

**FEC  
FORM 3X**

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

RECEIVED

2011 NOV 17 AM 9:40

Office Use Only  
FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

FULLMAN COUNTY REPUBLICAN CENTRAL COMMITTEE

ADDRESS (number and street) PO BOX 1623  
211 S WASHINGTON ST SONORA, CA (TEMP)  
JAMESTOWN CA 95321-  
Check if different than previously reported. (ACC)

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

C00325464

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)

July 15  
Quarterly Report (Q2)

X October 15  
Quarterly Report (Q3)

January 31  
Year-End Report (YE)

July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)

Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

M M / D D / Y Y Y Y

Election on

in the  
State of

(d) 30-Day  
POST-Election  
Report for the:

General (30G)

Runoff (30R)

Special (30S)

M M / D D / Y Y Y Y

Election on

in the  
State of

5. Covering Period 07' 01' 2011 through 09' 30' 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JOAN C KERN

Signature of Treasurer

Joan C Kern

Date

11' 06' 2011

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

Office  
Use  
Only

**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

*C00325464*

Write or Type Committee Name

*TUOLUMNE COUNTY REPUBLICAN CENTRAL COMMITTEE*

Report Covering the Period:

From:

*07' 01' 2011*

To:

*09' 30' 2011*

**COLUMN A  
This Period**

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

|  |                 |
|--|-----------------|
| 6. (a) Cash on Hand<br>January 1, <i>2011</i>  | <i>1,675.13</i> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <i>3,402.42</i> |
| (c) Total Receipts (from Line 19).....   | <i>1,065.27</i> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....      | <i>4,467.69</i> |
| 7. Total Disbursements (from Line 31).....   | <i>6,296.36</i> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                 | <i>3,070.63</i> |
| 9. Debts and Obligations Owed TO<br>the Committee (itemize all on<br>Schedule C and/or Schedule D).....  | <i>0</i>        |
| 10. Debts and Obligations Owed BY<br>the Committee (itemize all on<br>Schedule C and/or Schedule D)..... | <i>0</i>        |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

*C00325464*

Page 3

Write or Type Committee Name

*TUOLUMEE COUNTY REPUBLICAN CENTRAL COMMITTEE*

Report Covering the Period:

From:

*04'01'2011*

To:

*06'30'2011*

**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).....

, *1,000.00*

, *2,060.00*

(ii) Unitemized.....

, *65.00*

, *5,630.82*

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

, *1,065.00*

, *7,690.82*

(b) Political Party Committees.....

, , -

, , -

(c) Other Political Committees  
(such as PACs).....

, , -

, , -

(d) Total Contributions (add Lines  
11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5).....▶

, *1,065.00*

, *7,690.82*

12. Transfers From Affiliated/Other

Party Committees.....

, , -

, , -

13. All Loans Received.....

, , -

, , -

14. Loan Repayments Received.....

, , -

, , -

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

, , -

, , -

16. Refunds of Contributions Made

to Federal Candidates and Other  
Political Committees.....

, , -

, , -

17. Other Federal Receipts

(Dividends, Interest, etc.).....

, , *27*

, , *1.04*

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

, , -

, , -

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

, , -

, , -

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

, , -

, , -

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

, *1,065.27*

, *7,691.86*

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

, *1,065.27*

, *7,691.86*

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 1,065.00                      | 7,690.82                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            |                               |                                   |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 1,065.00                      | 7,690.82                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 13,970.6                      | 6,296.36                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....                |                               |                                   |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 13,970.6                      | 6,296.36                          |

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C00325464

## SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE OF

(check only one)

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

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)

TULUMNE COUNTY REPUBLICAN CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DENHAM JEFF

Mailing Address

1605 LONGWORTH HOB

City

WASHINGTON, DC

State

Zip Code

20515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

U.S. HOUSE OF REPRE

Occupation

CONGRESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

08/12/2011

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. 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 / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. 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 / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

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C00325464

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

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

 FOR LINE NUMBER:  
 (check only one)

PAGE OF

|                              |                              |                              |                              |                             |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 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)

TULUMNE COUNTY REPUBLICAN CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. DAY CHARLES A

Date of Disbursement

09 ' 11 ' 2011

Mailing Address

14180 AVENIDA CENTRAL

City

LA GRANGE

State

CA

Zip Code

95329

Purpose of Disbursement

CONVENTION ADMISSION

001

Candidate Name

Amount of Each Disbursement this Period

212.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. KERN JOAN C

Date of Disbursement

08 ' 11 ' 2011

Mailing Address

16524 S. CREEKSIDE DR

City

SONORA

State

CA

Zip Code

95370

Purpose of Disbursement

TREASURER EXPENSE

001

Candidate Name

Amount of Each Disbursement this Period

36.73

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. RYAN, PATRICIA

Date of Disbursement

07 ' 28 ' 2011

Mailing Address

18717 MILLVILL RD #154

City

State

Zip Code

Purpose of Disbursement

TELEPHONE MINUTES

001

Candidate Name

Amount of Each Disbursement this Period

19.88

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

C00325464

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

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

FOR LINE NUMBER:  
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (in Full)

