVIN FUNDS

Amount of Each Disbursement this Period  
344

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

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

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

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

**E.** Full Name (Last, First, Middle Initial) / Full Organization Name

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

GUSTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (test page this line number only) ▶

344  
344



**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**

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

FOR LINE NUMBER: PAGE 49 OF  
(check only one)  4a  4c  5  
 4b  4d

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NAME OF COMMITTEE (in Full)

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) / Full Organization Name			Date of Disbursement
A. JUSTIN'S CRAB COMPANY			01/20/2009
Mailing Address 5100 FULTON DRIVE, SUITE D			Amount of Each Disbursement this Period 3,790.00
City	State	Zip Code	
FAIRFIELD	CA	94533	
Purpose of Disbursement FOOD FOR FUND-RAISER			
Full Name (Last, First, Middle Initial) / Full Organization Name			Date of Disbursement
B. BDES			01/30/2009
Mailing Address 140 WEST J STREET			Amount of Each Disbursement this Period 1,890.00
City	State	Zip Code	
BENICIA	CA	94510	
Purpose of Disbursement HALL RENTAL FOR FUNDRAISER			
Full Name (Last, First, Middle Initial) / Full Organization Name			Date of Disbursement
C. LOWRIE, MARTY			01/31/2009
Mailing Address 2790 VISTA GRANDE			Amount of Each Disbursement this Period 3,560.00
City	State	Zip Code	
FAIRFIELD	CA	94534	
Purpose of Disbursement REIMBURSEMENT FOR DUMPSTER RENTAL			
Full Name (Last, First, Middle Initial) / Full Organization Name			Date of Disbursement
D. RUTH FORNEY FOR SUPERVISOR			02/25/2009
Mailing Address PO BOX 672			Amount of Each Disbursement this Period 1,000.00
City	State	Zip Code	
FAIRFIELD	CA	94533	
Purpose of Disbursement LOCAL/STATE POLITICAL CONTRIBUTION			
Full Name (Last, First, Middle Initial) / Full Organization Name			Date of Disbursement
E. MACHADO FOR SENATE 2004			05/26/2009
Mailing Address PO BOX 1290			Amount of Each Disbursement this Period 5,000.00
City	State	Zip Code	
STOCKTON	CA	95208	
Purpose of Disbursement STATE POLITICAL CONTRIBUTION			
SUBTOTAL of Disbursements This Page (optional)			12,230.00
TOTAL This Period (last page this line number only)			

**SCHEDULE L-B (FEC Form 3X)**

**ITEMIZED DISBURSEMENTS OF LEVIN FUNDS**

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

FOR LINE NUMBER: PAGE 5A OF 5  
 4a  4c  5  
 4b  4d

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NAME OF COMMITTEE (in Full)

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE  
 Date of Disbursement: 06/23/2004  
 Mailing Address: 1201 K STREET, STE 1100  
 City: SACRAMENTO State: CA Zip Code: 95814  
 Amount of Each Disbursement this Period: \$5000.00  
 Purpose of Disbursement: STATE POLITICAL CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE  
 Date of Disbursement: 05/29/2004  
 Mailing Address: 2790 VISTA GRANDE FEDERAL ACCOUNT  
 City: FAIRFIELD State: CA Zip Code: 94534  
 Amount of Each Disbursement this Period: \$1200  
 Purpose of Disbursement: TRANSFER OF ALLOCABLE NON-FEDERAL FUNDS (SEE SCHEDULE H-3)

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE  
 Date of Disbursement: 07/30/2004  
 Mailing Address: 2790 VISTA GRANDE FEDERAL ACCOUNT  
 City: FAIRFIELD State: CA Zip Code: 94534  
 Amount of Each Disbursement this Period: \$2000  
 Purpose of Disbursement: TRANSFER OF ALLOCABLE NON-FEDERAL FUNDS (SEE SCHEDULE H-3)

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE  
 Date of Disbursement: 08/16/2004  
 Mailing Address: 2790 VISTA GRANDE FEDERAL ACCOUNT  
 City: FAIRFIELD State: CA Zip Code: 94534  
 Amount of Each Disbursement this Period: \$2000  
 Purpose of Disbursement: TRANSFER OF ALLOCABLE NON-FEDERAL FUNDS (SEE SCHEDULE H-3)

**E.** Full Name (Last, First, Middle Initial) / Full Organization Name: SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE  
 Date of Disbursement: 09/26/2004  
 Mailing Address: 2790 VISTA GRANDE FEDERAL ACCOUNT  
 City: FAIRFIELD State: CA Zip Code: 94534  
 Amount of Each Disbursement this Period: \$000  
 Purpose of Disbursement: TRANSFER OF ALLOCABLE NON-FEDERAL FUNDS (SEE SCHEDULE H-3)

SUBTOTAL of Disbursements This Page (optional) \_\_\_\_\_

TOTAL This Period (last page the line number entry) \_\_\_\_\_

623200

**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**

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

FOR LINE NUMBER: PAGE 57 OF  
(check only one)  4a  4c  5  
 4b  4d

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NAME OF COMMITTEE (In Full)

SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) / Full Organization Name

A. SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE,  
FEDERAL ACCOUNT

Date of Disbursement

07/09/2004

Mailing Address

2790 VISTA GRANDE

City State Zip Code  
FAIRFIELD CA 94534

Amount of Each Disbursement this Period

3200.00

Purpose of Disbursement

TRANSFER OF ALLOWABLE NON-FEDERAL FUNDS (SEE SCHEDULE H-3)

Full Name (Last, First, Middle Initial) / Full Organization Name

B. SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE,  
FEDERAL ACCOUNT

Date of Disbursement

06/07/2004

Mailing Address

2790 VISTA GRANDE

City State Zip Code  
FAIRFIELD CA 94534

Amount of Each Disbursement this Period

5952.00

Purpose of Disbursement

TRANSFER OF ALLOWABLE NON-FEDERAL FUNDS (SEE SCHEDULE H-3)

Full Name (Last, First, Middle Initial) / Full Organization Name

C. SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE,  
FEDERAL ACCOUNT

Date of Disbursement

07/16/2004

Mailing Address

2790 VISTA GRANDE

City State Zip Code  
FAIRFIELD CA 94534

Amount of Each Disbursement this Period

6528.00

Purpose of Disbursement

TRANSFER OF ALLOWABLE NON-FEDERAL FUNDS (SEE SCHEDULE H-3)

Full Name (Last, First, Middle Initial) / Full Organization Name

D. SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE,  
FEDERAL ACCOUNT

Date of Disbursement

08/01/2004

Mailing Address

2790 VISTA GRANDE

City State Zip Code  
FAIRFIELD CA 94534

Amount of Each Disbursement this Period

768.00

Purpose of Disbursement

TRANSFER OF ALLOWABLE NON-FEDERAL FUNDS (SEE SCHEDULE H-3)

Full Name (Last, First, Middle Initial) / Full Organization Name

E. SOLANO COUNTY DEMOCRATIC CENTRAL COMMITTEE,  
FEDERAL ACCOUNT

Date of Disbursement

09/10/2004

Mailing Address

2790 VISTA GRANDE

City State Zip Code  
FAIRFIELD CA 94534

Amount of Each Disbursement this Period

899.00

Purpose of Disbursement

TRANSFER OF ALLOWABLE NON-FEDERAL FUNDS (SEE SCHEDULE H-3)

SUBTOTAL of Disbursements This Page (optional)

2060.00

TOTAL This Period (last page this line number only)

20528.00

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked 10-20-04
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<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 (5/2004)	10-22-04 DATE PREPARED