THOULME COUNTY REPUBLICAN CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. RYAN, PATRICIA

Date of Disbursement

07 / 07 / 2011

Mailing Address

18717 MILL VILLA RD #154

City

JAMESTOWN

State

CA

Zip Code

95327

Purpose of Disbursement

SECRETARY EXPENSE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

41.10

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

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C00325464

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

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

FOR LINE NUMBER:  
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (in Full)

**TUOLUMNE COUNTY REPUBLICAN CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial)

A. **SUMMERVILLE H.S. JAZZ AT 8**

Date of Disbursement

08 ' 23 ' 2011

Mailing Address

**17555 TUOLUMNE RD.**

City

**TUOLUMNE**

State

**CA**

Zip Code

**95379**

Purpose of Disbursement

**FUND RAISER ENTERTAINMENT**

**003**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**150.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **MOTHER LODE FAIR**

Date of Disbursement

07 ' 01 ' 2011

Mailing Address

**220 SOUTHWATE DR**

City

**SONORA**

State

**CA**

Zip Code

**95370**

Purpose of Disbursement

**FAIR ADMISSION**

**003**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**129.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. **PAC N COPY**

Date of Disbursement

08 / 08 / 2011

Mailing Address

**13767 MONOWY STE A**

City

**SONORA**

State

**CA**

Zip Code

**95370**

Purpose of Disbursement

**FUND RAISER TICKET PRINTING**

**003**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**199.04**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

11030690984

C00325464

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

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

FOR LINE NUMBER:  
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (In Full)

**TUOLUMNE COUNTY REPUBLICAN CENTRAL COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. **TUOLUMNE COUNTY REPUBLICAN WOMEN**

MM / DD / YYYY  
09 / 06 / 2011

Mailing Address

**410 CHRIS LUCKIE 21680 FORTUNA MINE RD**

City

**SONORA**

State

**CA**

Zip Code

**95370**

Purpose of Disbursement

**FUND RAISER LIQ LICENSE**

**003**

Candidate Name

Amount of Each Disbursement this Period

**50.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. **TUOLUMNE COUNTY REPUBLICAN WOMEN**

MM / DD / YYYY  
09 / 11 / 2011

Mailing Address

**410 CHRIS LUCKIE 21680 FORTUNA MINE RD**

City

**SONORA**

State

**CA**

Zip Code

**95370**

Purpose of Disbursement

**FUND RAISER FACILITY**

**003**

Candidate Name

Amount of Each Disbursement this Period

**100.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. **RYAN PATRICIA**

MM / DD / YYYY

Mailing Address

City

**JAMESTOWN**

State

**CA**

Zip Code

**95327**

Purpose of Disbursement

**FAIR FLYERS PROMO**

**003**

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

C00325464

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

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

 FOR LINE NUMBER:  
 (check only one)

PAGE OF

|                              |                              |                              |                              |                             |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 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)

THOMAS COUNTY REPUBLICAN CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JTT ADVERTISING

Date of Disbursement

Mailing Address

5007 AVENUE G PLACE

07 07 2011

City

KEARNY

State

NE

Zip Code

68847

Purpose of Disbursement

ADVERTISING

004

Candidate Name

N/A

Category/  
Type

Amount of Each Disbursement this Period

500.00

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. \_\_\_\_\_ Date of Disbursement

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. \_\_\_\_\_ Date of Disbursement

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

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

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

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 checked="" type="checkbox"/> USPS First Class Mail | Postmarked<br>11/7/11 |
|---|-----------------------|

|  |                  |
|--|------------------|
| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
|--|------------------|

|  |            |
|--|------------|
| <input type="checkbox"/> USPS Priority Mail                                      | Postmarked |
| Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/> |            |

|  |            |
|--|------------|
| <input type="checkbox"/> USPS Express Mail | Postmarked |
|--|------------|

☐ Postmark Illegible

☐ No Postmark


|  |               |
|--|---------------|
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| Next Business Day Delivery <input type="checkbox"/>            |               |

|  |                 |
|--|-----------------|
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
|--|-----------------|

|   |                 |
|---|-----------------|
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
|---|-----------------|

|   |                 |
|---|-----------------|
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
|---|-----------------|

|   |                               |
|---|-------------------------------|
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |
|---|-------------------------------|

  
PREPARER  
(3/2005)

11/17/11  
DATE PREPARED

11030590987